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DLN: 93493317063124

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 <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

| B Ch | eck ıf ap | plicable | C Name of organization PHARMACEUTICAL RESEARCH & MA | | 2-31-2013 | D Emplo | yer iden | tification number |
|--------------------------------|------------------------|--------------------------------|---|---|--------------------|----------------------------------|-----------------|----------------------------|
| _ | dress cha | _ | Doing Business As | | | 53-02 | 241211 | |
| | me char | _ | PHRMA | | | | | |
| | tial retur rminated | | Number and street (or P O box if n 950 F STREET NW NO 300 | nail is not delivered to street address) Room | /suite | | one numb | |
| _ | iended r | eturn pending | City or town, state or province, coul WASHINGTON, DC 20004 | ntry, and ZIP or foreign postal code | | , , | | 211,525,869 |
| | | | F Name and address of prin JOHN J CASTELLANI 950 F STREET NW NO 300 | ncipal officer | | s this a group ubordinates? | return f | |
| | | | WASHINGTON,DC 20004 | | ir | re all subordi icluded? | | Γ Y es Γ No |
| | | | | (insert no) 4947(a)(1) or 527 | If | "No," attach | a list (| see instructions) |
| | | | /W PHRMA ORG | | H(c) (| Group exempt | ion num | ber 🗠 |
| | m of org | | Corporation Trust Association | n Other 🕨 | L Year | of formation 19 | 58 M S | State of legal domicile DE |
| Governance | P | HRMA' | AND LIFE-ENHANCING NEW | on or most significant activities DCACY FOR PUBLIC POLICIES TH MEDICINES FOR PATIENTS BY PH | | | | |
| | 2 0 | Check th | nis box 🔭 if the organization di | scontinued its operations or dispose | d of more tha | an 25% of its | net ass | ets |
| Activities & | 1 | | | ing body (Part VI, line 1a) | | | 3 | 31 |
| Ĭ | 1 | | | of the governing body (Part VI, line 1 calendar year 2013 (Part V, line 2a) | | | 5 | 207 |
| ä | 1 | | | ecessary) | | | 6 | 2,82 |
| | 7a ⊤ | otal uni | related business revenue from P | art VIII, column (C), line 12 | | | 7a | . (|
| | b∧ | let unre | lated business taxable income f | rom Form 990-T, line 34 | | | 7b | (|
| | | _ | | | <u> </u> | Prior Year | | Current Year |
| ā | 8 | | | ne 1h) | • | 200 404 | 0 | 202 800 617 |
| Ravenue | 9 10 | - | , | ne 2g) | • | 200,404, 3,785, | | 202,890,617 1,800,589 |
| Щ. | 11 | | | lines 5, 6d, 8c, 9c, 10c, and 11e) | • | 29, | | 20,780 |
| | 12 | Total r 12) . | revenue—add lines 8 through 11 | (must equal Part VIII, column (A), | | 204,219, | 082 | 204,711,986 |
| | 13 | | · | IX, column (A), lines 1-3) | | 18,111, | | 16,065,665 |
| \$? | 14 15 | | ts paid to or for members (Part I es, other compensation, employe | 54,592,800 | | 53,357,187 | | |
| Expenses | 16a | - | | column (A), line 11e) | | · · · · | | |
| ੜੇ | b | Total fu | ndraısıng expenses (Part IX, column (D |), line 25) ▶ 0 | _ | | | |
| _ | 17 | | | lines 11a-11d, 11f-24e) | | 133,413, | 799 | 132,706,908 |
| | 18 | | | st equal Part IX, column (A), line 25 | | 206,117, | | 202,129,760 |
| Net Assets or Fund Balances | 19 | Reven | ue less expenses Subtract line | 18 from line 12 | | -1,898, ning of Curre Year | | 2,582,226 End of Year |
| SSel Base | 20 | Total | assets (Part X, line 16) | | | 127,678, | 178 | 130,160,555 |
| A F | 21 | Total I | iabilities (Part X, line 26) | | • | 77,874, | | 46,428,561 |
| | 22 | | | line 21 from line 20 | | 49,803, | 236 | 83,731,994 |
| Unde my k | nowled arer ha | lties of place and less any kr | belief, it is true, correct, and con nowledge | amined this return, including accomp nplete Declaration of preparer (other | | | | |
| | | | or print name and title | | | | | |
| | | P | rint/Type preparer's name DEBORAH G KOSNETT | Preparer's signature | Date 2014-11-12 | Check If self-employed | PTIN P002907 | 720 |
| Paid | | F | irm's name ► TATE AND TRYON | | | Firm's EIN F 5 | l | |
| | pare Onl | | ırm's address ► 2021 L STREET NW SU | ITE 400 | | Phone no (202 | 293-220 | 00 |
| U 30 | , U III | w | | | 1 | | | |

WASHINGTON, DC 20036
May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

| 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 | | No |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | | No |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | Yes | |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | Yes | |
| 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? <i>If "Yes," complete Schedule D, Part V</i> | 10 | | No |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | Yes | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | No |
| C | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of | 11c | | No |
| d | Did the organization report an amount for other assets in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11d | | No |
| e | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | | V | |
| | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11e 11f | Yes | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | | No |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | Yes | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Yes | |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | Yes | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | Yes | |
| 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 | | |

| Par | t IV Checklist of Required Schedules (continued) | | | |
|-----|---|-----|-----|----|
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | Yes | |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | No |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i> | 23 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| 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? <i>If "Yes," complete Schedule L, Part I</i> | 25a | | |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | |
| 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 | Yes | |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | Yes | |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | No |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | 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? <i>If "Yes," complete Schedule M</i> | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | | 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 | Yes | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | Yes | |
| 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 | | No |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | 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 | | | |
|----------|---|----------|-----|-----|
| | encek in senedule o contains a response of note to any line in this fait v | <u> </u> | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 424 | | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0 | 1 | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | 1 | | |
| | 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 | | | |
| 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 |
| | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | | .,, |
| | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | Yes | |
| ь | · | | | |
| | If "Yes," enter the name of the foreign country ►JA 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 |
| | 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 | | |
| | 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 | Yes | |
| | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | Yes | |
| | Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and | 7a | | |
| h | services provided to the payor? | 7b | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to | | | |
| | file Form 8282? | 7c | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 3 | 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. | _ | 1 | |
| | 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 | | |
|) | Section 501(c)(7) organizations. Enter | | | |
| а | 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 | • | | |
| L | Section 501(c)(12) organizations. Enter | | | |
| | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | - | | |
| 2a | 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 | | | |
| 3 | Section 501(c)(29) qualified nonprofit health insurance issuers. | 1 | | |
| | Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O | 13a | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | | | |
| C | Enter the amount of reserves on hand | Į | | |
| ła | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | No |
| L | If "Vec " has it filed a Form 720 to report these payments? If "No " provide an evaluation in Schedule O | 4.41 | | |

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.

| 14 Did the organization have a written document retention and destruction policy? | Se | ection A. Governing Body and Management | | | |
|--|---|---|--|-----------------------------|----------|
| Tithere are maternal 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 | | | | Yes | No |
| body, or if the governing body delepated broad authority to an executive committee or similar committee, explain in Schedule O b. Enter the number of voting members included in line 1a, above, who are independent. 2 Did any officer, director, trustee, or key employee? 3 Did the organization delegate control over management dutes: customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was field? 5 Did the organization have members or stockholders? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 7 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? 5 Did the organization of the members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 6 Did the organization of the members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Did the organization of the members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Did the organization of the members, stockholders, or other persons of the meetings held or written actions undertaken during the year by the following 8 The government beds: 8 Did the organization of the organization reserved to (or subject to approval by) members, stockholders, or a file and the organization of the proparation have written propriets and provide the meas and addresses in Schedule O. 9 Section B. Policies (This Section B req | 1a | 1 18 1 .51 | | | |
| 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors of trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was hield? 5 Did the organization become aware during the year of a significant diversion of the organization's assests? 5 Did the organization have members of stockholders? 6 Did the organization have members of stockholders? 7 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? 8 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 9 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 Did the organization or the poverning body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization or some said and resease in Schedule O. 9 No 8 Eaction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 Vess No 10 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? 10 Did the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization by the program of the following person include a review and approval by the following person include a review and proval by the p | | body, or if the governing body delegated broad authority to an executive committee | | | |
| so their officer, director, frustee, or key employee? 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Mo Did the organization have members or stockholders? 7 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 8 Did the organization foremporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization making address? If Trees, provide the amena and addresses in Schedule O 8 Section B. Policies (This Section B requests information about policies not required by the Internal New Vers No. 8 To such that the form of 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? 10 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 is every the process of the organization have a written conflict of interest policy? If No. goto line 13 10 Did the organization have a written conflict of interest policy? If No. goto line 13 10 Did the organization have a written document retention and destruction policy? 11 Did the organi | b | | | | |
| supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization seases? 6 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 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? 8 A ree any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or presons other than the governing body? 8 Did the organization chemporaneously document the meetings held or written actions undertaken during the year by the following 8 The governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 8 Leach committee with authority to act on behalf of the governing body? 9 Leach the governing body? 10 Leach committee with authority to act on behalf of the governing body before filling the form? 10 Leach the governing body? 11 Leach the governing body? 12 Leach the governing body? 12 Leach the governing body? 13 Leach the governing body leach the governing body before filling the form? 14 L | 2 | | 2 | | No |
| field? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members or stockholders? 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? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Did the organization will address? If "res," provide the names and addresses in Schedule 0 Did the organization have local chapters, branches, or affiliates? Did the organization have local chapters, branches, or affiliates? Did the organization have local chapters, branches, or affiliates? 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 by before filling the form? Did the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization by before filling the form? Did the organization have a written operations are consistent with the organization by before filling the form? Did the organization have a written operation of interest policy? If "No." go to line 13. Did the organization have a written document retention and destruction policy? Did the organization will be a second organization of the deliberation and decis | 3 | | 3 | | No |
| 10 Did the organization have members or stockholders? 10 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? 10 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 11 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 12 The governing body? 13 The governing body? 14 The state of the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 13 The governing body? 14 The state of the organization has the state of the organization in mailing address? If "Post," provide the names and addresses in Schedule O. 15 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 16 Did the organization have local chapters, branches, or affiliates, and branches to ensure their operations are consistent with the organization is exempt purposes? 16 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 is exempt purposes? 11 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12 Did the organization have a written conflict of interest policy? If "No," go to line 13 13 Did the organization have a written conflict of interest policy? If "No," go to line 13 14 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was dane 15 Did the organization have a written whistleblower policy? 15 Did the organization have a written document retention and destruction policy? 16 Did the organization have a | 4 | | 4 | Yes | |
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| The position of the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? A rea my governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? B. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the governing body? B. Each committee with authority to act on behalf of the form and addresses in Schedule O. B. Did the organization have local chapters, branches, or affiliates? B. Did the organization have a written conflictes and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization body before filing the form? B. Wess. B. Did the organization have a written conflictes and procedures governing the soverning body before filing the form? B. Wess. B. Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done B. Did | 6 | Did the organization have members or stockholders? | 6 | Yes | |
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| year by the following a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Did the organization have local chapters, branches, or affiliates? International of 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? International organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Did the organization have a written conflict of interest policy? If "No," go to line 13 Did the organization have a written whistleblower policy? If "No," go to line 13 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? The organization have a written whistleblower policy? The organization have a written whistleblower policy? The organization of CEO, Executive Director, or top management official The organization of CEO, Executive Director, or top management official The organization in your benefit or policy or procedure requiring the organization to evaluate its participation in joint venture arrangements with a taxable entity during the year? International contributes assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | b | | 7b | Yes | |
| b Each committee with authority to act on behalf of the governing body? 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. Section B. Policies (This Section B requests information about policies not required by the Internal Reverue Code.) Ves No 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990 11a Did the organization have a written conflict of interest policy? If "No," go to line 13 11a Use Yes 11b Ves 12a Yes 12b Ves 13 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 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? 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? 15 Did the organization's CEO, Execu | 8 | | | | |
| 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. 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? In "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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a No b Describe in Schedule O the process, if any, used by the organization to review this Form 990 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. 12b Yes 13 Did the organization have a written whistleblower policy? 14 Yes 15 Did the organization have a written document retention and destruction policy? 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 5 Did the organization invest in, contribute assets to, or participate in a joint venture arrangement with a taxable entity during the year? b Universe; did the organization invest in, contribute assets to, or participate in a joint venture arrangement with a taxable entity during the year? | а | The governing body? | 8a | Yes | |
| reganization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? No No 10a 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 Internal Revenue Code. 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a No 12b Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes 12c Ves 12b Yes 12d Yes 12b Yes 12d Yes 12d Yes 12d | b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 10a Did the organization have local chapters, branches, or affiliates? 10a 1 | 9 | | 9 | | No |
| 10a Did the organization have local chapters, branches, or affiliates? 10b 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Yes 12c Ves 13 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a Yes 15b Yes 15b Yes 15c Other officers or key employees of the organization 15d Other officers or key employees of the organization 15d Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15d 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? | | organizacion's manning dadress in res, provide the names and addresses in schedule of the thirty | | | |
| 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes 12b Yes 12b Yes 12c Yes 13 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written whistleblower policy? 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? 15a Yes 15 Other officers or key employees of the organization 15a Yes 15b Yes 16a No 17e 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 16a No | Se | | eveni | ıe Cod | e.) |
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| b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | No |
| b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 10a b | Did the organization have local chapters, branches, or affiliates? | 10a 10b | | No No |
| rise to conflicts? | 10a b 11a | Did the organization have local chapters, branches, or affiliates? | 10a 10b | | No No |
| In Schedule O how this was done | 10a b 11a b | Did the organization have local chapters, branches, or affiliates? | 10a 10b | Yes | No No |
| Did the organization have a written document retention and destruction policy? | 10a b 11a b 12a b | Did the organization have local chapters, branches, or affiliates? | 10a 10b 11a | Yes | No No |
| Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official | 10a b 11a b 12a b | Did the organization have local chapters, branches, or affiliates? | 10a 10b 11a 12a 12b | Yes | No No |
| Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official | 10a b 11a b 12a b | Did the organization have local chapters, branches, or affiliates? | 10a 10b 11a 12a 12b | Yes Yes Yes | No No |
| b Other officers or key employees of the organization | 10a b 11a b 12a b | Did the organization have local chapters, branches, or affiliates? | 10a 10b 11a 12a 12b 12c 13 | Yes Yes Yes Yes Yes | No No |
| 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? | 10a b 11a b 12a b | Did the organization have local chapters, branches, or affiliates? | 10a 10b 11a 12a 12b 12c 13 | Yes Yes Yes Yes Yes | No No |
| Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 10a b 11a b 12a b c | Did the organization have local chapters, branches, or affiliates? | 10a 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes Yes Yes Yes | No No |
| taxable entity during the year? | 10a b 11a b 12a b c 13 14 15 | Did the organization have local chapters, branches, or affiliates? | 10a 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes Yes Yes Yes Yes | No No |
| 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? | 10a b 11a b 12a b c 13 14 15 | Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official | 10a 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes Yes Yes Yes Yes | No No |
| Section C Disclosure | 10a b 11a b 12a b c 13 14 15 a b | Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 10a 10b 11a 12a 12b 12c 13 14 | Yes Yes Yes Yes Yes Yes Yes | No No |
| Section C. Disclosure | 10a b 11a b 12a b c 13 14 15 a b | Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | 10a 10b 11a 12a 12b 12c 13 14 15a 15b | Yes Yes Yes Yes Yes Yes Yes | No No |

- 17 List the States with which a copy of this Form 990 is required to be filed ►CA
- 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
 ►ARDELL PERSINGER 950 F STREET NW NO 300
 WASHINGTON,DC 20004 (202)835-3400

| Form 990 | (2013 | |
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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) A verage hours per week (list any hours for related organizations below dotted line) | more t | han o | one l both | box, an o | heck sofficer (stee) Highest compensated | Former | (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 |
|--------------------|--|--------|-------|---------------|--------------|--|--------|--|--|--|
| | | | | | | | | | | |
| | | | | | | | | | | |

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

| organizations below dotted line) Sub-Total | | (A) Name and Tıtle | (B) Average hours per week (list any hours | more t | han o n is | ne l both | oox, an d | heck unless officer stee) | 6 | compe from organiza | rtable nsation i the tion (W- | able Reportable compensation from related on (W- organizations (W- | | (F) Estimated amount of other compensation from the organization and | | | |
|---|------|------------------------------|--|------------------------------------|-----------------------|--------------|--------------|------------------------------------|-----------|---------------------------|--|--|--------|--|-----------|--|--|
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | organizations below | Individual trusties or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1099 | -MISC) | 2/1099-MISC) | | relate | ed | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | 4 | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | \bot | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A. d Total (add lines 1b and 1c) | | | | | | | | | | | | | + | | | | |
| Total from continuation sheets to Part VII, Section A | 1b | Sub-Total | | | <u> </u> | | | | <u> </u> | | | | +- | | | | |
| 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 133 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 | | | s to Part VII, S | ection A | ٠. | | | | - | | | | + | | | | |
| \$100,000 of reportable compensation from the organization 133 Yes No | d | | | | | | | • | Þ | | | | 0 | , | 2,013,702 | | |
| 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 | 2 | | | | | | | d abov | e) w | ho receive | ed more th | aan | | | | | |
| on line 1a? If "Yes," complete Schedule J for such individual | | | | | | | | | | | | Г | | Yes | No | | |
| 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 | 3 | j , | , | | | , | key • | emplo | yee, • | or highes , | t compen | sated employee | 3 | | No | | |
| 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 | 4 | | | | | | | | | | | | | | | | |
| 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 COVINGTON & BURLING LLP 1201 PENNSYLVANIA AVE NW WASHINGTON DC 20004 PUBLIC AFFAIRS COMPANY 333 SOUTH SEVENTH STREET STE 2250 MINNEAPOLIS MN 55402 ARNOLD & PORTER LLP 555 12TH STREET NW WASHINGTON DC 20004 MCKINSEY & COMPANY INC 55 E 52ND STREET NEW YORK NY 10022 AVALERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 RESEARCH & CONSUL NO (B) (C) Compensation (C) Compensation COVINGTON & BURLING LLP 1201 PENNSYLVANIA AVE NW WASHINGTON DC 20004 LEGAL CONSULTING SERVICES 2,404,453 WORK FOR STATE/ PROFESSIONAL SERVICES TO 2,274,048 MCKINSEY & COMPANY INC 55 E 52ND STREET NEW YORK NY 10022 AVALERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 RESEARCH & CONSUL 1,609,002 | | | | • • | • | • | ٠ | | • | | | | 4 | Yes | | | |
| 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 COVINGTON & BURLING LLP 1201 PENNSYLVANIA AVE NW WASHINGTON DC 20004 PUBLIC AFFAIRS COMPANY 333 SOUTH SEVENTH STREET STE 2250 MINNEAPOLIS MN 55402 ARNOLD & PORTER LLP 555 12TH STREET NW WASHINGTON DC 20004 MCKINSEY & COMPANY INC 55 E 52ND STREET NEW YORK NY 10022 AVAILERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 Description of services (C) Compensation COVINGTON & BURLING LLP 1201 PENNSYLVANIA AVE NW WASHINGTON DC 20004 LEGAL CONSULTING SERVICES 2,404,453 WORK FOR STATE/ PROFESSIONAL SERVICES TO ENHANCE PHRMA'S AVAILERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 EACH CALE AND ADDRESS AND | 5 | | | | | | | | • | _ | anızatıon • • • | or individual for | 5 | | No | | |
| COVINGTON & BURLING LLP 1201 PENNSYLVANIA AVE NW WASHINGTON DC 20004 ARNOLD & PORTER LLP 555 12TH STREET NW WASHINGTON DC 20004 MCKINSEY & COMPANY INC 55 E 52ND STREET NEW YORK NY 10022 AVALERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 (C) (C) (B) (C) (C) Description of services Compensation Compensatio | Se | ection B. Independent Co | ntractors | | | | | | | | | | | | | | |
| (A) Name and business address Description of services COVINGTON & BURLING LLP 1201 PENNSYLVANIA AVE NW WASHINGTON DC 20004 LEGAL CONSULTING SERVICES 3,204,753 PUBLIC AFFAIRS COMPANY 333 SOUTH SEVENTH STREET STE 2250 MINNEAPOLIS MN 55402 OUTREACH/MEDIA RELATIONS WORK FOR STATE/ ARNOLD & PORTER LLP 555 12TH STREET NW WASHINGTON DC 20004 MCKINSEY & COMPANY INC 55 E 52ND STREET NEW YORK NY 10022 AVALERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 RESEARCH & CONSUL (C) Compensation COVINGTON & Description of services Compensation Compensa | 1 | - | | | | | | | | | | · · | | tax vear | | | |
| COVINGTON & BURLING LLP 1201 PENNSYLVANIA AVE NW WASHINGTON DC 20004 PUBLIC AFFAIRS COMPANY 333 SOUTH SEVENTH STREET STE 2250 MINNEAPOLIS MN 55402 ARNOLD & PORTER LLP 555 12TH STREET NW WASHINGTON DC 20004 MCKINSEY & COMPANY INC 55 E 52ND STREET NEW YORK NY 10022 AVALERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 LEGAL CONSULTING SERVICES 2,404,453 PROFESSIONAL SERVICES TO ENHANCE PHRMA'S 4,170,000 ENHANCE PHRMA'S 1,609,002 | | · · · | (A) | | acion | 101 | | - ureria | u1 y C | ur chang | | (B) | | , (C |) | | |
| WORK FOR STATE/ ARNOLD & PORTER LLP 555 12TH STREET NW WASHINGTON DC 20004 MCKINSEY & COMPANY INC 55 E 52ND STREET NEW YORK NY 10022 AVALERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 WORK FOR STATE/ LEGAL CONSULTING SERVICES 2,274,048 PROFESSIONAL SERVICES TO ENHANCE PHRMA'S 4,170,000 HEALTH POLICIES/ISSUES RESEARCH & CONSUL 1,609,002 | COVI | | | | DC 20 | 004 | | | | | LEGAL CON | SULTING SERVICES | \pm | | | | |
| MCKINSEY & COMPANY INC 55 E 52ND STREET NEW YORK NY 10022 AVALERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 PROFESSIONAL SERVICES TO ENHANCE PHRMA'S 2,170,000 HEALTH POLICIES/ISSUES RESEARCH & CONSUL 1,609,002 | | | | | NEAPO | LIS M | N 55 | 402 | | | WORK FOR | STATE/ | | | | | |
| AVALERE HEALTH LLC 1350 CONNECTICUT AVENUE SUITE 900 WASHINGTON DC 20036 HEALTH POLICIES/ISSUES RESEARCH & CONSUL 1,609,002 | | | | | | | | | | | PROFESSIO | NAL SERVICES TO | + | | | | |
| RESEARCH & CONSUL | | | | | TON P |)C 200 | 136 | | | | HEALTH PO | LICIES/ISSUES | + | | | | |
| | | | | | | | | o thos | e lıst | ted above) | | | + | | | | |

| rait v | |
|--|---|
| | |
| Contributions, Giffs, Grants and Other Similar Amounts | 1a b c d e f |
| Program Service Revenue | 220 bb cc dd ee f g |
| evenue | 3 4 5 6 6 6 6 d 6 6 6 6 6 6 6 6 6 6 6 6 6 6 |
| Other R | b 9a b 0 |
| | 11a b c d |
| | ۱ |

| VIII | Statement of Check of Sched | ule O contains a respo | nse or note to any lu | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
|------|---|--|-----------------------|-------------------|--|--------------------------------|--|
| 1a | Federated cam | paigns 1a | | | | | |
| ь | Membership du | ıes 1b | | | | | |
| c | Fundraising ev | ents 1c | | | | | |
| d | Related organiz | zations 1d | | | | | |
| e | Government grant | s (contributions) 1e | | | | | |
| f | All other contribution | ons, gifts, grants, and 1f ot included above | | | | | |
| g | Noncash contributi 1a-1f \$ | ons included in lines | | į | j | | |
| h | Total. Add line: | s 1a-1f | | | | | |
| | | | Business Code | | | | |
| 2a | MEMBERSHIP DUE | S | 900099 | 200,938,591 | 200,938,591 | | |
| Ь | MEETINGS, SECTION | ONS, STUDIES | 900099 | 1,952,026 | 1,952,026 | | |
| С | <u> </u> | | | , , | , , | | |
| d | | | | | | | |
| е | | | | | | | |
| f | All other progra | am service revenue | | | | | |
| g | Total. Add line: | s 2a-2f | | 202,890,617 | | | |
| 3 | | ome (including dividen | | | | | |
| | and other simil | aramounts) | • | 1,044,219 | | | 1,044,219 |
| 4 | | stment of tax-exempt bond | ` <u>.</u> } | | | | |
| 5 | Royalties . | (ı) Real | (II) Personal | | | | |
| 6a | Gross rents | (i) iteal | (II) I CISOIIII | | | | |
| Ь | Less rental | | | | | | |
| c | expenses Rental income | | | | | | |
| d | or (loss) Net rental inco | me or (loss) | | | | | |
| | | (ı) Securities | (II) O ther | | | | |
| 7a | Gross amount from sales of assets other | 7,570,253 | | | | | |
| b | than inventory Less cost or other basis and | 6,799,787 | 14,096 | | | | |
| | sales expenses | | | | | | |
| d | Gain or (loss) | 770,466 | -14,096 | 756,370 | | | 756,370 |
| 8a | | from fundraising | | | | | |
| | \$of contributions See Part IV , lir | | | | | | |
| Ь | Loca direct | apenses b | | | | | |
| C | | (loss) from fundraising | events | | | | |
| 9a | Gross income f | from gaming activities | | | | | |
| Ь | Less direct ex | penses b | | | | | |
| c | Net income or | (loss) from gamıng actı | vities | | | | |
| 10a | Gross sales of returns and allo | | | | | | |
| ь | Less cost of a | oods sold b | | | | | |
| | | (loss) from sales of inv | entory 🛌 | | | | |
| | Mıscellaneou | s Revenue | Business Code | | | | |
| 11a | OTHER INCOM | ME | 900099 | 20,780 | | | 20,780 |
| Ь | | | | | | | |
| c | A.II | | | | | | |
| d | | ue | | | | | |
| e | Total. Add lines | | • | 20,780 | | | |
| 12 | Total revenue. | See Instructions . | | 204,711,986 | 202,890,617 | , | 1,821,369 |

| orm | 990 (2013) | | | | Page 10 |
|---------|--|-----------------------|-----------------------------|---------------------------------|-------------------------|
| | IX Statement of Functional Expenses | | | | |
| Section | on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All | - | • | | |
| | Check if Schedule O contains a response or note to any line in this | Part IX | (B) | (c) | <u>.</u> / |
| | ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII. | (A) Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to governments and organizations in the United States See Part IV, line 21 | 14,351,066 | | | |
| 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 | 1,714,599 | | | |
| 4 | Benefits paid to or for members | 2,121,222 | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 15,983,204 | | | |
| 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 | 22,276,199 | | | _ |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 9,565,368 | | | |
| 9 | Other employee benefits | 3,668,141 | | | |
| 10 | Payroll taxes | 1,864,275 | | | |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | | | | _ |
| b | Legal | 10,095,448 | | | _ |
| c | Accounting | 244,612 | | | |
| d | Lobbying | 36,005,205 | | | _ |
| e | Professional fundraising services See Part IV, line 17 | | | | |
| f | Investment management fees | 53,578 | | | |
| g | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 44,596,974 | | | |
| 12 | Advertising and promotion | 227,416 | | | |
| 13 | Office expenses | 1,361,493 | | | |
| 14 | Information technology | 750,840 | | | |
| 15 | Royalties | , | | | |
| 16 | Occupancy | 5,871,276 | | | _ |
| 17 | Travel | 4,565,636 | | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 3,121,434 | | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 1,187,489 | | | |
| 23 | Insurance | 315,415 | | | |
| 24 | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) | | | | |
| а | MEMBERSHIPS | 11,323,220 | | | |
| b | RESEARCH STUDIES | 10,697,318 | | | |
| c | ALL OTHER EXPENSE | 1,475,608 | | | |
| d | TAXES-OTHER | 813,946 | | | |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 202,129,760 | | | |
| 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

| Pai | rt 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 |
| | 1 | Cash-non-interest-bearing | | 1 | · |
| | 2 | Savings and temporary cash investments | 67,764,196 | 2 | 73,205,151 |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | 1,564,150 | 4 | 2,248,629 |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L | | | |
| | | | 110,297 | 5 | 200,000 |
| ts | 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 | | | |
| Assets | _ | | | 6 | |
| AS | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | 2 207 042 | 8 | 2 207 000 |
| | 9 | Prepaid expenses and deferred charges | 2,297,942 | 9 | 2,267,989 |
| | 10a | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 12,227,376 | | | |
| | Ь | Less accumulated depreciation 10b 9,082,389 | · · · · · | 10c | 3,144,987 |
| | 11 | Investments—publicly traded securities | 49,078,768 | 11 | 44,800,184 |
| | 12 | Investments—other securities See Part IV, line 11 | 2,986,668 | 12 | 4,058,895 |
| | 13 | Investments—program-related See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets See Part IV, line 11 | 241,886 | 15 | 234,720 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 127,678,178 | 16 | 130,160,555 |
| | 17 | Accounts payable and accrued expenses | 20,325,000 | 17 | 14,869,660 |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | 2,530,170 | 19 | 3,122,720 |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| \mathcal{Q} | 21 | Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$ | | 21 | |
| Liabilitie | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified | | | |
| i | | 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 | 55.019.772 | 25 | 28,436,181 |
| | 26 | D | 77,874,942 | 26 | 46,428,561 |
| <u></u> | 20 | Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete | 77,074,042 | 20 | 40,420,001 |
| Fund Balance | | lines 27 through 29, and lines 33 and 34. | | | |
| <u>8</u> | 27 | Unrestricted net assets | 49,803,236 | 27 | 83,731,994 |
| 8 | 28 | Temporarily restricted net assets | | 28 | |
| 2 | 29 | Permanently restricted net assets | | 29 | |
| 丑 | | Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and | | | |
| 9 | 20 | complete lines 30 through 34. | | _ | |
| Assets | 30 | Capital stock or trust principal, or current funds | | 30 | |
| \$ 5. | 31 | Paid-in or capital surplus, or land, building or equipment fund | | 31 | |
| Ą. | 32 | Retained earnings, endowment, accumulated income, or other funds | 40,000,000 | 32 | 02 724 004 |
| Ŋet | 33 | Total net assets or fund balances | 49,803,236 | 33 | 83,731,994 |
| | 34 | Total liabilities and net assets/fund balances | 127,678,178 | 34 | 130,160,555 |

| Par | t 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 | | 204,7 | 11,986 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 202,1 | .29,760 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | 2,5 | 82,226 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 49,8 | 303,236 |
| 5 | Net unrealized gains (losses) on investments | 5 | | 1,2 | 249,274 |
| 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 | | 30,0 | 97,258 |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | | 83,7 | 31,994 |
| Par | t XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | . ᅜ |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | Νo |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both | wed on | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | Yes | |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both | ırate | | | |
| | 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 audit, review, or compilation of its financial statements and selection of an independent accountant? | nt of the | 2c | Yes | |
| | If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O | n | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133? | e | 3a | | No |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3b | | |

Software ID: Software Version:

EIN: 53-0241211

Name: PHARMACEUTICAL RESEARCH & MANUFACTURERS OF

AMERICA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| Form 990, Part VII - Compensation Compensated Employees, and Inde | pendent Co | ntracto | rs | | | , _ | , | | 1 | |
|---|---|------------------------------------|--------------------------|----------|---------------|------------------------------|--------|--|--|---|
| (A) Name and Title | (B) A verage hours per week (list any hours | Posit more th perso and a | ion (nan o n is b | ne b | ox, ι an o | inless fficer tee) | | (D) Reportable compensation from the organization (W- | (E) Reportable compensation from related organizations (W- | (F) Estimated amount of other compensation from the |
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations |
| ROBERT HUGIN | 2 00 | х | | х | | | | 0 | 0 | 0 |
| CHAIRMAN IAN READ | 0 00 | | | <u> </u> | | | | Ů | | |
| | 2 00 | x | | х | | | | 0 | 0 | 0 |
| CHAIRMAN-ELECT KENNETH C FRAZIER | 0 00 2 00 | | | | | | | | | |
| TREASURER | 0 00 | Х | | | | | | 0 | 0 | 0 |
| MARK ALTMEYER | 2 00 | х | | | | | | 0 | 0 | 0 |
| DIRECTOR LAMBERTO ANDREOTTI | 0 00 2 00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0 | 0 | 0 |
| PHILIP BLAKE | 0 00 2 00 | <u> </u> | | | | | | _ | _ | _ |
| DIRECTOR | 0 00 | Х | | | | | | 0 | 0 | 0 |
| MICHAEL BONNEY | 2 00 | х | | | | | | 0 | 0 | 0 |
| DIRECTOR ROBERT A BRADWAY | 0 00 2 00 | | | | | | | | | |
| DIRECTOR | 0 00 | х | | | | | | 0 | 0 | 0 |
| LONNEL COATS | 2 00 | | | | | | | _ | | _ |
| DIRECTOR | 0 00 | Х | | | | | | 0 | 0 | 0 |
| DEIDRE P CONNELLY | 2 00 | х | | | | | | 0 | 0 | 0 |
| DIRECTOR JOAQUIN DUATO | 0 00 | | | | | | | | | |
| DIRECTOR | 2 00 | х | | | | | | 0 | 0 | 0 |
| PAUL R FONTEYNE | 2 00 | <u></u> | | | | | | _ | | _ |
| DIRECTOR | 0 00 | Х | | | | | | 0 | 0 | 0 |
| RICHARD GONZALEZ | 2 00 | × | | | | | | 0 | 0 | 0 |
| DIRECTOR GLENN J GORMLEY MD PHD | 0 00 2 00 | | | | | | | | | |
| DIRECTOR | 0 00 | X | | | | | | 0 | 0 | 0 |
| JOSEPH JIMENEZ | 2 00 | V | | | | | | | 0 | |
| DIRECTOR | 0 00 | X | | | | | | 0 | 0 | 0 |
| JOHN JOHNSON | 2 00 | x | | | | | | 0 | 0 | 0 |
| DIRECTOR JOHN C LECHLEITER PHD | 0 00 | | | | | | | | | |
| DIRECTOR | 0 00 | X | | | | | | 0 | 0 | 0 |
| DAVE LEMUS | 2 00 | × | | | | | | 0 | 0 | 0 |
| DIRECTOR | 0 00 | | | | | | | Ů | 0 | |
| FRANK MORICH MD PHD | 2 00 | x | | | | | | 0 | 0 | 0 |
| DIRECTOR MICHAEL A NARACHI | 0 00 2 00 | | | | | | | | | |
| DIRECTOR | 0 00 | X | | | | | | 0 | 0 | 0 |
| HIROSHI NOMURA | 2 00 | × | | | | | | 0 | 0 | 0 |
| DIRECTOR | 0 00 | <u> </u> | | | | | _ | ľ | | |
| RICHARD F POPS | 2 00 | x | | | | | | 0 | 0 | 0 |
| DIRECTOR JAMES ROBINSON | 0 00 | - | | | | | | | | |
| DIRECTOR | 0 00 | X | | | | | | 0 | 0 | 0 |
| GEORGE A SCANGOS PHD | 2 00 | х | | | | | | 0 | 0 | 0 |
| DIRECTOR CONFINCEN | 0 00 | <u> </u> | <u> </u> | | | _ | _ | ľ | | |
| LARS REBIEN SORENSEN | 2 00 | x | | | | | | 0 | 0 | 0 |
| DIRECTOR | 0 00 | | | | 1 | 1 | | <u> </u> | | <u> </u> |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| Compensated Employees, and Ind (A) Name and Title | (B) A verage hours per week (list any hours | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | . | (D) Reportable compensation from the organization (W- | (E) Reportable compensation from related organizations (W- | (F) Estimated amount of other compensation from the | | |
|---|---|--|-----------------------|---------|--------------|---|---|---|--------------|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations |
| PASCAL SORIOT | 2 00 | X | | | | | | 0 | 0 | 0 |
| JOHN H STEWART | 0 00 2 00 | | | | | | | | | |
| | | × | | | | | | 0 | 0 | 0 |
| DANIEL TASSE | 0 00 2 00 | | | | | | | | | |
| DIRECTOR | 0 00 | × | | | | | | 0 | 0 | 0 |
| CHRISTOPHER VIEHBACHER | 2 00 | | | | | | | _ | _ | |
| DIRECTOR | 0 00 | X | | | | | | 0 | 0 | 0 |
| ULF WIINBERG | 2 00 | V | | | | | | 0 | 0 | |
| DIRECTOR | 0 00 | Х | | | | | | 0 | U | 0 |
| JOHN CASTELLANI | 37 50 | х | | × | | | | 3,055,705 | 0 | 548,962 |
| PRESIDENT & CEO | 0 00 | ^_ | | _^ | | | | 3,033,703 | Ů | |
| ARDELL PERSINGER | 31 50 | | | x | | | | 567,914 | 0 | 237,403 |
| CFO, EVP | 6 00 | | | | | | | , | | , |
| JAMES SPEARS | 37 50 | | | х | | | | 699,424 | 0 | 184,211 |
| JEFF BOND | 0 00 | | | | | | | | | |
| | 37 50 | | | | х | | | 525,331 | 0 | 193,379 |
| SENIOR VP WILLIAM CHIN | 0 00 37 50 | - | | | | | | | | |
| EVP | 0 00 | | | | Х | | | 797,736 | 0 | 54,623 |
| CHESTER DAVIS | 37 50 | | | | | | | | | |
| EVP | 0 00 | | | | X | | | 799,004 | 0 | 161,200 |
| ROSZELL HUNTER | 37 50 | | | | | | | | _ | |
| SENIOR VP | 0 00 | | | | × | | | 477,722 | 0 | 156,159 |
| JOSEPHINE MARTIN | 37 50 | | | | x | | | 513,273 | 0 | 164,644 |
| EVP | 0 00 | | | | | | | 313,273 | 0 | 104,044 |
| LORI REILLY | 37 50 | | | | × | | | 454,559 | 0 | 124,250 |
| EVP | 0 00 | | | | | | | 101,000 | - | |
| RICHARD SMITH | 37 50 | | | | x | | | 1,941,591 | 0 | 68,397 |
| EVP PAUT WHEADON | 0 00 | | | | | | | | | |
| DAVID WHEADON | 37 50 | | | | x | | | 1,101,371 | 0 | 51,375 |
| JAN FAIKS | 0 00 37 50 | | | | | | | | | |
| | | | | | | × | | 1,268,506 | 0 | 13,998 |
| VICE PRESIDENT ROBERT FILIPPONE | 0 00 37 50 | | | | | | | | | |
| VICE PRESIDENT | 0 00 | | | | | × | | 508,628 | 0 | 86,422 |
| ANN KAPLAN | 37 50 | | | | | | | | | |
| VICE PRESIDENT | 0 00 | | | | | × | | 884,132 | 0 | -257,444 |
| IRA WOLF | 37 50 | | | | | \ ,, | | 770 065 | _ | 442.001 |
| JAPAN REPRESENTATIVE | 0 00 | | L | L | | Х | | 773,307 | 0 | 112,924 |
| JAY TAYLOR | 37 50 | | | | | х | | 466,341 | 0 | 113,199 |
| VICE PRESIDENT | 0 00 | | | | | | | 100,5 71 | | |

DLN: 93493317063124

OMB No 1545-0047

SCHEDULE C

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

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

Open to Public Inspection

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

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

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

- ◆ 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

| | me of the organization ARMACEUTICAL RESEARCH & MANUFACT | TURERS OF AMERICA | | Employer | iden | tification number |
|-----|--|---|---|--|----------------|--|
| | THE TOTAL NESEMBER & TIMOTHE | OKERS SI AITERION | | 53-0241 | 211 | |
| Par | t I-A Complete if the org | ganization is exempt unde | r section 501(| c) or is a section | 527 | organization. |
| 1 | Provide a description of the org | janization's direct and indirect pol | ıtıcal campaıgn act | ivities in Part IV | | |
| 2 | Political expenditures | | | ▶ | | \$ 2,970,348 |
| 3 | Volunteer hours | | | | | |
| Par | t I-B Complete if the ord | ganization is exempt unde | r section 501(| c)(3). | | |
| 1 | | tax incurred by the organization | | | F | \$ |
| 2 | Enter the amount of any excise | tax incurred by organization man | agers under section | n 4955 | F | \$ |
| 3 | If the organization incurred a se | ection 4955 tax, did it file Form 4 | 720 for this year? | | | ☐ Yes ☐ No |
| 4a | Was a correction made? | | | | | ┌ Yes ┌ No |
| b | If "Yes," describe in Part IV | | | | | |
| Par | t I-C Complete if the org | ganization is exempt unde | r section 501(| c), except section | 5 0 | 1(c)(3). |
| 1 | Enter the amount directly expe | nded by the filing organization for | section 527 exemp | pt function activities | • | \$ |
| 2 | Enter the amount of the filing of exempt function activities | rganızatıon's funds contrıbuted to | other organizations | s for section 527 | - | \$ |
| 3 | Total exempt function expendit | cures Add lines 1 and 2 Enter he | e and on Form 112 | 0-POL, line 17b | - | \$ 2,970,348 |
| 4 | Did the filing organization file F | orm 1120-POL for this year? | | | | \$ 2,970,348 Ves No |
| 5 | organization made payments F amount of political contribution | d employer identification number for each organization listed, enter is received that were promptly and political action committee (PAC) | the amount paid fro didirectly delivered | om the filing organization to a separate political | on's f orga | unds Also enter the nization, such as a |
| | (a) Name | (b) Address | (c) EIN | (d) A mount paid fr filing organization funds If none, enter | 's | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0- |
| See | Additional Data Table | | | | | |
| | | | | | | |
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| Sch | nedule C (Form 990 or 990-EZ) 2013 | | | | | Page 2 |
|-----|---|---------------------------|----------------------------------|-----------------------------|--|-------------------------------------|
| Pä | art II-A Complete if the organization | is exempt under | section 501(| c)(3) and file | ed Form 5768 | |
| _ | under section 501(h)). | | Link in Doub TV an | - h - 66:1: - h - d | | a adduces FIN |
| ٠. | Check ► If the filing organization belongs to a expenses, and share of excess lobb | | iist in Part IV ea | ch amiliated gro | up members nam | e, address, EIN, |
| 3 | Check ► ☐ If the filing organization checked bo | | l" provisions app | ly | | |
| | Limits on Lobbying E (The term "expenditures" means ar | | l .) | | (a) Filing organization's totals | (b) Affiliated group totals |
| La | Total lobbying expenditures to influence public o | pinion (grass roots lob | bying) | | | |
| ь | Total lobbying expenditures to influence a legisl | ative body (direct lobby | yıng) | | | |
| c | Total lobbying expenditures (add lines 1a and 1 | o) | | Γ | | |
| d | O ther exempt purpose expenditures | | | Γ | | |
| e | Total exempt purpose expenditures (add lines 1 | c and 1d) | | | | |
| f | Lobbying nontaxable amount Enter the amount is columns | rom the following table | ın both | | | |
| | If the amount on line 1e, column (a) or (b) is: | The lobbying nontax | able amount is: | | | |
| | Not over \$500,000 | 20% of the amount on lir | ne 1e | | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the | e excess over \$500,0 | 00 | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the | e excess over \$1,000 | ,000 | | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the | excess over \$1,500,0 | 000 | | |
| | Over \$17,000,000 | \$1,000,000 | | | | |
| g | Grassroots nontaxable amount (enter 25% of lir | ue 1f) | | | | |
| h | Subtract line 1g from line 1a If zero or less, ent | er-0- | | | | |
| i | Subtract line 1f from line 1c If zero or less, ente | er - 0 - | | | | |
| j | If there is an amount other than zero on either li section 4911 tax for this year? | ne 1h or line 1ı, did the | organization file | Form 4720 repo | orting | ┌ Yes ┌ No |
| | (Some organizations that made a columns below. See t | he instructions fo | ection do not r lines 2a thro | havè to con ough 2f on p | | ne five |
| | Lobbying Exp | enditures During | 4-Year Avera ⊤ | ging Period | 1 | 1 |
| | Calendar year (or fiscal year beginning in) | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) Total |
| 2a | Lobbying nontaxable amount | | | | | |
| b | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| c | Total lobbying expenditures | | | | | |
| d | Grassroots nontaxable amount | | | | | |

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

| Pai | art II-B Complete if the organization is exempt under section 501(c)(filed Form 5768 (election under section 501(h)). | 3) and has N | ЮТ | | | rage 3 |
|--------|--|-------------------|---------------|----------|-------------|-------------|
| | | h h | (a | a) | (b |) |
| | each "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lo sivity. | bbying | Yes | No | Amo | unt |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or lo legislation, including any attempt to influence public opinion on a legislative matter or refethered through the use of | | | | | |
| а | | | | | | |
| b C | | 11)? | | | | |
| d | Mailings to members, legislators, or the public? | | | | | |
| е | 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 | n Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means | ? | | | | |
| i | O ther 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 491 | 12 | | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | | |
| Par | Complete if the organization is exempt under section $501(c)(c)$ | 4), section 5 | 01(c) |)(5), o | r sect | ion |
| | 301(c)(0). | | | | Ye | s No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | | Г | 1 | No |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | — | 2 | No |
| 3 | | year? | | | 3 Ye | s |
| Par | Complete if the organization is exempt under section 501(c)(6 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are line 3, is answered "Yes." | | | | | |
| 1 | <u> </u> | | 1 | | 200,9 | 938,591 |
| 2 | · | of political | | | • | • |
| а | | | 2a | | 50,9 | 950,498 |
| b | | | 2b | | -15,0 | 94,142 |
| c | Total | | 2c | | 35,8 | 356,356 |
| 3 | Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section 1670 | 2(e) dues | 3 | | 66,3 | 309,735 |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion does the organization agree to carryover to the reasonable estimate of nondeductible lobby political expenditure next year? | | 4 | | | |
| 5 | · | | 5 | | -30 4 | 153,379 |
| | Part IV Supplemental Information | | | | 30,- | , , , , , , |
| Pro | rovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A art II-B, line 1 Also, complete this part for any additional information | (affiliated group | p lıst), | Part II | -A, line | 2, and |
| | Return Reference Explanation | | | | | |
| PAR | RT I-A, LINE 1 PHRMA ENGAGES IN POLITICAL CAMPAIGN ACTIVI FEDERAL, STATE, OR LOCAL LAW PHRMA MAKES CO ORGANIZATIONS FOR SECTION 527 EXEMPT FUNCT | NTRIBUTIONS | тоо | | ' APPLI | CABLE |
| | | | | | | |

| 201104410 0 (101111 330 01 330 12) 2013 | | i age -i |
|---|-----------------------|---------------------|
| Part IV Supplemental Information | on <i>(continued)</i> | |
| Return Reference | Explanation | |
| | | |
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Schedule D (Form 990) 2013

Software ID: Software Version:

EIN: 53-0241211

Name: PHARMACEUTICAL RESEARCH & MANUFACTURERS OF

AMERICA

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0- |
|---|---|-----------|--|--|
| A B FRANKLIN CAMPAIGN | PO BOX 1414 LAKE CHARLES,LA 70602 | | 250 | |
| AARON BEAN CAMPAIGN | 305 BONNIEVIEW ROAD FERNANDINA BEACH, FL 32034 | 262133407 | 500 | |
| ALABAMIANS FOR LUTHER STRANGE | PO BOX 3196 MONTGOMERY,AL 36109 | 202909004 | 1000 | |
| ALAN BOOTHE | PO BOX 561 TROY,AL 36081 | | 500 | |
| ALAN HAYS CAMPAIGN | PO BOX 2270 UMATILLA,FL 32784 | 203342628 | 500 | |
| ALAN SEABAUGH CAMPAIGN | 610 MARSHALL STREET SUITE 700 SHREVEPORT,LA 71101 | | 250 | |
| ALAN WILLIAMS CAMPAIGN | 1201 STONY CREEK WAY TALLAHASSEE,FL 32317 | 364606297 | 500 | |
| ALFOND BUSINESS COMMUNITY AND DEMOCRACY PAC | 134 SHERIDAN STREET PORTLAND, ME 04101 | 270930984 | 1500 | |
| ANDY ANDERS CAMPAIGN FUND | PO BOX 505 VIDALIA,LA 71373 | | 1000 | |
| ANITERE FLORES CAMPAIGN | 1421 1 SW 107TH AVE STE 134 MIAMI,FL 33174 | 201084118 | 500 | |
| ASSEMBLY REPUBLICAN VICTORY 2011 | PO BOX 225 COLONIA,NJ 07067 | 223087276 | 5000 | |
| AUDREY GIBSON CAMPAIGN | 1038 5 DUNN AVE SUITE 46 JACKSONVILLE,FL 32218 | 861148320 | 500 | |
| BALDERAS FOR NEW MEXICO | PO BOX 26629 ALBUQUERQUE,NM 87125 | 451783192 | 1000 | |
| BARBARA BAILEY FOR STATE SENATE | PO BOX 2118 MT VERNON, WA 98237 | 020556800 | 900 | |
| BART DAVIS FOR SENATE | 2638 BELLIN CIRCLE IDAHO FALLS,ID 83402 | 204861635 | 300 | |
| BATT FOR IDAHO | PO BOX 14 HUSTON,ID 83630 | | 200 | |
| BEDKE FOR LEGISLATURE | PO BOX 89 OAKLEY,ID 83346 | 453701201 | 500 | |
| BENTLEY FOR GOVERNOR INC | 5000 GRANTSWOOD RD SUITE 323 BIRMINGHAM, AL 35210 | 273270051 | 5000 | |
| BETTE LASKY FOR STATE SENATE | 15 MASEFIELD RD NASHUA,NH 03062 | 262977873 | 250 | |
| BETTY OVERBEY CAMPAIGN FOR HOUSE OF REPR | PO BOX 177 LAMAR, AR 72846 | | 350 | |
| BILL GALVANO CAMPAIGN | 610 S BOULEVARD TAMPA,FL 33606 | 270401759 | 500 | |
| BILL GOSSAGE FOR STATE REPRESENTATIVE | PO BOX 221 OZARK, AR 72949 | | 350 | |
| BILL MONTFORD CAMPAIGN | 1713 MAHAN DR TALLAHASSEE,FL 32308 | 264665102 | 500 | |
| BILL SCHUETTE ADMINSTRATIVE ACCOUNT | 5915 EASTMAN AVE STE 100 MIDLAND,MI 48640 | 274215506 | 1750 | |
| BOB GORDON FOR SENATE | PO BOX 14 FAIR LAWN, NJ 07410 | | 1000 | |
| BOB ODELL FOR STATE SENATE | PO BOX 23 LEMPSTER,NH 03605 | | 250 | |
| BOONE FOR STATE REPRESENTATIVE | PO BOX 637 CANNON BEACH, OR 97110 | 200760959 | 500 | |
| BOQUIST LEADERSHIP FUND | 17080 BUTLER HILL RD DALLAS,OR 97338 | 204029917 | 500 | |
| BRAMNICK FOR ASSEMBLY | 279 WATCHUNG FORK WESTFIELD,NJ 07090 | | 1000 | |
| BRANDON HIXON | 901 N PLATEAU AVE CALDWELL, ID 83605 | | 200 | |

| Form 990, Schedule C, Part | | | (1) 4 | (-) (-) |
|--|--|-----------|---|--|
| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0- |
| BRENT HILL FOR SENATE | 1010 SOUTH 2ND EAST REXBURG,ID 83440 | | 500 | |
| BRET ALLAIN CAMPAIGN COMMITTEE | 101 JACKSON STREET FRANKLIN,LA 70538 | 270928657 | 500 | |
| BRETT GEYMANN CAMPAIGN FUND | PO BOX 12703 LAKE CHARLES,LA 70612 | | 250 | |
| BRIAN WHITE FOR HOUSE | 2500 EDGEWOOD AVE ANDERSON,SC 29625 | | 1000 | |
| BROWNBACK FOR GOVERNOR INC | PO BOX 3739 TOPEKA,KS 66604 | 263955801 | 2000 | |
| BRUCE COZART FOR HOUSE | 420 ROCK CREEK RD HOT SPRINGS, AR 71913 | | 350 | |
| BRUCE HOLLAND FOR STATE SENATE | PO BOX 2387 GREENWOOD, AR 72936 | | 750 | |
| BRUNING FOR ATTORNEY GENERAL | PO BOX 83527 LINCOLN,NE 685013527 | 752997854 | 1000 | |
| BRYAN ADAMS CAMPAIGN | PO BOX 1158 GRETNA,LA 70054 | | 500 | |
| CAMPAIGN ACCOUNT OF DENISE GRIMSLEY | 150 N COMMERCE AVE SUITE 2 SEBRING, FL 33870 | 271877740 | 500 | |
| CAMPAIGN OF KATIE EDWARDS | 540 SW 75TH TERRACE PLANTATION,FL 33317 | 383898109 | 500 | |
| CAMPAIGN TO ELECT JASON FRIERSON | PO BOX 31623 LAS VEGAS,NV 89173 | 800520768 | 2000 | |
| CAMPAIGN TO ELECT NORBY CHABERT | PO BOX 517 CHAUVIN,LA 70344 | | 500 | |
| CAMPAIGN TO ELECT TERRY ENGLAND | 1060 OLD HOG MOUNTAIN ROAD AUBURN,GA 30011 | 273090677 | 500 | |
| CAMPAIGN W GREG STEUBE | 133 S HARBOR DR VENICE,FL 34285 | 264030838 | 500 | |
| CASEY CAGLE FOR LT GOVERNOR | 3301 BUCKEYE RD STE 209 ATLANTA,GA 30341 | 202615729 | 1000 | |
| CECILE BLEDSOE FOR SENATE | 709 SKY MOUNTAIN DR ROGERS,AR 72756 | | 750 | |
| CHANNELL ELECTION CAMPAIGN | PO BOX 839 GREENSBORO,GA 30642 | 582267017 | 500 | |
| CHARBONNEAU FOR SENATE | 2503 SHERWOOD DRIVE VALPARAISO,IN 46385 | 562667481 | 300 | |
| CHARLENE FITE FOR HOUSE | PO BOX 7300 VAN BUREN,AR 72956 | | 350 | |
| CHARLES HOOD CAMPAIGN | PO BOX 15200 DAYTONA BEACH,FL 32115 | | 500 | |
| CHERIE BUCKNER WEBB | 2304 W BELLA ST BOISE,ID 83702 | 272160936 | 200 | |
| CHRIS LEOPOLD CAMPAIGN FUND | PO BOX 171 PORT SULPHUR, LA 70083 | | 500 | |
| CHRIS RICHEY STATE REP CAMPAIGN | PO BOX 2356 WEST MEMPHIS, AR 72390 | | 350 | |
| CHRISTY PERRY | 8791 ELKHORN LN NAMPA,ID 83686 | | 200 | |
| CITIZENS FOR ALTHOFF | PO BOX 2275 CRYSTAL LAKE, IL 600392275 | 364411446 | 250 | |
| CITIZENS FOR ANDY HILL | 20351 NE 61ST CT REDMOND, WA 98053 | 272057163 | 900 | |
| CITIZENS FOR ANTONIO TONY MUNOZ | PO BOX 09112 CHICAGO,IL 60609 | 300077622 | 1000 | |
| CITIZENS FOR CASSIDY | 5539 N BROADWAY CHICAGO,IL 60640 | 452706569 | 250 | |
| CITIZENS FOR CATHY CLOUTHIER | 2404 HEATHER ROAD EAST WILMINGTON, DE 19803 | | 300 | |

| Form 990, Schedule C, Part 1- | C, Line 5 | | | |
|----------------------------------|---|-----------|--|---|
| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| CITIZENS FOR CD DAVIDSMEYER | PO BOX 401 JACKSONVILLE, IL 62651 | 461886959 | 250 | |
| CITIZENS FOR CHAD HAYS | 11 E NORTH STREET DANVILLE,IL 61832 | 270863281 | 250 | |
| CITIZENS FOR CHRISTINE RADOGNO | PO BOX 3422 SPRINGFIELD,IL 62708 | 364207961 | 5000 | |
| CITIZENS FOR CONNELLY | 2641 BRUNSWICK COURT LISLE,IL 60532 | 272078000 | 250 | |
| CITIZENS FOR CYNTHIA SOTO | 4801 W PETERSON AVE SUITE 210 CHICAGO,IL 60646 | 364327329 | 250 | |
| CITIZENS FOR DALE A RIGHTER | PO BOX 348 CHARLESTON,IL 61920 | 371399532 | 500 | |
| CITIZENS FOR DURKIN | PO BOX 367 WESTERN SPRINGS, IL 60558 | 364002366 | 5000 | |
| CITIZENS FOR FRED CRESPO | 940 S FRONTAGE RD SUITE 1600 WOODBRIDGE,IL 60517 | 743138179 | 250 | |
| CITIZENS FOR GREGORY HARRIS | 929 W FOSTER AVE NO 809 CHICAGO,IL 60640 | 870781024 | 500 | |
| CITIZENS FOR HAMMOND | PO BOX 694 MACOMB, IL 61455 | | 500 | |
| CITIZENS FOR HANNON | PO BOX 398 GARDEN CITY, NY 115300398 | 112416066 | 1000 | |
| CITIZENS FOR JAY WASSON | PO BOX 1231 NIXA,MO 65714 | | 1000 | |
| CITIZENS FOR JIM THOMPSON | 3380 MISTLETOE RD DALLAS,OR 97338 | | 500 | |
| CITIZENS FOR JIM WEIDNER | 1301 NE HIGHWAY 99 NO 275 MCMINNVILLE, OR 97128 | 260885882 | 500 | |
| CITIZENS FOR JOHN CULLERTON | 4004 OLD MILL LANE SPRINGFIELD, IL 62711 | 363091417 | 1500 | |
| CITIZENS FOR KAREN MCCONNAUGHAY | 902 S RANDALL ROAD 295 ST CHARLES, IL 60174 | 202061347 | 250 | |
| CITIZENS FOR KIRK DILLARD | PO BOX 345 WESTMONT,IL 60559 | 364382592 | 250 | |
| CITIZENS FOR LISA HERNANDEZ | 2137 S LOMBARD AVE STE 204 CICERO,IL 60804 | 261358448 | 250 | |
| CITIZENS FOR LOU LANG | PO BOX 1815 SKOKIE,IL 60076 | 364362687 | 250 | |
| CITIZENS FOR MARCUS C EVANS JR | 8539 S COTTAGE GROVE AVE SUITE C CHICAGO,IL 60619 | 454996562 | 250 | |
| CITIZENS FOR MATT MURPHY | 952 N ARROWHEAD DRIVE PALATINE,IL 600743702 | 205175199 | 500 | |
| CITIZENS FOR MICHAEL BAUMGARTNER | PO BOX 43237 SPOKANE, WA 99228 | 271747900 | 900 | |
| CITIZENS FOR MICHAEL E HASTINGS | 9125 W 169TH PLACE ORLAND HILLS,IL 60487 | 264338290 | 500 | |
| CITIZENS FOR MICHAEL P MCAULIFFE | 5515 N EAST RIVER RD CHICAGO,IL 60656 | | 250 | |
| CITIZENS FOR SARA FEIGENHOLTZ | 3213 N WILTON AVE APT A CHICAGO,IL 606572280 | 363910592 | 1000 | |
| CITIZENS FOR SULLIVAN | 209 N LINCOLN AVE MUNDELEIN, IL 600602235 | 363934507 | 500 | |
| CITIZENS FOR TIM BROWN | PO BOX 861 CRAWFORDSVILLE,IN 47933 | | 300 | |
| CITIZENS FOR UNES | PO BOX 8171 EAST PEORIA,IL 61611 | 274086025 | 250 | |
| CITIZENS TO ELECT ANDRE THAPEDI | 6800 SOUTH MICHIGAN AVENUE CHICAGO,IL 60637 | 562549301 | 500 | |
| CITIZENS TO ELECT JIL TRACY | 3701 E LAKE CENTER DR STE 4 QUINCY,IL 62305 | 205083471 | 250 | |

| Form 990, Schedule C, Part 1-0 | C, Line 5 | | | |
|--------------------------------------|---|----------------|--|---|
| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| CITIZENS TO ELECT MIKE KEHOE | PO BOX 105527 JEFFERSON CITY, MO 65110 | 270535059 | 1000 | |
| CITIZENS TO ELECT PATRICIA R BELLOCK | 431 CANTERBURY CT HINSDALE,IL 60521 | 363794895 | 1000 | |
| CITIZENS TO ELECT TOM CROSS | 24047 W LOCKPORT ST STE 201 PLAINFIELD, IL 605441680 | 363794919 | 500 | |
| CITZENS FOR LAVELLE | 500 WHITBY DR WILMINGTON, DE 19803 | 455075067 | 300 | |
| CLARK KAUFFMAN | 3791 N 2100 E FILER,ID 83328 | | 200 | |
| CLAY SCHEXNAYDER CAMPAIGN | PO BOX 267 SORRENTO,LA 70778 | | 250 | |
| COLLEEN BURTON CAMPAIGN ACCOUNT | 133 S HARBOR DR VENICE,FL 34285 | 462379528 | 500 | |
| COLLINS FOR REPRESENTATIVE | 2019 E MASSECHUSETTES AVE NAMPA,ID 83686 | | 200 | |
| COMMITTE TO ELECT DR ALAN BATES | 2859 STATE ST STE 101 MEDFORD, OR 97504 | 931282264 | 500 | |
| COMMITTE TO ELECT PATRICK CONNICK | PO BOX 208 GRETNA,LA 70054 | 640951214 | 500 | |
| COMMITTE TO ELECT PAUL RAY | PO BOX 977 CLEARFIELD, UT 84089 | | 750 | |
| COMMITTEE TO ELECT AARON FORD | PO BOX 96003 LAS VEGAS,NV 89193 | 271373046 | 1000 | |
| COMMITTEE TO ELECT AILEEN GUNTHER | PO BOX 793 MONTICELLO,NY 12701 | 331067653 | 500 | |
| COMMITTEE TO ELECT BETSY JOHNSON | PO BOX R SCAPPOOSE, OR 97056 | 931281790 | 500 | |
| COMMITTEE TO ELECT BRAD DEE | 111 WEST 5600 SOUTH WASH TERR,UT 84405 | | 1000 | |
| COMMITTEE TO ELECT BRAD WILSON | 1423 W WHISPERING MEADOW LN KAYSVILLE,UT 84037 | 273218861 | 1000 | |
| COMMITTEE TO ELECT BRIAN BUSHWELLER | 103 BURNING TREE ROAD DOVER, DE 19904 | 200460511 | 600 | |
| COMMITTEE TO ELECT BRIAN GREENE | 1113 E MAHOGANY LANE PLEASANT GROVE,UT 84062 | 464090138 | 250 | |
| COMMITTEE TO ELECT BRIAN SHIOZAWA | 3177 FORT UNION BLVD COTTONWOOD HEIGHTS,UT 84121 | | 1000 | |
| COMMITTEE TO ELECT BRYON SHORT | PO BOX 755 CLAYMONT, DE 19703 | 830476374 | 300 | |
| COMMITTEE TO ELECT BUDDY HARDEN | 458 LAKESHORE WAY CORDELE, GA 31015 | 262095277 | 500 | |
| COMMITTEE TO ELECT BUTCH PARRISH | 224 WEST MAIN STREET SWAINBORO, GA 30401 | 582584222 | 500 | |
| COMMITTEE TO ELECT CAM WARD | PO BOX 6749 ALABASTER,AL 35007 | | 1000 | |
| COMMITTEE TO ELECT CHARLES R CHANEY | PO BOX 538 RAYVILLE, LA 71269 | | 250 | |
| COMMITTEE TO ELECT CHARLES R ROSS | PO BOX 996 NACHES, WA 98937 | 263352534 | 500 | |
| COMMITTEE TO ELECT CHRIS BROADWATER | 906 W DAKOTA ST HAMMOND,LA 70401 | 452177350 | 500 | |
| COMMITTEE TO ELECT CLEMENTE SANCHEZ | 612 INWOOD AVE GRANTS,NM 87020 | | 250 | |
| COMMITTEE TO ELECT CURT BRAMBLE | 3663 N 870 EAST PROVO,UT 84604 | 550864832 | 1000 | |
| COMMITTEE TO ELECT DAN MCCAY | 3364 KOLLMAN WAY RIVERTON,UT 84065 | 454215844 | 500 | |
| COMMITTEE TO ELECT DAVID HARRIS | 323 S PINE AVE ARLINGTON HEIGHTS, IL 60005 | 363351481 | 250 | |

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|---|--|-----------|--|---|
| COMMITTEE TO ELECT DEAN SANPEI | 2145 N 1450 EAST PROVO,UT 84604 | 271996519 | 500 | |
| COMMITTEE TO ELECT DEBBIE RODELLA STATE | 16 PRIVATE DRIVE 1156 ESPANOLA,NM 87532 | | 500 | |
| COMMITTEE TO ELECT DEBBIE SMITH | 3270 WILMA DRIVE SPARKS,NV 89431 | 880467783 | 2000 | |
| COMMITTEE TO ELECT DEIDRE HENDERSON | 462 W RIVERCROSS RD SPANISH FORK, UT 84660 | | 750 | |
| COMMITTEE TO ELECT DON BRATTON | 2012 N MCKINLEY HOBBS,NM 88240 | | 1000 | |
| COMMITTEE TO ELECT DON IPSON | 539 DIAGONAL ST GEORGE,UT 84770 | | 750 | |
| COMMITTEE TO ELECT DONNA SOUCY | 91 ALEXANDER DRIVE MANCHESTER,NH 03109 | 450562207 | 250 | |
| COMMITTEE TO ELECT DOUG ERICKSON | PO BOX 5191 BELLINGHAM, WA 98227 | 820553277 | 900 | |
| COMMITTEE TO ELECT DOUG WHITSETT | PO BOX 1304 SILVERTON, OR 97381 | 281717647 | 500 | |
| COMMITTEE TO ELECT DR FREDERICK | 716 OAK KNOLL ROAD ROLLA,MO 65401 | 272366289 | 750 | |
| COMMITTEE TO ELECT EVAN VICKERS | 2166 NORTH COBBLE CREEK DR CEDAR CITY,UT 84721 | | 1000 | |
| COMMITTEE TO ELECT FRANCIS GIBSON | 208 S 680 WEST MAPLETON,UT 84664 | | 750 | |
| COMMITTEE TO ELECT GAIL CHASEY | 1206 LAS LOMAS NE ALBUQUERQUE,NM 87106 | 455012276 | 500 | |
| COMMITTEE TO ELECT GENE WHISNANT | 17960 HICKORY LANE SUNRIVER,OR 97707 | | 500 | |
| COMMITTEE TO ELECT GREGORY HUGHES | 472 MIDLAKE DR DRAPER,UT 84020 | 273353874 | 750 | |
| COMMITTEE TO ELECT HOUSE REPUBLICANS | 75 SOUTH MAIN STREET UNIT 7 CONCORD,NH 03301 | 463192141 | 500 | |
| COMMITTEE TO ELECT JAMES HEALEY | 7800 S RAINBOW BLVD SUITE 2015 LAS VEGAS, NV 89139 | 454397456 | 1000 | |
| COMMITTEE TO ELECT JASON CONGER | PO BOX 2058 BEND, OR 97709 | 271034752 | 500 | |
| COMMITTEE TO ELECT JEFF KRUSE | 636 WILD IRIS LANE ROSEBURG, OR 97470 | 931299740 | 500 | |
| COMMITTEE TO ELECT JEFF MULLIS | 212 ENGLISH AVENUE CHICKAMAUGA,GA 30707 | 912064475 | 500 | |
| COMMITTEE TO ELECT JERRY STEVENSON | 466 S 1700 W LAYTON,UT 84041 | 900545060 | 1000 | |
| COMMITTEE TO ELECT JIM DUNNIGAN | 3070 EUGENE HILL WAY SALT LAKE CITY,UT 84118 | | 1000 | |
| COMMITTEE TO ELECT JIM HONEYFORD | PO BOX 844 SUNNYSIDE,WA 98944 | 911561953 | 900 | |
| COMMITTEE TO ELECT JOE HARDY | 682 FAIRWAY DRIVE BOULDER CITY, NV 89005 | 810555112 | 1000 | |
| COMMITTEE TO ELECT JOEL KRETZ | 1014 TORODA CREEK ROAD WAUCONDA, WA 98859 | 721573462 | 500 | |
| COMMITTEE TO ELECT JOHN D MEADOWS III IN | INC PO BOX 1255 CALHOUN,GA 30703 | 452784668 | 500 | |
| COMMITTEE TO ELECT JT WILCOX | PO BOX 747 MCKENNA, WA 98558 | 270758934 | 900 | |
| COMMITTEE TO ELECT KEELEY | 1501 W 5TH STREET WILMINGTON, DE 19805 | | 200 | |
| COMMITTEE TO ELECT KENNETH HAVARD | PO BOX 1232 SLAUGHTER, LA 70777 | | 250 | |
| COMMITTEE TO ELECT MARC ROBERTS | 1352 CEDAR PASS DRIVE SANTAQUIN,UT 84655 | | 250 | |

| Form 990, Schedule C, Part (a) Name | (b) Address | (c) EIN | (d) A mount paid from | (e) A mount of political |
|--|--|-----------|---|--|
| (a) Name | (b) Address | (c) EIN | filing organization's own internal funds If none, enter -0- | contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| COMMITTEE TO ELECT MARK HUTCHINSON | 50 SOUTH JONES BLVD STE 202 LAS VEGAS,NV 89107 | 454207081 | 1000 | |
| COMMITTEE TO ELECT MARK STOOPS | 4425 N OLD STATE RD 37 BLOOMINGTON,IN 47408 | 463298155 | 250 | |
| COMMITTEE TO ELECT MARY KAY PAPEN | 904 CONWAY AVE LAS CRUCES,NM 88005 | | 1500 | |
| COMMITTEE TO ELECT MATT MANWELLER | 110 W 6TH AVE PMB 392 ELLENSBURG,WA 98926 | 454883829 | 500 | |
| COMMITTEE TO ELECT MATT RAMSEY | 200 TERRANE RIDGE PEACHTREE CITY, GA 30269 | 261378077 | 500 | |
| COMMITTEE TO ELECT MICHAEL KENNEDY | 659 E 200 N ALPINE,UT 84004 | 460687853 | 500 | |
| COMMITTEE TO ELECT MICHAEL SANCHEZ | PO BOX 1297 LOS LUNAS,NM 87031 | 203743578 | 1500 | |
| COMMITTEE TO ELECT MICHAEL W TRYON | 320 DOUGLAS AVE CRYSTAL LAKE,IL 60014 | | 500 | |
| COMMITTEE TO ELECT MIKE MCLANE | 386 SW BENT LOOP POWELL BUTTE, OR 97753 | | 500 | |
| COMMITTEE TO ELECT MIRO | 5 FIRECHASE CIRCLE WILMINGTON, DE 19804 | 800643419 | 300 | |
| COMMITTEE TO ELECT MOISES DENIS | 3204 OSAGE AVENUE LAS VEGAS, NV 89101 | 010571159 | 2000 | |
| COMMITTEE TO ELECT NATE GENTRY | 3716 ANDREW DR NE ALBUQUERQUE, NM 87110 | 272183027 | 1000 | |
| COMMITTEE TO ELECT NEIL ABRAMSON | 365 CANAL ST STE 2740 NEW ORLEANS, LA 70130 | 208605158 | 500 | |
| COMMITTEE TO ELECT NORA ESPINOSA | 608 GOLINDRINA ROSWELL,NM 88201 | | 250 | |
| COMMITTEE TO ELECT OSIENSKI | 183 SCOTTFIELD DRIVE NEWARK, DE 19713 | 271719029 | 300 | |
| COMMITTEE TO ELECT PATRICIA BLEVINS | 209 LINDEN AVE WILMINGTON, DE 19805 | 912071185 | 300 | |
| COMMITTEE TO ELECT PAUL HARRIS | 1916 SE 130TH AVE VANCOUVER, WA 98683 | 272531536 | 500 | |
| COMMITTEE TO ELECT PAUL RAY | PO BOX 977 CLEARFIELD,UT 84089 | 310662136 | 750 | |
| COMMITTEE TO ELECT PHIL GRIEGO | PO BOX 10 SAN JOSE, NM 87565 | | 1000 | |
| COMMITTEE TO ELECT QUINTON ROSS | PO BOX 6183 MONTGOMERY,AL 36106 | 377961958 | 500 | |
| COMMITTEE TO ELECT RALPH OKERLUND | 248 S 500 W MONROE,UT 84754 | | 750 | |
| COMMITTEE TO ELECT REBECCA LOCKHART | 138 SOUTH MAIN STREET SALT LAKE CITY,UT 84101 | 451499619 | 1500 | |
| COMMITTEE TO ELECT REBECCA WALKER | 4386 S DUPONT PKWY TOWNSEND, DE 19734 | | 300 | |
| COMMITTEE TO ELECT RENEE UNTERMAN | PO BOX 508 BUFORD,GA 30518 | 010617404 | 500 | |
| COMMITTEE TO ELECT RICHARD MARTINEZ | MARTINEZ PO BOX 762 ESPANDA,NM 87532 | | 500 | |
| COMMITTEE TO ELECT ROBERT JOHNSON | 502 TUNICA DRIVE EAST MARKSVILLE, LA 71351 | | 250 | |
| COMMITTEE TO ELECT ROBERT JOHNSON III | PO BOX 1678 NATCHEZ,MS 39120 | | 1000 | |
| COMMITTEE TO ELECT ROGER MADALENA | PO BOX 255 JEMEZ PUEBLO, NM 87024 | | 500 | |
| COMMITTEE TO ELECT STEVE HOBBS | 3309 114TH DR NE LAKE STEVENS, WA 98258 | 204733784 | 900 | |
| COMMITTEE TO ELECT STEWART BARLOW | 940 SIGAN HILL FRUIT HEIGHTS,UT 84037 | 900810686 | 500 | |

| Form 990, Schedule C, Par | t 1-C, Line 5 | | , | |
|--|---|----------------|--|---|
| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| COMMITTEE TO ELECT STUART ADAMS | 3271 E 1875 NORTH LAYTON,UT 84070 | | 1000 | |
| COMMITTEE TO ELECT STUART INGLE | 2106 WUNIVERSITY PORTALES,NM 88130 | 860999796 | 1500 | |
| COMMITTEE TO ELECT TIM SHELDON | BOX G HOODSPORT, WA 98548 | 203465831 | 900 | |
| COMMITTEE TO ELECT TOM TAYLOR | 5909 RINCONADA FARMINGTON,NM 87402 | | 500 | |
| COMMITTEE TO ELECT TYRONE THOMPSON | 117 FOX CROSSING AVENUE LAS VEGAS, NV 89084 | 463136319 | 500 | |
| COMMITTEE TO ELECT WALT LEGER III | 2320 LAUREL STREET NEW ORLEANS, LA 70130 | 260842068 | 1000 | |
| COMMITTEE TO ELECT WAYNE NIEDERHAUSER | 3182 E GRANITE WOODS LANE SANDY,UT 84092 | | 1500 | |
| COMMITTEE TO ELECT ZACK COOK | 100 SARAH LANE RUIDOSO,NM 88345 | | 250 | |
| COMMITTEE TO RE ELECT BETHANY HALL LONG | 127 ST AUGUSTINE COURT MIDDLETOWN, DE 19709 | | 500 | |
| COMMITTEE TO RE ELECT CHUCK JEFFERSON | PO BOX 874 ROCKFORD,IL 61105 | 371481905 | 250 | |
| COMMITTEE TO RE ELECT DAVE MCBRIDE | 7 NICOLE COURT NEW CASTLE, DE 19720 | 512070355 | 600 | |
| COMMITTEE TO RE ELECT JOHN RYAN | 1020 SALAMANCA ST NW ALBUQUERQUE,NM 87107 | | 250 | |
| COMMITTEE TO RE ELECT JOHN VIOLA | PO BOX 1626 BEAR,DE 19701 | 282551136 | 300 | |
| COMMITTEE TO RE ELECT MICHELE HENSON | 4140 CREEK STONE COURT STONE MOUNTAIN, GA 30083 | 582560899 | 500 | |
| COMMITTEE TO RE ELECT MIKE MULROONEY | 32 SARATOGA DRIVE NEW CASTLE, DE 19720 | 510402525 | 200 | |
| COMMITTEE TO RE ELECT VINCENT PRIETO | 511 79TH STREET NORTH BERGEN,NJ 07047 | 271766120 | 2000 | |
| COMMONWEALTH VICTORY FUND | 1710 E FRANKLIN ST 2ND FLOOR RICHMOND, VA 23223 | 541971319 | 2500 | |
| CONCORD ADMINISTRATIVE ACCOUNT | 208 N CAPITOL AVE FLOOR 3 LANSING, MI 48933 | 461994465 | 2250 | |
| CUCCINELLI FOR GOVERNOR | 10560 MAIN ST STE 218 FAIRFAX,VA 22030 | 262280210 | 10000 | |
| DALY FOR ASSEMBLY DISTRICT 31 | 2180 4TH STREET SPARKS,NV 89431 | 271201260 | 1000 | |
| DAN BROWN FOR SENATE | PO BOX 934 ROLLA,MO 65402 | 271975592 | 1000 | |
| DAN KOTOWSKI FOR STATE SENATE | 1324 S CRESCENT AVE PARK RIDGE,IL 600683919 | 202397769 | 250 | |
| DAN MORRISH CAMPAIGN FUND | 3042 ENGLEWOOD DR JENNINGS, LA 70546 | | 500 | |
| DAN RAULERSON CAMPAIGN | 600 W DR MARTIN LUTHER KING JR PLANT CITY, FL 33563 | | 500 | |
| DANA D YOUNG CAMPAIGN | PO BOX 10464 TAMPA,FL 33679 | 270838068 | 500 | |
| DANCE FOR DELEGATE | 28A W OLD ST PO BOX 2584 PETERSBURG, VA 23804 | | 500 | |
| DANIEL BISS FOR STATE SENATE | 3255 CENTRAL STREET EVANSTON,IL 60201 | 453820721 | 750 | |
| DARREN SOTO CAMPAIGN | 338 N MAGNOLIA AVE SUITE D ORLANDO,FL 32801 | 205078443 | 500 | |
| DAVID BRANSCUM FOR STATE REPRESENTATIVE | PO BOX 370 MARSHALL,AR 72650 | | 350 | |
| DAVID CARLUCCI FOR NEW YORK | PO BOX 883 NANUET, NY 10954 | 461784926 | 500 | |

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|---|--|-----------|--|---|
| DAVID MEEKS FOR HOUSE | 813 OAK ST SUITE 10A CONWAY,AR 72032 | | 350 | |
| DAVID RICHARDSON FOR FLORIDA HOUSE | 1005 8TH ST PH-1 MIAMI BEACH,FL 33139 | 455419650 | 500 | |
| DAVID SANDERS FOR STATE SENATE | 52 CHATEL DR LITTLE ROCK, AR 72223 | | 500 | |
| DEAN L CAMERON | 1101 RUBY DR RUPERT,ID 83350 | | 300 | |
| DEBBIE MAYFIELD CAMPAIGN | 5730 CORPORATE WAY SUITE 214 WEST PALM BEACH,FL 33407 | 462163111 | 500 | |
| DEL MARSH | PO BOX 2365 ANNISTON,AL 36202 | | 1000 | |
| DELAWAREANS FOR KAREN WELDIN STEWART | 801 W 20TH ST WILMINGTON, DE 19802 | 320107809 | 600 | |
| DEMOCRATIC ASSEMBLY CAMPAIGN COMMITTEE H | 107 WASHINGTON AVE STE 1 LL ALBANY,NY 12210 | 133041656 | 37500 | |
| DEMOCRATIC ATTORNEYS GENERAL ASSOCIATION | 1580 LINCOLN STE 1125 DENVER, CO 80203 | 134220019 | 25000 | |
| DEMOCRATIC GOVERNORS ASSN | 1401 K STREET NW STE 200 WASHINGTON, DC 20005 | 521304889 | 275000 | |
| DEMOCRATIC LEGISLATIVE CAMPAIGN COMMITTE | 1401 K STREET NW STE 201 WASHINGTON, DC 20005 | 521870839 | 100000 | |
| DEMOCRATIC LIEUTENANT GOVERNORS ASSOCIAT | 412 FIRST STREET SE WASHINGTON, DC 20003 | 030457299 | 5000 | |
| DEMOCRATIC STATE COMMITTEE | 19 E COMMONS BLVD 2ND FL NEW CASTLE, DE 19720 | 510119764 | 1500 | |
| DENNIS E WILLIAMS COMMITTEE | 3329 S ROCKFIELD DRIVE WILMINGTON, DE 19810 | | 300 | |
| DION FOR MAINE PAC | 628 METHODIST ROAD WESTBROOK, ME 04092 | | 500 | |
| DOMINION LEADERSHIP TRUST PAC | 106 CARTER STREET FALMOUTH, VA 22405 | 050524341 | 15000 | |
| DONNA PENCE | 1960 US HWY 26 GOODING,ID 83330 | | 200 | |
| DOUGLAS A HANCEY JR | 378 YALE AVE REXBURG,ID 83440 | | 200 | |
| EAGLE PAC | 801 ADAMS AVE MONTGOMERY, AL 36541 | 631270419 | 4000 | |
| ED CLERE FOR STATE REPRESENTATIVE | 1701 DEPAUW AVE NEW ALBANY, IN 47150 | | 300 | |
| ED MORSE | PO BOX 3294 HAYDEN,ID 83835 | | 200 | |
| ED PRICE CAMPAIGN FUND | 2034 SOUTH ROBERT AVENUE GONZALES,LA 70737 | | 250 | |
| EDWARD TED JAMES CAMPAIGN FUND | PO BOX 4991 BATON ROUGE, LA 70821 | | 500 | |
| EDWIN R MURRAY CAMPAIGN FUND | 1540 N BROAD ST NEW ORLEANS, LA 70119 | 412151526 | 1000 | |
| EISEN FOR NEVADA ASSEMBLY | 9850 S MARYLAND PKWY STE A 5 162 LAS VEGAS,NV 89183 | 453952138 | 1000 | |
| ELAINE BEECH CAMPAIGN | PO BOX 1256 CHATOM, AL 36518 | 270434801 | 250 | |
| ELBERT GUILLORY CAMPAIGN FUND | 633 E LANDRY STREET OPELOUSAS,LA 70570 | | 500 | |
| ELECT BETTY KOMP | 885 GARFIELD ST WOODBURN, OR 97071 | 030462152 | 500 | |
| ELECT PARADEE | 22 BELL MINER COURT DOVER, DE 19904 | | 200 | |
| ELECTION FUND OF HERB CONAWAY | 907 MORGAN AVENUE PALMYRA,NJ 08065 | 522164284 | 500 | |

| Form 990, Schedule C, Par | t 1-C, Line 5 | | | |
|---|--|----------------|--|---|
| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| ELECTION FUND OF JOSEPH VITALE | PO BOX 1467 WOODBRIDGE, NJ 07095 | 912067793 | 500 | |
| ELECTION FUND OF LOUIS D GREENWALD FOR A | 2020-15 ROUTE 70 CHERRY HILL,NJ 08002 | 223565484 | 2000 | |
| ELECTION FUND OF NIA GILL | 201 RAILROAD AVE 306 EAST RUTHERFORD, NJ 07073 | 223744087 | 500 | |
| ELIZABETH PORTER CAMPAIGN | 1468 SW MAIN BLVD STE 105 NO 2 LAKE CITY, FL 32025 | 450591751 | 500 | |
| ERIC LAFLEUR CAMPAIGN COMMITTEE | PO BOX 617 211 SOUTH COREIL VILLE PLATTE, LA 70586 | | 500 | |
| ERICH PONTI CAMPAIGN FUND | 7341 JEFFERSON HWY STE J BATON ROUGE, LA 70806 | 223962877 | 1000 | |
| EVES LEADERSHIP PAC STATE REP MARK EVES | 29 ACORN LANE NORTH BERWICK, ME 08906 | 900625006 | 1000 | |
| FLORIDA DEMOCRATIC PARTY HOUSE VICTORY 2 | 2012 214 S BRONOUGH STREET TALLAHASSEE,FL 32301 | 590772903 | 4000 | |
| FRANCIS THOMPSON CAMPAIGN | 302 B DEPOT ST PO BOX 68 DELHI,LA 71232 | 720999317 | 200 | |
| FRANKLIN J FOIL COMMITTEE | PO BOX 4288 BATON ROUGE, LA 70821 | | 250 | |
| FRED LOVE FOR STATE REPRESENTATIVE 29 | PO BOX 4963 LITTLE ROCK, AR 72214 | | 350 | |
| FRED MILLS FOR SENATE | PO BOX 1385 BREAUX BRIDGE, LA 70517 | 261639940 | 500 | |
| FRED WOOD FOR IDAHO | PO BOX 1207 BURLEY,ID 83318 | | 1000 | |
| FRIENDS FOR JUSTIN JONES | PO BOX 371626 LAS VEGAS, NV 89137 | 454636548 | 1000 | |
| FRIENDS FOR MULROE | 6687 N NORTHWEST HIGHWAY CHICAGO,IL 60631 | 260798351 | 250 | |
| FRIENDS FOR PETE SCHWARTZKOPF | 24 COVENTRY ROAD REHOBETH BEACH, DE 19971 | 753055083 | 300 | |
| FRIENDS OF ANDY OLSON | PO BOX 891 ALBANY,OR 973210328 | 200776496 | 500 | |
| FRIENDS OF ANDY SANBORN | PO BOX 7893 LOUDON,NH 03307 | | 250 | |
| FRIENDS OF ANN M WILLIAMS | 4044 N LINCOLN STE 266 CHICAGO,IL 60618 | 270974966 | 500 | |
| FRIENDS OF ARNIE ROBLAN | PO BOX 1410 COOS BAY,OR 97420 | 200491859 | 500 | |
| FRIENDS OF BILL CUNNINGHAM | 10402 S WESTERN AVENUE CHICAGO,IL 60643 | 272995766 | 250 | |
| FRIENDS OF BILL HAINE | PO BOX 67 ALTON,IL 62002 | 900039912 | 250 | |
| FRIENDS OF BILL KENNEMAR | 21041 S HWY 99 E OREGON CITY,OR 97045 | 201212217 | 500 | |
| FRIENDS OF BRUCE HANNA | 89358 CRANBERRY LANE BANDON,OR 97411 | 200633333 | 500 | |
| FRIENDS OF CAMERON HENRY | PO BOX 23173 JEFFERSON,LA 70183 | 205486642 | 500 | |
| FRIENDS OF CAMILLE LILLY | 7115 WEST NORTH AVE PO BOX 260 OAK PARK,IL 60302 | 800594659 | 250 | |
| FRIENDS OF CARL E HEASTIE | PO BOX 840 BAYCHESTER STATION BRONX,NY 10469 | 030453925 | 500 | |
| FRIENDS OF CHAPIN ROSE | PO BOX 435 CHARLESTON,IL 61920 | 030472658 | 500 | |
| FRIENDS OF CHARLIE BROWN | 9439 LAKE SHORE DR GARY,IN 46403 | 912063335 | 300 | |
| FRIENDS OF CHRIS GARRETT | 628 1ST ST LAKE OSWEGO,OR 97034 | 261287584 | 500 | |

| Form 990, Schedule C, | (b) Address | (c) EIN | (d) A mount paid from | (e) A mount of political |
|--|---|-----------|---|---|
| (a) Nume | (b) Address | (6) 2311 | filing organization's own internal funds If none, enter -0- | contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| FRIENDS OF CHRIS PEACE | PO BOX 819 MECHANICSVILLE, VA 23111 | 204048892 | 500 | |
| FRIENDS OF CHRISTIAN MITCHELL | PO BOX 805167 CHICAGO,IL 60605 | 371647910 | 250 | |
| FRIENDS OF DAN BRADY | 2425 EAST LINCOLN ST BLOOMINGTON,IL 61701 | 912066971 | 250 | |
| FRIENDS OF DAN KRISTIANSEN | PO BOX 2007 SNOHOMISH, WA 98291 | 912064816 | 500 | |
| FRIENDS OF DARRYL SCOTT | 102 COBBLESTONE LANE DOVER, DE 19904 | | 300 | |
| FRIENDS OF DAVE KOEHLER | 1020 NE GLEN OAK AVE PEORIA,IL 61603 | 454230794 | 750 | |
| FRIENDS OF DAVID BOBZIEN | 1605 WESLEY DRIVE RENO,NV 89503 | 202960741 | 1000 | |
| FRIENDS OF DAVID SESSIONS | 13000 HUGH FORT ROAD GRAND BAY,AL 36541 | 274546620 | 500 | |
| FRIENDS OF DEBRA HEFFERNAN | 113 BLUE ROCK RD WILMINGTON, DE 19809 | 272120159 | 200 | |
| FRIENDS OF FLOYD PROZANSKI | PO BOX 11511 EUGENE,OR 97440 | 931153136 | 500 | |
| FRIENDS OF FRANKLIN COUNTY REPUBLICANS | 644 FAIRFAX ROAD CAMBRIDGE,VT 05444 | 810653265 | 500 | |
| FRIENDS OF GREG LEDING | PO BOX 1445 FAYETTEVILLE, AR 72702 | 080765140 | 500 | |
| FRIENDS OF GREG MATHEWS | PO BOX 2376 GRESHAM,OR 97030 | 262448356 | 500 | |
| FRIENDS OF HEATHER STEANS | 50 E WASHINGTON ST STE 400 CHICAGO,IL 60602 | 261374323 | 250 | |
| FRIENDS OF JACKIE WINTERS | PO BOX 126 SALEM,OR 97308 | 900038202 | 1000 | |
| FRIENDS OF JAQUES | 82 CANN ROAD NEWARK, DE 19702 | | 200 | |
| FRIENDS OF JAY RODNE | PO BOX 2848 ISSAQUAH, WA 98027 | 201125805 | 500 | |
| FRIENDS OF JEB BRADLEY FOR STATE SENATE | 645 SOUTH MAIN ST WOLFEBORO,NH 03894 | 264422111 | 1000 | |
| FRIENDS OF JEFF BARKER | 18340 SW MONTE VERDI BLVD ALOHA,OR 979975203 | 300042221 | 500 | |
| FRIENDS OF JOE FAIN | PO BOX 7809 COVINGTON, WA 98042 | 271654871 | 900 | |
| FRIENDS OF JOHN WATKINS | PO BOX 394 MIDLOTHIAN,VA 23113 | 541998042 | 500 | |
| FRIENDS OF JUDSON HILL | 3102 RAINES COURT MARIETTA,GA 30062 | 200868418 | 500 | |
| FRIENDS OF JULIE PARRISH | 1968 CARRIAGE WAY WEST LINN,OR 97068 | 272978365 | 500 | |
| FRIENDS OF KARIM CAMARA | 220 LAFAYETTE STREET NEW YORK, NY 10012 | 203620944 | 500 | |
| FRIENDS OF KATE CLOONEN | 2593 BLUFF DRIVE KANKAKEE,IL 60901 | 453929432 | 250 | |
| FRIENDS OF KATIE DEMPSEY | 811 HIGHLAND AVE SE ROME, GA 30161 | 030589721 | 500 | |
| FRIENDS OF KEVIN CAHILL | 214 FAIR STREET KINGSTON,NY 12401 | 090017823 | 500 | |
| FRIENDS OF LARRY ONEAL | 200 WILLINGHAM DR BONAIRE,GA 31005 | 030471533 | 500 | |
| FRIENDS OF LARRY SPRINGER | 700 20TH AVE WEST KIRKLAND, WA 98033 | 830382872 | 500 | |
| FRIENDS OF LAURA FINE FOR STATE REP | 1700 CONSTITUTION DR GLENVIEW,IL 60026 | | 250 | |

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from | (e) A mount of political |
|-----------------------------------|--|----------------|---|--|
| (a) Name | (e) Madress | (6) 22.11 | filing organization's own internal funds If none, enter -0- | contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 - |
| FRIENDS OF LAURIE MONNES ANDERSON | PO BOX 1531 GRESHAM, OR 97030 | 931300457 | 500 | enter o |
| FRIENDS OF LEE BEYER | 951 S ST SPRINGFIELD, OR 97477 | 271380093 | 500 | |
| FRIENDS OF MAGGIE HASSAN | PO BOX 681 EXETER, NH 03833 | 562285568 | 5000 | |
| FRIENDS OF MARGARET DOHERTY | 16200 SW PACIFIC HIGHWAY STE H273 TIGARD, OR 97224 | 270780274 | 500 | |
| FRIENDS OF MARGARET ROSE HENRY | 1910 N WASHINGTON ST WILMINGTON, DE 19802 | | 300 | |
| FRIENDS OF MARILYN KIRKPATRICK | 4747 SHOWNDOWN DRIVE LAS VEGAS, NV 89031 | 200990079 | 2000 | |
| FRIENDS OF MARK HASS | PO BOX 536 BEAVERTON, OR 97075 | 260789853 | 500 | |
| FRIENDS OF MARY E FLOWERS | 7712 S PAULINA ST CHICAGO,IL 60620 | | 500 | |
| FRIENDS OF MATTIE HUNTER | 11604 S CHURCH ST CHICAGO,IL 606434838 | 450498042 | 1000 | |
| FRIENDS OF MICHAEL J MADIGAN | PO BOX 610 SPRINGFIELD,IL 62705 | 363418024 | 6500 | |
| FRIENDS OF MICHAEL ROBERSON | PO BOX 97251 LAS VEGAS, NV 89193 | 320292426 | 1000 | |
| FRIENDS OF MICHELLE MUSSMAN | 217 TUDOR LANE SCHAUMBURG, IL 60193 | 800481753 | 250 | |
| FRIENDS OF MIKE BARBIERI | 88 IROQUOIS COURT NEWARK, DE 19702 | | 500 | |
| FRIENDS OF MIKE HOPE | 8712 26TH PI NE LAKE STEVENS, WA 98258 | 262194834 | 500 | |
| FRIENDS OF MIKE HUBBARD COMMITTEE | PO BOX 950 AUBURN,AL 36831 | | 1000 | |
| FRIENDS OF MIKE RAMONE | 211 NATHAN COURT NEWARK, DE 19711 | | 300 | |
| FRIENDS OF NANCY STILES | 1 MILL ROAD NORTH HAMPTON, NH 03862 | 273181239 | 500 | |
| FRIENDS OF NICK HARPER | PO BOX 5341 EVERETT, WA 98206 | 272836797 | 500 | |
| FRIENDS OF NICOLE POORE | 315 WHEATSHEAF DRIVE NEW CASTLE, DE 19720 | 455310757 | 300 | |
| FRIENDS OF PAT HICKEY | 1180 FOREST STREET RENO,NV 89509 | 272874691 | 1000 | |
| FRIENDS OF PATRICK HOPE | 415 N OXFORD STREET ARLINGTON, VA 22203 | 264109577 | 500 | |
| FRIENDS OF PETER BRAGDON | PO BOX 488 MILFORD, NH 03055 | | 500 | |
| FRIENDS OF PHIL BRYANT | PO BOX 321226 FLOWOOD, MS 39232 | 640905756 | 1000 | |
| FRIENDS OF QUINN JOHNSON | 151 BACK CREEK DR MIDDLETOWN, DE 19709 | | 200 | |
| FRIENDS OF RICH GOLICK | 2372 SIMPSON FARM WAY SMYRNA,GA 30080 | 912102970 | 500 | |
| FRIENDS OF RICHARD DEVLIN | 10290 SWANDERSON COURT TUALATIN,OR 97062 | 931243651 | 500 | |
| FRIENDS OF ROBERT BOB RITA | 2030 HIGH ST BLUE ISLAND,IL 60406 | 300018278 | 750 | |
| FRIENDS OF ROBYN GABEL | 905 FOREST AVE SUITE 1N EVANSTON,IL 60202 | 270798409 | 1000 | |
| FRIENDS OF RON BACON | 10300 MEADOWLARK HILLS RD CHANDLER,IN 47610 | | 250 | |
| FRIENDS OF RUTH BRIGGS KING | 3 PAR COURT GEORGETOWN, DE 19947 | | 300 | |

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|---|--|----------------|--|--|
| | | | | separate political organization If none, enter -0- |
| FRIENDS OF S CHRIS JONES | PO BOX 5058 SUFFORK, VA 23435 | 912063051 | 1000 | |
| FRIENDS OF SAM MIMS | 605 LAKESHORE DRIVE MCCOMB,MS 39648 | | 1000 | |
| FRIENDS OF SCOTT GARRETT | 2255 LANGHORNE ROAD SUITE 4 LYNCHBURG, VA 24501 | | 500 | |
| FRIENDS OF SENATOR LIBOUS COMMITTEE | 59-61 COURT STREET BINGHAMTON,NY 13901 | 161565227 | 500 | |
| FRIENDS OF SHARON CARSON | 19 TOKANEL RD LONDONDERRY,NH 03053 | | 500 | |
| FRIENDS OF STACEY Y ABRAMS INC | 5537 GLENRIDGE PARK ATLANTA,GA 30342 | 203691662 | 500 | |
| FRIENDS OF STEVE MARTIN | PO BOX 700 CHESTERFIELD, VA 23832 | 541826182 | 500 | |
| FRIENDS OF STUART BISHOP | 101 W FARREL BLDG A LAFAYETTE,LA 70508 | | 500 | |
| FRIENDS OF SUE REZIN | PO BOX 932 MORRIS,IL 60450 | 274592726 | 250 | |
| FRIENDS OF TATE REEVES | PO BOX 24355 JACKSON,MS 39225 | 200790765 | 1000 | |
| FRIENDS OF TED FERRIOLI | 111 SKYLINE DR JOHN DAY,OR 97845 | 931283154 | 500 | |
| FRIENDS OF TIM FREEMAN | 792 NW GARDEN VALLEY RD ROSEBURG, OR 97470 | 262860022 | 500 | |
| FRIENDS OF TIM HUGO | POB 893 CENTREVILLE, VA 20122 | 510420767 | 500 | |
| FRIENDS OF TIM SCHMITZ | 1921 W WILSON ST STE D PMB 198 BATAVIA,IL 605101680 | 364195817 | 500 | |
| FRIENDS OF TINA KOTEK | 7930 N WABASH AVE PORTLAND,OR 97217 | 204689019 | 500 | |
| FRIENDS OF TOM CULLERTON | 506 WESTGATE DR ADDISON,IL 60101 | 460591458 | 250 | |
| FRIENDS OF TOMMY NORMENT | PO BOX 6205 WILLIAMSBURG, VA 23188 | 541998194 | 1500 | |
| FRIENDS OF VAL HOYLE | PO BOX 2661 EUGENE,OR 97402 | 271045628 | 500 | |
| FRIENDS OF VAL LONGHURST | 11 WINCHESTER CT BEAR, DE 19701 | | 300 | |
| FRIENDS OF VANETA BECKER | 4017 COBBLE FIELD DR EVANSVILLE, IN 47711 | 263480003 | 300 | |
| FRIENDS OF VIC GILLIAM | 767 WOODLAND DRIVE NE SILVERTON,OR 97381 | 364599458 | 500 | |
| FRIENDS OF WESLEY BISHOP | PO BOX 871944 NEW ORLEANS, LA 70187 | 274073834 | 500 | |
| FRIENDS TO ELECT DANNY SHORT | 106 N PINE SEAFORD, DE 19973 | | 300 | |
| FRIENDS TO ELECT YVONNE DORSEY | 7575 JEFFERSON HWY STE 174 BATON ROUGE,LA 70806 | 900039629 | 500 | |
| FULCHER FOR SEANTE | 4035 S LINDER RD MERIDIAN,ID 83642 | 270694178 | 300 | |
| GARY DEFFENBAUGH FOR HOUSE | 1424 N 9TH ST VAN BUREN,AR 72956 | | 350 | |
| GARY L SMITH JR CAMPAIGN COMMITTEE | 49 APPLE STREET NORCO,LA 70079 | | 500 | |
| GARY STUBBLEFIELD FOR STATE SENATE | 2542 SKEETS RD BRANCH,AR 72928 | | 500 | |
| GAYLE HARRELL CAMPAIGN | 1885 NW EAGLE POINT STUART,FL 34994 | | 500 | |
| GENE REYNOLDS FOR STATE REPRESENTATIVE C | 1000 COUSSONS DUBBERLY,LA 71024 | | 250 | |

| Form 990, Schedule C, Part | 1 | (c) EIN | (d) A mount paid from | (e) A mount of political |
|--|---|----------------|---|---|
| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| GERALD DIAL COMMITTEE | PO BOX 248 LINEVILLE,AL 36266 | | 1000 | |
| GERALD LONG CAMPAIGN | 322 MONROE DR NATCHITOCHES,LA 71457 | | 1000 | |
| GOPAC | 1101 16TH ST NW STE 201 WASHINGTON, DC 20036 | 521237780 | 70825 | |
| GORDON DOVE CAMPAIGN FUND | PO BOX 629 HOUMA,LA 70361 | 271977291 | 500 | |
| GOVERNORS CLUB | PO BOX 4925 TROY,MI 48099 | 450950905 | 3000 | |
| GOVERNORS LEADERSHIP PAC | 5842 FONTAINE BLEU CIRCLE SALT LAKE CITY, UT 84121 | 463095573 | 2500 | |
| GRANT BURGOYNE | 2203 MOUNTAIN VIEW DR BOISE,ID 83706 | | 200 | |
| GREG CROMER CAMPAIGN FUND | 308 MARGON COURT SLIDELL, LA 70458 | 263885973 | 500 | |
| GREG WREN CAMPAIGN | 4213 CARMICHAEL ROAD MONTGOMERY, AL 36106 | 631287010 | 500 | |
| GWYNDOLEN CLARKE REED CAMPAIGN | 1430 SW 6TH WAY DEERFIELD BEACH,FL 33441 | 274985162 | 500 | |
| H BERNARD LEBAS CAMPAIGN | PO BOX 370 VILLE PLATTE, LA 70586 | | 250 | |
| HAGEDORN FOR IDAHO | 5285 W RIDGESIDE ST MERIDIAN,ID 83646 | | 200 | |
| HANGER CAMPAIGN FUND | POB 2 MT SOLON, VA 22843 | 541998207 | 1000 | |
| HAROLD RITCHIE CAMPAIGN FUND | 25255 HIGHWAY 62 FRANKLINTON,LA 70438 | | 1000 | |
| HATCHETT FOR HOUSE | 100 CANTERBURY ROAD DUBLIN,GA 31021 | | 500 | |
| HENRY BURNS CAMPAIGN FUND | 129 LONE OAK DRIVE BENTON,LA 71006 | | 250 | |
| HERBERT DIXON CAMPAIGN FUND | 2701 THIRD ST ALEXANDRIA, LA 71302 | | 250 | |
| HILL CAMPAIGN | 529 TRAMEL ROAD DRY CREEK, LA 70637 | 208234140 | 250 | |
| HOLLY RASCHEIN CAMPAIGN | 714 BARCELONA ROAD KEY LARGO,FL 33037 | 462032982 | 500 | |
| HOSMER FOR SENATE | 8 SUMMIT AVE LACONA,NH 03246 | 273600949 | 500 | |
| HOUSE DEMOCRATIC CAMPAIGN COMMITTEE | PO BOX 2021 AUGUSTA,ME 04338 | 222695883 | 3000 | |
| HOUSE REPUBLICAN MAJORITY FUND | PO BOX 5629 AUGUSTA,ME 04330 | 043344644 | 3000 | |
| HOWARD R MAXWELL | 716 GRAHAM RD DALLAS, GA 30132 | | 500 | |
| HUDSON CAMPAIGN COMMITTEE | 1022 ORIENTE AVE WILMINGTON, DE 19807 | 510354482 | 300 | |
| HUNTER GREENE CAMPAIGN | 8708 JEFFERSON HWY SUITE B BATON ROUGE, LA 70809 | 202001882 | 500 | |
| INGRAM FOR DELEGATE | 3302 OAKLAWN BLVD HOPEWELL, VA 23860 | 541998478 | 500 | |
| JACK LATVALA CAMPAIGN | 610 S BOULEVARD TAMPA,FL 33606 | 264720208 | 500 | |
| JACK MONTOUCET CAMPAIGN FUND | 123 CREDEUR RD SCOTT,LA 70583 | | 750 | |
| JACOB RABURN CAMPAIGN | 133 S HARBOR DR VENICE, FL 34285 | 455461360 | 500 | |
| JAKE FILES FOR STATE SENATE | 300 FREE FERRY LANDING FORT SMITH, AR 72903 | | 500 | |

| Form 990, Schedule C, Part 1-C | | (a) ETN | (d) A manual mand c | (a) A manus - f = 11 |
|---|--|----------------|--|---|
| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| JAKOBSSON FOR STATE REPRESENTATIVE | PO BOX 273 CHAMPAIGN,IL 61824 | 141321946 | 250 | |
| JAMES ARMES CAMPAIGN FUND | 2255 UNIVERSITY PARKWAY LEESVILLE,LA 71446 | | 250 | |
| JAMES EDWARD BUSKEY | 2207 BARRETTS LANE MOBILE,AL 36617 | | 500 | |
| JAMES STEVEN CLOUSE | PO BOX 818 OZARIK,AL 36361 | | 1000 | |
| JAMES THOMAS WAGGONER | 1829 MISSION ROAD BIRMINGHAM, AL 85216 | | 1000 | |
| JAN ANGEL FOR STATE SENATE | 5184 GRANADA PL SE PORT ORCHARD, WA 98367 | 461415980 | 1800 | |
| JANET CRUZ CAMPAIGN | PO BOX 4544 TAMPA,FL 33677 | 271458589 | 500 | |
| JANET HOWELL FOR SENATE | PO BOX 2608 RESTON, VA 20195 | 541795288 | 1000 | |
| JARED BROSSETT CAMPAIGN LLC | PO BOX 820335 NEW ORLEANS, LA 70182 | 264201521 | 500 | |
| JASON BRODEUR CAMPAIGN | 400 S PALMETTO AVE SANFORD,FL 32771 | | 500 | |
| JASON MONKS | 1002 W WASHINGTON DR MERIDIAN,ID 83642 | | 200 | |
| JASON RAPERT FOR STATE SENATE | PO BOX 10388 CON WAY, AR 72034 | | 500 | |
| AY INSLEE FOR WASHINGTON | 712 35TH AVENUE SEATTLE,WA 98122 | 452533952 | 2101 | |
| JEAN LEISING FOR STATE SENATE | 5268 STOCKPILE ROAD OLDENBURG,IN 47036 | | 300 | |
| DEANETTE NUNEZ CAMPAIGN | 2820 SW 140 AVE MIAMI,FL 33175 | | 500 | |
| JEFF ARNOLD CAMPAIGN | 3520 GEN DEGAULLE DR PO BOX 3071 NEW OLRLEANS, LA 70141 | | 1000 | |
| JEFF KLEIN FOR NEW YORK | 3602 E TREMONT AVE SUITE 205 BRONX,NY 10465 | 461398412 | 1000 | |
| JEFF THOMPSON CAMPAIGN | PO BOX 6097 BOSSIER CITY, LA 71171 | | 250 | |
| JEFF THOMPSON FOR IDAHO | 1739 PEGGYS LN IDAHO FALLS,ID 83402 | | 200 | |
| JEFFREY BRANDES FOR STATE SENATE | 610 S BOULEVARD TAMPA,FL 33606 | 455394887 | 500 | |
| JEREMY GILLIAM FOR STATE REPRESENTATIVE | 1825 MISSLE BASE RD JUDSONIA, AR 72081 | | 500 | |
| JIM CARNS CAMPAIGN | PO BOX 43797 BIRMINGHAM, AL 35243 | | 250 | |
| JIM DOTSON FOR STATE REPRESENTATIVE | PO BOX 651 BENTONVILLE, AR 72712 | | 350 | |
| JIM FANNIN CAMPAIGN FUND | 568 TAYLOR RD JONESBORO, LA 71257 | 720835772 | 500 | |
| JIM GUTHRIE | 425 W GOODENOUGH RD | | 200 | |
| IIM MORRIS CAMPAIGN FUND | PO BOX 217 OIL CITY, LA 71061 | 260722974 | 500 | |
| JOE NEGRON CAMPAIGN | PO BOX 1816 STUART, FL 34995 | 263077938 | 500 | |
| JOEL ROBIDEAUX CAMPAIGN FUND | 102 WOODVALE AVE STE B LAFAYETTE, LA 70503 | | 500 | |
| JOHN A BERTHELOT CAMPAIGN FUND | 1939 S TIFFANI AVE GONZALES, LA 70737 | | 500 | |
| JOHN BEL EDWARDS CAMPAIGN FUND | PO BOX 974 AMITE,LA 70422 | | 1500 | |

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|---|---|----------------|--|---|
| JOHN COOPER FOR STATE SENATE | PO BOX 16801 JONESBORO, AR 72404 | 463539298 | 500 | |
| JOHN SCHRODER CAMPAIGN FUND | 704 COTTAGE LANE COVINGTON, LA 70433 | | 500 | |
| JOHN SMITH CAMPAIGN FUND | 611-B SOUTH 5TH STREET LEESVILLE, LA 71446 | | 500 | |
| JOHN THRASHER CAMPAIGN | 2640 A MITCHAM DR TALLAHASSEE, FL 32308 | 270175559 | 500 | |
| JOHN VANDER WOUDE | 5311 RIDGEWOOD RD NAMPA,ID 83687 | | 300 | |
| JOHN WOOD CAMPAIGN | 3601 CYPRESS GARDENS RD SUITE A WINTER HAVEN,FL 33884 | | 500 | |
| JOHNNY KEY STATE SENATE CAMPAIGN | PO BOX 350 MOUNTAIN HOME, AR 72653 | | 750 | |
| JON CRAIG FORD | PO BOX 8208 GADSDEN, AL 35902 | | 250 | |
| JON EUBANKS FOR STATE REPRESENTATIVE | 2543 GREASY VALLEY RD PARIS, AR 72855 | | 350 | |
| JOSE OLIVA CAMPAIGN | 1581 WEST 49 ST SUITE 334 HIALEAH,FL 33012 | 450820660 | 500 | |
| JOSEPH P LOPINTO III CAMPAIGN FUND | 2016 PERSIMMON AVENUE METAIRIE, LA 70001 | | 500 | |
| JOYCE ELLIOT FOR STATE SENATE | 124 W CAPITOL AVE SUITE 1630 LITTLE ROCK, AR 72201 | 452504923 | 500 | |
| IP MORRELL CAMPAIGN FUND INC | 6305 ELYSIAN FIELDS AVE STE 404B NEW ORLEANS,LA 70122 | 205053613 | 500 | |
| JUDITH R CLIBBORN FOR STATE REPRESENTATI | PO BOX 808 MERCER ISLAND, WA 98040 | 910402650 | 500 | |
| JULIE STOKES CAMPAIGN | 13 CHATEAU RUE DU JARDIN ST KENNER,LA 70065 | 461527460 | 750 | |
| KANSAS REPUBLICAN SENATORIAL COMMITTEE | PO BOX 2663 TOPEKA,KS 66601 | 481036127 | 5000 | |
| KAREN ST GERMAIN CAMPAIGN FUND | 3413 HWY 70 PIERRE PART, LA 70339 | | 1000 | |
| KATRINA R JACKSON CAMPAIGN | 1051 KANSAS LANE STE A MONROE,LA 71203 | 452705040 | 250 | |
| KELLEY LINCK FOR STATE REPRESENTATIVE | 13823 HWY 14 S YELLVILLE,AR 72687 | | 350 | |
| KELVIN ATKINSON ELECTION CAMPAIGN | 832 HIGH ALTITUDE AVE NORTH LAS VEGAS,NV 89032 | 200776115 | 1000 | |
| KEN BRAGG FOR HOUSE | 63 PINE CREST CIRCLE SHERIDAN,AR 72150 | | 350 | |
| KEN JOHNSON CAMPAIGN | 15900 COURT STREET MOULTON,AL 35650 | 274128993 | 500 | |
| KEN MARTINEZ LEADERSHIP FUND | 310 WEST HIGH STREET GRANTS,NM 87020 | 263551428 | 1500 | |
| KEN ROBERSON CAMPAIGN | PO BOX 496727 PORT CHARLOTTE, FL 33949 | 830360592 | 500 | |
| KENNY R COX CAMPAIGN FUND | 781 HWY 494 NATCHITOCHES,LA 71457 | | 250 | |
| KENYAN MCDUFFIE | 2609 NORTH CAPITOL STREET NE WASHINGTON,DC 20002 | 371621753 | 500 | |
| KEVIN CAMERON FOR OREGON | 4742 LIBERTY ROAD 236 SALEM,OR 97302 | 202770834 | 500 | |
| KIM WILLIAMS FOR STATE REPRESENTATIVE | 23 WEIR CIRCLE WILMINGTON, DE 19808 | 455617126 | 300 | |
| KIRK TALBOT CAMPAIGN FUND | 9523 JEFFERSON HWY STE B RIVER RIDGE, LA 70123 | 208778325 | 500 | |
| L A REPUBLICAN LEGISLATIVE DELEGATION | PO BOX 44422 BATON ROUGE,LA 708044422 | 721259311 | 6000 | |

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from | (e) A mount of political |
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| (a) Name | (b) Address | (C) LIN | filing organization's own internal funds If none, enter -0- | contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| LA SENATE DEMOCRATIC CAMPAIGN COMMITTEE | PO BOX 4385 BATON ROUGE, LA 708214385 | 720748953 | 7500 | |
| LANCE W CLOW | 2170 BITTERROOT DR TWIN FALLS,ID 83301 | | 200 | |
| LARRY AHERN CAMPAIGN ACCOUNT | PO BOX 40551 ST PETERSBURG, FL 33743 | 320304530 | 500 | |
| LARRY GEORGE FOR STATE SENATE | 16795 SW PARRETT MOUNTAIN RD SHERWOOD,OR 97140 | 205601940 | 500 | |
| LARRY TEAGUE CAMPAIGN | PO BOX 903 NASHVILLE, AR 70852 | | 750 | |
| LEADERSHIP COUNCIL | PO BOX 11025 OLYMPIA, WA 98508 | 911714860 | 10000 | |
| LEADERSHIP FOR MAINES FUTURE PAC | PO BOX 476 NEWPORT,ME 04953 | 010536382 | 1000 | |
| LEADERSHIP FUND | 89358 CRANBERRY LANE BANDON,OR 97411 | 931129428 | 500 | |
| LEE HEIDER | 1631 RICHMOND DRIVE TWIN FALLS,ID 83301 | | 300 | |
| LILLIAN PENELOPE PERRYMAN HOUSTON | PO BOX 925 NASHVILLE,GA 31639 | | 500 | |
| LISA TORRACO FOR STATE SENATE | 1019 2ND STREET NW ALBUQUERQUE,NM 87102 | | 250 | |
| LIZBETH BENACQUISTO CAMPAIGN | PO BOX 60543 FORT MEYERS,FL 33906 | 270346940 | 500 | |
| LOPEZ FOR SENATE | PO BOX 354 NASSAU, DE 19969 | 454206417 | 500 | |
| LUKE MALEK | 721 N 8TH ST COEUR D ALENE, ID 83814 | | 250 | |
| LYNN GREER CAMPAIGN | PO BOX 40 ROGERSVILLE, AL 35652 | 800589391 | 250 | |
| MACGREGOR ADMINISTRATIVE ACCOUNT | 8209 VISTA ROYALE LANE ROCKFORD, MI 49341 | 452400815 | 1750 | |
| MACK BODI WHITE CAMPAIGN | PO BOX 854 WATSON,LA 70786 | | 1150 | |
| MAESTAS 2012 | 544 61ST ST NW ALB,NM 87105 | | 250 | |
| MAINE GOP CANDIDATE FUND | 9 HIGGINS STREET AUGUSTA,ME 04330 | 010221978 | 2000 | |
| MAINE SENATE REPUBLICAN MAJORITY PAC | PO BOX 1 AUGUSTA,ME 04332 | 263733192 | 3000 | |
| MAINE WOMENS LEADERSHIP PAC | 146 CAPITOL STREET PO BOX 5057 AUGUSTA,ME 04332 | 342034680 | 500 | |
| MAJOR THIBAUT CAMPAIGN FUND | 2004 FALSE RIVER DR STE B NEW ROADS, LA 70760 | | 250 | |
| MAJORITY LEADER PAC | PO BOX 1205 COLONIAL HEIGHTS, VA 23834 | 202818542 | 2500 | |
| MARCEL BLACK CAMPAIGN COMMITTEE | PO BOX 491 TUSCUMBIA,AL 35674 | | 250 | |
| MARK BIVIANO FOR STATE REPRESENTATIVE | 118 EMERALD LAKE DR SEARCY,AR 72143 | | 350 | |
| MARK HERRING FOR ATTORNEY GENERAL | PO BOX 6201 LEESBURG, VA 20178 | 460557604 | 4000 | |
| MARK LOWERY FOR HOUSE | 229 SUMMIT VALLEY CIRCLE MAUMELLE,AR 72113 | | 350 | |
| MARK PAFFORD CAMPAIGN | 872 BALFREY DR SOUTH WEST PALM BEACH,FL 33413 | 274807520 | 500 | |
| MARYLYNN MAGAR CAMPAIGN | PO BOX 4152 TEQUESTA,FL 33469 | 452061518 | 500 | |
| MASSIE FOR DELEGATE | PO BOX 29598 RICHMOND, VA 23242 | 208670393 | 500 | |

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|---|---|-----------|---|---|
| | | | filing organization's own internal funds If none, enter -0- | contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| MATT GAETZ FOR STATE REPRESENTATIVE | 301 BROOKS ST SE FT WALTON BEACH,FL 32548 | 270663693 | 500 | |
| MATT HUDSON CAMPAIGN | 610 S BOULEVARD TAMPA,FL 33606 | 461968444 | 500 | |
| MENDELSON FOR CHAIRMAN | 4119 W ST NW STE 200 WASHINGTON, DC 20007 | 522318934 | 1500 | |
| MIA JONES CAMPAIGN | 221 N HOGAN ST SUITE 169 JACKSONVILLE,FL 32202 | 270634819 | 500 | |
| MICHAEL BILECA CAMPAIGN FOR STATE REPRES | 6720 SW 145TH ST MIAMI,FL 33158 | | 500 | |
| MICHIGAN CHAMBER PAC II | 600 S WALNUT STREET LANSING,MI 48933 | 208100621 | 2500 | |
| MICHIGAN CHAMBER PAC III | 600 SOUTH WALNUT STREET LANSING,MI 48933 | 272985750 | 10000 | |
| MICHIGAN REPUBLICAN PARTY ADMINISTRATIVE ACCOUNT | 520 SEYMOUR ST LANSING, MI 48933 | 381221182 | 500000 | |
| MICHIGAN SUCCESS FUND | 208 N CAPITOL AVE FLOOR 3 LANSING, MI 48933 | 462655446 | 3500 | |
| MIKE CHANEY CAMPAIGN | PO BOX 23242 JACKSON,MS 39225 | | 1000 | |
| MIKE HILL CAMPAIGN | 133 S HARBOR DR VENICE,FL 34285 | 462518997 | 500 | |
| MIKE HUVAL CAMPAIGN | 391 CANNERY RD BREAUX BRIDGE,LA 70517 | | 250 | |
| MIKE MILLICAN CAMPAIGN COMMITTEE | 995 COUNTRY ESTATES DR HAMILTON,AL 35570 | | 500 | |
| MIKE MOYLE FOR HOUSE REPRESENTATIVES | 480 N PLUMMER RD STAR,ID 83669 | | 300 | |
| MIKE WALSWORTH FOR SENATE CAMPAIGN FUND | 4007 WHITES FERRY RD STE A WEST MONROE, LA 71291 | | 500 | |
| MISHLER FOR STATE SENATE | PO BOX 202 BREMEN,IN 46506 | | 300 | |
| MISSOURIANS FOR KOSTER | PO BOX 1551 JEFFERSON CITY, MO 65102 | 261171482 | 1000 | |
| MISSOURIANS FOR TIM JONES | PO BOX 434 EUREKA, MO 63025 | 462657970 | 1000 | |
| MISSY IRVIN FOR SENATE | PO BOX 106 MOUNTAIN VIEW, AR 72560 | | 500 | |
| MORSE FOR STATE SENATE | 14 OLD FARM RD SALEM,NH 03079 | 273071602 | 500 | |
| MURIEL BOWSER FOR MAYOR | 4300 GEORGIA AVENUE WASHINGTON,DC 20011 | 462359926 | 2000 | |
| NANCY LANDRY CAMPAIGN | 208 CAMBRIDGE DR LAFAYETTE,LA 70503 | 205519817 | 250 | |
| NATHAN DEAL FOR GOVERNOR INC | PO BOX 2495 GAINESVILLE,GA 30503 | 264800781 | 2500 | |
| NEIGHBORS FOR EARL EHRHART | 5500 WRIGHT RD POWDER SPRING, GA 30127 | 010671037 | 500 | |
| NEIL RISER CAMPAIGN FUND | 297 HEARN ISLAND DR COLUMBIA,LA 71418 | | 500 | |
| NEVADA SENATE DEMOCRATS | 1210 S VALLEY VIEW SUITE 114 LAS VAGAS, NV 89102 | 880316606 | 500 | |
| NEW HAMPSHIRE SENATE DEMOCRATIC CAUCUS | 105 N STATE ST CONCORD,NH 03301 | 020473096 | 1000 | |
| NEW JERSEY GOP | 150 W STATE ST STE 230 TRENTON,NJ 08608 | 226199182 | 25000 | |
| NEW YORK STATE DEMOCRATIC COMMITTEE | 461 PARK AVE SOUTH 9TH FLR NEW YORK, NY 10016 | 130628260 | 50000 | |
| NICK LORUSSO CAMPAIGN FUND | PO BOX 24568 NEW ORLEANS, LA 70184 | | 500 | |

| Form 990, Schedule C, P | art 1-C, Line 5 | | | |
|---|---|----------------|---|---|
| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| NJ SENATE DEMOCRATIC MAJORITY | 196 WEST STATE ST TRENTON,NJ 08608 | 900039921 | 7500 | |
| NORDQUIST FOR LEGISLATURE | 615 DORCAS ST OMAHA,NE 68108 | 453007140 | 1000 | |
| NORTH OAKLAND FUTURE | 262 LAKEVIEW STREET LAKE ORION,MI 48362 | 272791783 | 2000 | |
| NORTHLAND ADMINISTRATIVE FUND | 215 S WASHINGTON SQ STE 210 LANSING,MI 48933 | 273265682 | 3000 | |
| OBANNON FOR HOUSE | PO BOX 70365 RICHMOND, VA 23255 | 541994683 | 750 | |
| OBENSHAIN FOR ATTORNEY GENERAL | PO BOX 555 HARRISONBURG, VA 22803 | 454081393 | 5000 | |
| OCCASIONS CATERERS INC | 655 TAYLOR ST NE WASHINGTON, DC 20017 | 521514400 | 1299 | |
| ONEILL FOR SENATE DISTRICT 13 | 343 SARAH LANE NW STE D ALBUQUERQUE, NM 87114 | | 250 | |
| ORR FOR SENATE COMMITTEE | PO BOX 305 DECATUR,AL 35602 | 202952719 | 1000 | |
| ORROCK FOR HOUSE COMMITTEE | PO BOX 458 THORNBURG, VA 22565 | 311723213 | 1000 | |
| OTTER FOR IDAHO | PO BOX 1456 BOISE,ID 83701 | 201992148 | 5000 | |
| PAGE CORTEZ CAMPAIGN FUND | 111 SOUTHWARK DRIVE LAFAYETTE,LA 70508 | 260496815 | 250 | |
| PALMER FOR IDAHO | 1524 N MERIDIAN RD MERIDIAN,ID 83642 | | 200 | |
| PAT BAUER FOR STATE REPRESENTATIVE | 1307 SUNNYMEDE AVE SOUTH BEND, IN 46615 | 912065956 | 250 | |
| PATRICIA HAYNES SMITH CAMPAIGN FUND | 251 FLORIDA STREET STE 300 BATON ROUGE, LA 70801 | | 500 | |
| PATRICK C WILLIAMS CAMPAIGN FUND | 609 TEXAS ST 3RD FLR SHREVEPORT, LA 71101 | | 750 | |
| PAUL HOLLIS CAMPAIGN | PO BOX 1862 MANDEVILLE, LA 70470 | | 250 | |
| PAUL ROMRELL | 512 PARK ST SAINT ANTHONY,ID 83445 | | 200 | |
| PAVING THE WAY FOR A PROSPEROUS MAINE | 169 COLES CORNER ROAD WINTERPORT, ME 04496 | 453192136 | 1000 | |
| PEGGY GILMOUR FOR NH SENATE | 126 DEPOT RD HOLLIS,NH 03049 | | 250 | |
| PEOPLE FOR JOE SCHMICK | PO BOX 620 COLFAX,WA 99111 | 450582705 | 500 | |
| PEOPLE TO ELECT CARL TRUJILLO | 11 W GUTIERREZ ST UNIT 3212 SANTA FE,NM 87506 | | 250 | |
| PETER COURTNEY FOR STATE SENATE | 2925 ISLAND VIEW DR NE SALEM,OR 97303 | 204760843 | 500 | |
| PHILIP GUNN CAMPAIGN | PO BOX 1159 CLINTON,MS 39060 | 462755095 | 1000 | |
| PHRMA COLORADO ACTION FUND | 1740 BROADWAY DENVER,CO 80274 | 205123531 | 110000 | |
| PHRMA INDEPENDENT EXPENDITURE COMMITTEE | 1127 11TH ST SUITE 300 SACRAMENTO,CA 95814 | 900239652 | | 489999 |
| PHRMA PAC CO JOHN EICHMAN | 1127 11TH ST SUITE 300 SACRAMENTO,CA 95814 | 204447742 | | 90000 |
| PHRMA TENNESSEE POLITICAL ACTION COMMITT | POLITICAL ACTION COMMITTEE 100 GAL ATLANTA,GA 30339 | 364746919 | 20000 | |
| PIERCE FOR NH SENATE | PO BOX 83 ETNA,NH 03750 | | 250 | |
| POSTHUMUS LYONS COMMUNITY FUND | 7815 ALDEN NASH AVE SE ALTO, MI 49506 | 452893371 | 2250 | |

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|---|---|-----------|--|---|
| PROSPEROUS MICHIGAN FUND | 208 N CAPITOL AVE FLOOR 3 LANSING,MI 48933 | 455322366 | 2000 | |
| RALSTON FOR REPRESENTATIVE INC | PO BOX 1196 BLUE RIDGE, GA 30513 | 272894066 | 1000 | |
| RAUSCH FOR SENATE | 65 GULF RD DERRY,NH 03038 | 273141629 | 250 | |
| RE ELECT DELEGATE BOB BRINK | PO BOX 7516 ARLINGTON, VA 22207 | 541926039 | 500 | |
| RE ELECT PAT SULLIVAN | 26513 168TH PL SE COVINGTON,WA 98042 | 043679431 | 500 | |
| RE ELECTION OF CARY PIGMAN | 3100 N BONNETT CREEK ROAD AVON PARK, FL 33825 | | 500 | |
| REBEKAH WARREN ENVISION MICHIGAN FUND | 234 8TH ST ANN ARBOR, MI 48103 | 208710993 | 1000 | |
| REGINA ASHFORD BARROW CAMPAIGN FUND | 6512 VINEYARD DR BATON ROUGE, LA 70812 | | 250 | |
| REGINALD MURDOCK FOR HOUSE | PO BOX 1071 MARIANNA, AR 72360 | | 350 | |
| RENE GARCIA STATE SENATE CAMPAIGN | 217 E 63RD STREET HIALEAH,FL 33013 | 260668129 | 500 | |
| REPRESENTATIVE BOB HENSGENS CAMPAIGN | 305 WILKINSON ST GUEYDAN, LA 70542 | | 500 | |
| REPUBLICAN ASSEMBLY CAMPAIGN COMMITTEE | 315 STATE STREET 4TH FLR ALBANY,NY 12210 | 141713936 | 26000 | |
| REPUBLICAN GOVERNORS ASSOCIATION | 1747 PENNSYLVANIA AVE NW SUITE 250 WASHINGTON, DC 20006 | 113655877 | 255000 | |
| REPUBLICAN HOUSE CAMPAIGN COMMITTEE | 14206 EBY OVERLAND PARK,KS 66221 | 481044547 | 5000 | |
| REPUBLICAN PARTY OF FLORIDA | 420 E JEFFERSON STREET TALLAHASSEE,FL 32301 | 590683241 | 30000 | |
| REPUBLICAN SENATE MAJORITY COMMITTEE | PO BOX 488 MILFORD,NH 03055 | 263830837 | 2000 | |
| REPUBLICAN STATE LEADERSHIP COMMITTEE | 1201 F ST NW STE 675 WASHINGTON, DC 20004 | 050532524 | 150570 | |
| RESPECT MAINE PAC | PO BOX 211 HAMPDEN, ME 04444 | 272487987 | 1000 | |
| RICHARD BURFORD CAMPAIGN FUND | 671 HIGHWAY 171 STE E STONEWALL, LA 71078 | | 250 | |
| RICHARD CORCORAN CAMPAIGN | 2640 A MITCHAM DRIVE TALLAHASSEE,FL 32308 | 264812563 | 500 | |
| RICHARD LINDSEY CAMPAIGN | 14160 COUNTY RD D22 CENTRE,AL 35960 | | 250 | |
| RICHARD WOMACK FOR HOUSE | 866 N 12TH ST ARKADELPHIA,AR 71923 | | 350 | |
| RICK D YOUNGBLOOD | 12612 SMITH AVE NAMPA,ID 83651 | | 200 | |
| RICK GALLOT CAMPAIGN FUND | PO BOX 1117 RUSTON,LA 71273 | | 1000 | |
| RICK WARD III CAMPAIGN FUND | 3741 LA HWY 1 PORT ALLEN, LA 70767 | | 500 | |
| ROB SHADOIN CAMPAIGN FUND | 207 W MISSISSIPPI SUITE 300 RUSTON,LA 71270 | 721338878 | 250 | |
| ROBERT ADLEY FOR SENATE | 611 JESSIE JONES DR BENTON,LA 71006 | 260902386 | 500 | |
| ROBERT THOMPSON FOR STATE SENATE | 129 CYPRESS POINTE PARAGOULD, AR 70852 | | 500 | |
| RODNEY TOM FOR STATE SENATE | PO BOX 594 MEDINA, WA 98039 | 571234123 | 900 | |
| ROGER H BEDFORD CAMPAIGN FUND | PO BOX 370 RUSSELLVILLE,AL 35653 | 631071826 | 1000 | |

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political |
|---------------------------------------|---|----------------|---|---|
| | | | | organization If none, enter -0- |
| RONALD RENUART CAMPAIGN | 138 OSPREY COVE LANE PONTA VEDRA BEACH, FL 32082 | | 500 | |
| RONALD WAYNE CHANCE | 130 REGAL OAK TYRONE,GA 30290 | 252021442 | 500 | |
| RONNIE JOHNS CAMPAIGN FUND | PO BOX 1609 SULPHUR,LA 70664 | 912064819 | 500 | |
| ROSENBAUM FOR SENATE | 2327 SE 41ST AVE PORTLAND, OR 97214 | 931231362 | 500 | |
| RUSCHE FOR REPRESENTATIVE | 1405 27TH AVE LEWISTON,ID 83501 | | 300 | |
| RUTLAND GOPAC | 8 UPLAND DRIVE RUTLAND, VT 05701 | 134331424 | 500 | |
| SAM CATALDO FOR STATE SENATE | 120 HOMETOWN ROAD FARMINGTON, NH 08835 | | 250 | |
| SAM JONES CAMPAIGN FUND | 1501 STERLING ROAD FRANKLIN, LA 70538 | 260151947 | 250 | |
| SAMUEL OLENS FOR ATTORNEY GENERAL | PO BOX 7 MARRIETTA, GA 30061 | 371583098 | 1000 | |
| SASLAW FOR SENATE | PO BOX 1254 SPRINGFIELD, VA 22151 | 541414651 | 1500 | |
| SCHAER FOR ASSEMBLY | 511 PASSAIC AVE PASSAIC,NJ 07055 | 203977878 | 500 | |
| SCHMIDT FOR SENATE | 267 CIRCLE DRIVE MOSCOW,ID 83843 | | 200 | |
| SENATE DEMOCRATIC CAMPAIGN COMMITTEE | 126 WESTERN AVENUE POB 237 AUGUSTA, ME 04330 | 010478979 | 1500 | |
| SENATE DEMOCRATIC CAMPAIGN COMMITTEE | 15 MAIDEN LANE STE 608 NEW YORK, NY 10038 | 112924245 | 40000 | |
| SENATE DEMOCRATIC LEADERSHIP FUND | 2236 SE 10TH AVE PORTLAND, OR 97214 | 204673386 | 500 | |
| SENATE DEMOCRATIC VICTORY FUND | 29 S LASALLE ST SUITE 936 CHICAGO,IL 60603 | 263309861 | 5000 | |
| SENATE LEADERSHIP COMMITTEE | PO BOX 896 MONTPELIER, VT 05601 | 030596946 | 1000 | |
| SENATE MAJORITY CAMPAIGN COMMITTEE | 47 S MERIDIAN ST STE 200 INDIANAPOLIS, IN 46204 | 351519681 | 1000 | |
| SENATE REPUBLICAN CAMPAIGN COMMITTEE | 99 WASHINGTON AVENUE STE 702 ALBANY,NY 12210 | 141753654 | 82750 | |
| SENATE REPUBLICAN MAJORITY | PO BOX 225 COLONIA,NJ 07067 | 900044141 | 6000 | |
| SENATOR ANTHONY PETRUCELLI CHARITABLE | FOUNDATION PO BOX 520 233 WINTHROP, MA 02152 | 263356164 | 2500 | |
| SENATOR GREG TARVER CAMPAIGN FUND | 2062 NORTH CROSS DR SHREVEPORT, LA 71107 | | 500 | |
| SHARON COOPER FOR STATE HOUSE | 1234 POWERS FERRY RD STE 104 MARIETTA, GA 30067 | 611507158 | 500 | |
| SHARON PRITCHETT CAMPAIGN | 3800 NW 187TH ST MIAMI GARDENS, FL 33055 | 461781817 | 500 | |
| SHARON WESTON BROOME CAMPAIGN FUND | 3591 ALETHA DR BATON ROUGE,LA 70814 | | 500 | |
| SHEILA LAMPKIN 2014 CAMPAIGN | 350 RABB RD MONTICELLO, AR 71655 | | 350 | |
| SHERYL L NUXOLL | 805 N MAPLE COTTONWOOD,ID 83522 | 461143841 | 200 | |
| SHEVRIN JONES CAMPAIGN | 4702 SW 23RD ST WEST PARK,FL 33023 | | 500 | |
| SICKLES FOR DELEGATE | PO BOX 10628 FRANCONIA, VA 22310 | 541998277 | 500 | |
| SOKOLA FOR SENATE | 24 BEECH HILL DRIVE NEWARK, DE 19711 | 510342093 | 300 | |

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|--|--|-----------|--|---|
| SOUTH CAROLINA HOUSE DEMOCRATIC CAUCUS | PO BOX 12049 COLUMBIA,SC 29211 | 570969662 | 1000 | |
| SOUTH CAROLINA SENATE DEMOCRATIC CAUCUS | PO BOX 11484 COLUMBIA,SC 29211 | 571104282 | 7000 | |
| STENNETT FOR SENATE | PO BOX 475 KETCHUM,ID 83340 | | 200 | |
| STEPHEN ORTEGO CAMPAIGN | PO BOX 488 CARENCRO,LA 70520 | | 500 | |
| STEPHEN WILCOX HURST | 155 QUAIL ROAD MUNFORD,AL 36268 | | 500 | |
| STEVE CRISAFULLI CAMPAIGN | 5525 N COURTENAY PKWY MERRITT ISLAND,FL 32953 | | 500 | |
| STEVE HENSON FOR STATE SENATE | 2643 STERLING ACRES DRIVE TUCKER, GA 30084 | 731646963 | 500 | |
| STEVE LANDES FOR DELEGATE COMMITTEE | PO BOX 12 VERONA, VA 24482 | 541781589 | 1000 | |
| SUE CHEW FOR HOUSE | 1304 LINCOLN AVE BOISE,ID 83706 | 562372718 | 200 | |
| SUNRISE ADMINISTRATIVE ACCOUNT | 1408 WEATHERHILL CT EAST LANSING, MI 48823 | 463127012 | 1250 | |
| SUPPORTERS OF JACK D FRANK | PO BOX 274 WOODSTOCK,IL 600980274 | 364334299 | 250 | |
| SUSANA-PAC | 6100 UPTON BLVD NE STE 590 ALBUQUERQUE,NM 87110 | 275216617 | 5000 | |
| SWEENY FOR SENATE COMMITTEE | 300 NORTH MARION AVE WENONAH,NJ 08090 | 113734672 | 1000 | |
| SWEENY FOR SENATE COMMITTEE | 300 NORTH MARION AVE WENONAH,NJ 08090 | 113734672 | 1000 | |
| SYVERSON FOR SENATE | 3923 E STATE ST ROCKFORD,IL 61108 | 363809005 | 250 | |
| TAMMY IRONS FOR SENATE | 219 N COURT STREET FLORENCE,AL 35630 | 270276071 | 500 | |
| TAXPAYERS FOR JOHN REAGAN | 53 MT DELIGHT ROAD DEERFIELD,NH 03037 | | 250 | |
| TEAM DEMMER | PO BOX 192 DIXON,IL 61021 | 453274742 | 250 | |
| TERRY BROWN CAMPAIGN FUND | 277 MEADE RD COLFAX,LA 71417 | 453122934 | 250 | |
| TERRY MCAULIFFE FOR GOVERNOR | 7527 OLD DOMINION DR MCLEAN,VA 22102 | 461466919 | 20000 | |
| TERRY MCMILLAN FOR STATE LEGISLATURE | 2001 E LOHMAN AVE 110-282 LAS CRUCES,NM 88001 | | 250 | |
| THOMAS CARMODY CAMPAIGN FUND | PO BOX 1527 SHREVEPORT,LA 71165 | | 250 | |
| TIM BURNS CAMPAIGN FUND | PO BOX 2531 MANDEVILLE, LA 70470 | | 500 | |
| TIM LEMONS FOR STATE REPRESENTATIVE | PO BOX 825 CABOT,AR 72023 | | 350 | |
| TOM LEE CAMPAIGN | PO BOX 2743 BRANDON,FL 33509 | 455401898 | 500 | |
| TOM WHATLEY FOR SENATE | PO BOX 841 AUBURN,AL 36832 | | 1000 | |
| TOM WILLMOTT CAMPAIGN FUND | 3209 KANSAS AVENUE KENNER, LA 70065 | | 500 | |
| TOMMY THOMPSON FOR HOUSE | 15 ASHLEY DR MORRILTON,AR 72110 | | 350 | |
| Toscano for Delegate | PO BOX 283 CHARLOTTESVILLE, VA 22902 | 134313090 | 500 | |
| TRAVIS CUMMINGS CAMPAIGN ACCOUNT | PO BOX 2404 ORANGE PARK,FL 32067 | 454432155 | 500 | |

| (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's own internal funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|---|---|-----------|--|---|
| TROUTMAN SANDERS PUBLIC AFFAIRS GROUP | 600 PEACHTREET ST NE STE 5200 ATLANTA,GA 30308 | 580946915 | 1005 | |
| TROY BROWN CAMPAIGN FUND | PO BOX 179 PAINCOURTVILLE, LA 70391 | | 500 | |
| VERMONT DEMOCRATIC HOUSE CAMPAIGN | PO BOX 1058 MONTPELIER, VT 05601 | 030360168 | 1000 | |
| VINCENT PIERRE CAMPAIGN FUND | PO BOX 93022 LAFAYETTE,LA 70509 | | 250 | |
| VIRGINIA SENATE DEMOCRATIC CAUCUS | 1710 EAST FRANKLIN STREET 2ND FLR RICHMOND,VA 23223 | 541198977 | 2500 | |
| VIVIAN DAVIS FIGURES | PO BOX 7985 MOBILE,AL 36670 | 271280993 | 500 | |
| VOLUNTEERS FOR DELGADO | 4325 W SHAKESPEARE AVE CHICAGO,IL 60639 | | 250 | |
| WARE FOR DELEGATE | 325 N JEFFERSON STREET ROANOKE,VA 24016 | 161656352 | 500 | |
| WASATCH LEGISLATIVE PAC | 642 KIRBY LANE SPANIH FORK,UT 84660 | 463185502 | 1500 | |
| WASHINGTON STATE DEMOCRATS EXEMPT ACCOUN | 615 2ND AVE STE 580 SEATTLE, WA 98104 | 911135732 | 20000 | |
| WASHINGTON STATE REPUBLICAN PARTY | 16400 S CENTER PARKWAY SUITE 200 SEATTLE,WA 98188 | 910486656 | 10000 | |
| WAYNE KRIEGER FOR STATE REPRESENTATIVE | 95702 SKYVIEW RANCH ROAD GOLD BEACH, OR 97444 | 931276688 | 500 | |
| WES LONG FOR STATE REPRESENTATIVE DISTRI | PO BOX 617 GUNTERSVILLE,AL 35976 | 271170511 | 500 | |
| WILLIAM DAVIS FOR STATE REPRESENTATIVE | PO BOX 704 HOMEWOOD,IL 604308704 | 364481677 | 250 | |
| WINDER FOR SENATE | 5528 N EBBETTS AVE BOISE,ID 83713 | 272247823 | 300 | |
| WOMEN ON THE MOVE | 3636 W 15TH AVE GARY,IN 46404 | | 250 | |
| WOODBURN FOR SENATE | 524 FARAWAY ROAD DALTON,NH 03598 | | 250 | |
| WWWSTEVEDAVISSONCOM | PO BOX 341 SALEM,IN 47167 | | 250 | |

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

DLN: 93493317063124

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

| | chae delvide | | | Inspection |
|-----------------|---|--|--------------------------|---------------------------------------|
| | of the organization ACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA | | | oloyer identification number |
| Part | Organizations Maintaining Donor Advorganization answered "Yes" to Form 990, | | | |
| | organization answered Tes to Form 550, | (a) Donor advised funds | | (b) Funds and other accounts |
| 1 To | otal number at end of year | | | |
| 2 A 9 | ggregate contributions to (during year) | | | |
| 3 A 9 | ggregate grants from (during year) | | | |
| 4 A 9 | ggregate value at end of year | | | |
| | id the organization inform all donors and donor adviso nds are the organization's property, subject to the org | _ | | rsed Yes No |
| us | id the organization inform all grantees, donors, and do sed only for charitable purposes and not for the benefi | | | |
| | Conservation Easements. Complete if | the organization answered "Ves | " to Forn | · · · · · · · · · · · · · · · · · · · |
| | · | | to ron | 11 990, Part IV, lille 7. |
| | urpose(s) of conservation easements held by the orga 「Preservation of land for public use (e g , recreation | | an histor | rically important land area |
| Ë | Protection of natural habitat | | | d historic structure |
| | Preservation of open space | , | | |
| | omplete lines 2a through 2d if the organization held a assement on the last day of the tax year | qualified conservation contribution | ın the forr | n of a conservation |
| | asement on the fast day of the tax year | | | Held at the End of the Year |
| a To | otal number of conservation easements | | 2a | Tield at the Lind of the Fedi |
| b То | otal acreage restricted by conservation easements | | 2b | |
| | umber of conservation easements on a certified histo | rıc structure ıncluded ın (a) | 2c | |
| d N | umber of conservation easements included in (c) acqu storic structure listed in the National Register | • • | 2d | |
| 3 N | umber of conservation easements modified, transferre | ed, released, extinguished, or termin | ated by th | ne organization during |
| | e tax year ▶ | , | • | 5 |
| | · | | | |
| | umber of states where property subject to conservation | | | |
| er | oes the organization have a written policy regarding the forcement of the conservation easements it holds? | | | ☐ Yes ☐ No |
| 5 S1 | taff and volunteer hours devoted to monitoring, inspec | cting, and enforcing conservation ea | sements (| during the year |
| 1 | mount of expenses incurred in monitoring, inspecting, \$ | , and enforcing conservation easeme | ents durin | g the year |
| | oes each conservation easement reported on line 2(d nd section 170(h)(4)(B)(ii)? |) above satisfy the requirements of | section 1 | 70(h)(4)(B)(ı) |
| ba | n Part XIII, describe how the organization reports con alance sheet, and include, if applicable, the text of the se organization's accounting for conservation easeme | footnote to the organization's finance | | |
| art I | Organizations Maintaining Collections Complete if the organization answered "Ye | | | her Similar Assets. |
| w | the organization elected, as permitted under SFAS 1 orks of art, historical treasures, or other similar assetervice, provide, in Part XIII, the text of the footnote to | 16 (ASC 958), not to report in its re s held for public exhibition, education | venue sta on, or rese | earch in furtherance of public |
| w | the organization elected, as permitted under SFAS 1 orks of art, historical treasures, or other similar asset ervice, provide the following amounts relating to these | s held for public exhibition, education | | |
| (i | Revenues included in Form 990, Part VIII, line 1 | | | ► \$ |
| (i | i) Assets included in Form 990, Part X | | | ► \$ |
| 2 If | the organization received or held works of art, histori llowing amounts required to be reported under SFAS: | | | |
| a R | evenues included in Form 990, Part VIII, line 1 | | | ► \$ |

b Assets included in Form 990, Part X

| Part | Organizations Maintaining Co | llections of Art | , His | tori | <u>cal Tre</u> | easu | res, or O | the | <u>r Similar As</u> | ssets (| continued) |
|------|--|-----------------------|--------------------|----------------|----------------|--------------|---------------|-------|---------------------|--|--|
| 3 | Using the organization's acquisition, access collection items (check all that apply) | ion, and other recor | ds, ch | neck | any of th | e foll | owing that a | are a | sıgnıfıcant us | e of its | |
| а | Public exhibition | | d | Γ | Loan o | rexcl | nange progr | ams | | | |
| b | Scholarly research | | e | Γ | Other | | | | | | |
| c | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's c Part XIII | ollections and expla | ın hov | w the | y further | the c | rganızatıon | 's ex | empt purpose | ın | |
| 5 | During the year, did the organization solicit | | | | | | | | nılar | _ | _ |
| | assets to be sold to raise funds rather than | | | | | | | | | ┌ Yes | No |
| -ar | Escrow and Custodial Arrang Part IV, line 9, or reported an ar | | | | | | i answere | a "Y | es" to Form | 990, | |
| 1a | Is the organization an agent, trustee, custod included on Form 990, Part X? | | | | | | or other ass | ets ı | not | ┌ Yes | ┌ No |
| b | If "Yes," explain the arrangement in Part XI $$ | II and complete the | follov | wıng t | able | | _ | | | | |
| | | | | | | | L | | A | mount | |
| С | Beginning balance | | | | | | - | 1c | | | |
| d | Additions during the year | | | | | | | 1d | | | |
| e | Distributions during the year | | | | | | | 1e | | | |
| f | Ending balance | | | | | | L | 1f | | | |
| 2a | Did the organization include an amount on F | orm 990, Part X, line | e 21? | • | | | | | | ┌ Yes | ┌ No |
| b | If "Yes," explain the arrangement in Part XI | II Check here if the | expl | anatı | on has b | een p | rovided in F | art : | XIII | | . Г |
| Pai | Endowment Funds. Complete | ıf the organızatıoı | n ans | were | ed "Yes | " to I | orm 990, | Par | t IV, line 10. | | |
| | | (a)Current year | (b |) Prior | year t | (c) T | wo years back | (d) | Three years back | (e)Four | years back |
| a | Beginning of year balance | | | | | | | _ | | | |
| b | Contributions | | | | | | | - | | | |
| С | Net investment earnings, gains, and losses | | | | | | | | | | |
| d | Grants or scholarships | | | | | | | | | | |
| e | Other expenditures for facilities | | | | | | | | | | |
| _ | and programs | | | | | | | | | | |
| t | Administrative expenses | | | | | | | + | | | |
| g | End of year balance | | | | | | | | | | |
| | Provide the estimated percentage of the cur | rent year end baland | ce (lin | ne 1g | , column | (a)) l | neld as | | | | |
| а | Board designated or quasi-endowment 🕨 | | | | | | | | | | |
| b | Permanent endowment ► | | | | | | | | | | |
| C | Temporarily restricted endowment $ ightharpoonup$ | | | | | | | | | | |
| | The percentages in lines 2a, 2b, and 2c sho | | | | | | | | | | |
| Ba | Are there endowment funds not in the posse organization by | ssion of the organiz | ation | that | are held | and a | dministere | d for | the | Ye | s No |
| | (i) unrelated organizations | | | | | | | | За | (i) | 3 110 |
| | (ii) related organizations | | | | | | | | | (ii) | |
| b | If "Yes" to 3a(II), are the related organization | | | | | | | | 3 | ВЬ | <u> </u> |
| | Describe in Part XIII the intended uses of the | | | | | | | | | | |
| ar | t VI Land, Buildings, and Equipme | | the o | rgan | ızatıon | ansv | vered 'Yes | ' to | Form 990, P | art IV, | line |
| | 11a. See Form 990, Part X, line Description of property | 10. | | (a |) Cost or c | ther | (b)Cost or o | ther | (c) Accumulate | d (d) | Book value |
| | 2 as an parameter of property | | | | ıs (ınvestn | | basis (othe | | depreciation | | |
| La I | and | | _ | + | | | | | | +- | |
| | Buildings | | - | | | | | | | + | |
| | easehold improvements | | - | | | | 2,493 | .116 | 1,053,3 | 51 | 1,439,765 |
| | Equipment | | | | | | 3,335 | | 3,039,0 | - | 296,963 |
| | Other | | | | | | 6,398 | | | | 1,408,259 |
| | Add lines 12 through 1a (Column (d) must e | agual Form 000 Part | <u>-</u> V colu | <u> </u> | D) line 1 | 0(a)) | - | ,_02 | 1,550,0 | | 2 144 097 |

| Part VII Investments—Other Securities. Co | omplete if the organization | answered 'Yes' to For | m 990, Part IV, line 11b. |
|---|-------------------------------|-------------------------|-----------------------------|
| See Form 990, Part X, line 12. (a) Description of security or category | (b)Book value | (c) Method of v | |
| (including name of security) (1)Financial derivatives | | Cost or end-of-year | market value |
| (2)Closely-held equity interests | | | |
| Other | | | |
| | | | |
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| | | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12) | <u>* </u> | | 000 D 1777 L 11 |
| Part VIII Investments—Program Related. C See Form 990, Part X, line 13. | ompiete if the organization | n answered 'Yes' to Fo | orm 990, Part IV, line IIC. |
| (a) Description of investment | (b) Book value | (c) Method of v | |
| | | Cost or end-of-year | market value |
| | | | |
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| Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization | an answered 'Ves' to Form 990 | Dart IV line 11d See | Form 000 Part V June 15 |
| (a) Desc | | o, raitiv, ille ilu see | (b) Book value |
| | | | |
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| Total. (Column (b) must equal Form 990, Part X, col.(B) line | 15.) | | |
| Part X Other Liabilities. Complete if the org | janization answered 'Yes' t | o Form 990, Part IV, | ine 11e or 11f. See |
| Form 990, Part X, line 25. (a) Description of liability | (b) Book value | | |
| Federal income taxes | (2) 2001 (4)40 | | |
| | 12 257 702 | | |
| PENSION BENEFITS PENSION BENEFITS | 12,357,703 | | |
| DEFERRED RENT EXPENSE | 12,062,033 | | |
| ACCRUED ANNUAL LEAVE | 1,145,219 | | |
| ACCROED AIRCONE LEAVE | 1,113,213 | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25) | 28,436,181 | | |

| Par | | Revenue per Audited Financial Stat wered 'Yes' to Form 990, Part IV, line 1 | | ts With Revenue բ | oer Re | turn Complete if |
|--------------|--|---|------------------|--|----------------|--|
| 1 | | er support per audited financial statements | | | 1 | |
| 2 | Amounts included on line 1 b | out not on Form 990, Part VIII, line 12 | | | | |
| а | Net unrealized gains on inves | stments | 2a | | | |
| b | Donated services and use of | facilities | 2b | |] | |
| c | Recoveries of prior year gran | ts | 2c | |] | |
| d | Other (Describe in Part XIII |) | 2d | | | |
| e | Add lines 2a through 2d | | | | 2e | |
| 3 | Subtract line 2e from line 1 | | | | 3 | |
| 4 | Amounts included on Form 9 | 90, Part VIII, line 12, but not on line 1 | | | | |
| а | Investment expenses not inc | cluded on Form 990, Part VIII, line 7b . | 4a | | | |
| b | Other (Describe in Part XIII |) | 4b | | | |
| C | Add lines 4a and 4b | | | | 4c | |
| 5 | Total revenue Add lines 3 ar | nd 4c. (This must equal Form 990, Part I, line | 12). | | 5 | |
| Part | | Expenses per Audited Financial Sta | | nts With Expenses | s per | Return. Complete |
| | | nswered 'Yes' to Form 990, Part IV, line er audited financial statements | | | 1 | |
| 1 | | | | | <u> </u> | |
| 2 | | ut not on Form 990, Part IX, line 25 | ء ا | I | | |
| a | | | 2a | | - | |
| b | | | 2b | | + | |
| C | Other losses | | 2c | | + | |
| d | Other (Describe in Part XIII | | 2d | 1 | ٦. | |
| e | · · | | | | 2e | |
| 3 | | 00 Dark IV Jun 25 history and an inc. | | | 3 | - |
| 4 | | 90, Part IX, line 25, but not on line 1: | ۱ | I | | |
| a | • | luded on Form 990, Part VIII, line 7b | 4a | | - | |
| b | Other (Describe in Part XIII | | 4b | | ۱. | |
| с - | | | | | 4c | |
| 5 Dor | t XIII Supplemental In | and 4c. (This must equal Form 990, Part I, lin | e 18) | | 5 | |
| Prov Part | vide the descriptions required fo | or Part II, lines 3, 5, and 9, Part III, lines 1a I, lines 2d and 4b, and Part XII, lines 2d and | | | | e any additional |
| | Return Reference | Explanation | | | | |
| PART | X, LINE 2 | PHRMA BELIEVES THAT IT HAS APPRO AND AS SUCH, DOES NOT HAVE ANY U THE FINANCIAL STATEMENTS PHRMA' TO EXAMINATION BY THE IRS FOR THR | NCERTA S INCO | AIN TAX POSITIONS ME TAX RETURNS AF | THAT RE GEN | ARE MATERIAL TO IERALLY SUBJECT |
| | | | | | | |
| | | | | | | |

| | <u> </u> | |
|-----------|-------------------|----------------------|
| Part XIII | Supplemental Info | ormation (continued) |
| Ret | turn Reference | Explanation |
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Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE F

Department of the Treasury

Internal Revenue Service

(Form 990)

As Filed Data -

DLN: 93493317063124

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

| | | | | | | · |
|------|---|-------------------------------------|---|---|---|--|
| | e of the organization | | | | Employer ident | ification number |
| РНА | RMACEUTICAL RESEARCH & MA | NUFACTURER: | S OF AMERICA | | | |
| | | | | | 53-0241211 | |
| Pa | rt I General Information "Yes" to Form 990, Par | | s Outside th | e United States. Co | omplete if the organiz | ation answered |
| 1 | For grantmakers. Does the o | rganızatıon ma | ııntaın records | to substantiate the a | mount of its grants ar | nd |
| | other assistance, the grantee | s' eligibility fo | r the grants or | assistance, and the s | election criteria used | |
| | to award the grants or assista | ance? | | | | ┌ Yes ┌ No |
| 2 | For grantmakers. Describe in assistance outside the United | | ganızatıon's pı | ocedures for monitorii | ng the use of its gran | ts and other |
| 3 | Activites per Region (The follow | ing Part I, line 3 | table can be du | iplicated if additional spa | ce is needed) | |
| | | | | | | T |
| | (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for and investments in region |
| (1) | See Add'l Data | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | |
| 3a | Sub-total | 2 | 5 | | | 5,182,176 |
| | Total from continuation sheets to Part I | 0 | 0 | | | 0 |
| c | : Totals (add lines 3a and 3b) | 2 | 5 | | | 5,182,176 |

| | · · · · · · |
|---------|--|
| Part II | Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, |
| | Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. |
| | |

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) A mount of cash grant | (f) Manner of cash disbursement | (g) A mount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|----------------------------|---|-------------------|-------------------------|------------------------------|---------------------------------------|--|--|--|
| (1) See Add'l Data | | | | | | | | |
| (2) | | | | | | | | |
| (3) | | | | | | | | |
| (4) | | | | | | | | |
| (5) | | | | | | | | |
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| (12) | | | | | | | | |
| (13) | | | | | | | | |
| (14) | | | | | | | | |
| (15) | | | | | | | | |
| (16) | | | | | | | | |
| | | | <u> </u> | I | l | ı | | |

| 2 | Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, i | recognized as |
|---|---|---------------|
| | tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. | 🕨 |

23

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

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

Part IV Foreign Forms

| 1 | Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i> | Г | Yes | F | No |
|---|--|---|-----|---|----|
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) | Γ | Yes | হ | No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471) | Γ | Yes | □ | No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) | Γ | Yes | V | No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865) | Г | Yes | দ | No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713). | ٦ | Yes | Г | No |

Schedule F (Form 990) 2013

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

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

| Return Reference | Explanation |
|------------------|--|
| PART I, LINE 2 | DEPENDING ON THE NATURE AND PURPOSE OF THE GRANT, PHRMA MAY REQUIRE THE RECIPIENT OF A GRA NT TO SUBMIT PERIODIC REPORTS OR SIMILAR DOCUMENTATION TO VERIFY THAT THE GRANT IS BEING U SED APPROPRIATELY FOR THE INTENDED USE. IN GENERAL, UNLESS THE GRANT IS USED TO SUPPORT A SPECIFIC EFFORT OR PROJECT, THEN NO ADDITIONAL FORMAL MONITORING MAY BE INVOLVED BEYOND EN SURING APPROPRIATE DOCUMENTATION OF THE GRANT AND LEGITIMACY OF THE RECIPIENT ORGANIZATION IRRESPECTIVE OF THE NATURE OR PURPOSE OF THE GRANT, PHRMA AWARDS GRANTS BASED ON THE UND ERSTANDING THAT RECIPIENTS ARE RESPONSIBLE FOR ENSURING THAT GRANTS ARE USED FOR PROPER PU RPOSES AND IN COMPLIANCE WITH ALL LEGAL REQUIREMENTS |

Additional Data

Software ID:

Software Version:

EIN: 53-0241211

Name: PHARMACEUTICAL RESEARCH & MANUFACTURERS OF

AMERICA

Form 990 Schedule F Part I - Activities Outside The United States

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|-----------------------------------|---|--|--|---|--------------------------------------|
| EAST ASIA AND THE PACIFIC - | 1 | 4 | 1 | MONITORS FOREIGN REGS | 2,820,531 |
| MIDDLE EAST AND NORTH AFRICA - | 1 | 1 | | MONITORS FOREIGN REGS | 647,046 |
| EAST ASIA AND THE PACIFIC | 0 | 0 | GRANT MAKING | | 961,906 |

| Form 990 Schedule F Part I - Activities Outside The United States | | | | | | | | | |
|---|---|--|--|---|--------------------------------------|--|--|--|--|
| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region | | | | |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | GRANT MAKING | | 172,159 | | | | |
| NORTH AMERICA | 0 | 0 | GRANT MAKING | | 50,000 | | | | |
| SOUTH AMERICA | 0 | 0 | GRANT MAKING | | 306,648 | | | | |

| Form 990 Schedule F F | Form 990 Schedule F Part I - Activities Outside The United States | | | | | | | | | | |
|---------------------------------|---|--|--|---|--------------------------------------|--|--|--|--|--|--|
| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region | | | | | | |
| SUB-SAHARAN AFRICA | 0 | 0 | GRANT MAKING | | 75,000 | | | | | | |
| MIDDLE EAST AND NORTH AFRICA | 0 | 0 | GRANT MAKING | | 148,886 | | | | | | |

| Form 990 Schedu | orm 990 Schedule F Part II - Grants or Entities Outside The United States | | | | | | | | | |
|--------------------------|---|------------------------------|--|------------------------------|------------------------------------|---|--|--|--|--|
| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) A mount of cash grant | (f) Manner of cash disbursement | (g) A mount of non- cash assistance | (h) Description of non-cash assistance | (ı) Method of valuatıon (book, FMV, appraısal, other) | | |
| | | EAST ASIA AND THE PACIFIC | GRANT FOR ALZHEIMER UNIV PROGRAMMES IN HONG KONG & DC | 25,000 | WIRE | | | | | |
| | | EAST ASIA AND THE PACIFIC | GRANT TO SUPPORT RESEARCH TEAM IN CHINA | 20,000 | WIRE | | | | | |
| | | EAST ASIA AND THE PACIFIC | 2013 GRANT FRO THE CRDF & PHRMA SPONSOR DIALOGUE | 336,465 | WIRE | | | | | |
| | | EAST ASIA AND THE PACIFIC | SUPPORT OF THE DIA INDIA CONFERENCE TRAVEL | 10,000 | WIRE | | | | | |

| Form 990 Sched <i>v</i> | ıle F Part II | - Grants or Entiti | es Outside The Un | es Outside The United States | | | | | |
|--------------------------|--|------------------------------|--|------------------------------|------------------------------------|---|--|--|--|
| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) A mount of cash grant | (f) Manner of cash disbursement | (g) A mount of non- cash assistance | (h) Description of non-cash assistance | (ı) Method of valuatıon (book, FMV, appraisal, other) | |
| | | EAST ASIA AND THE PACIFIC | GRANT- CONDUCT LITERATURE ON ACCESS TO MEDICINE | 101,500 | WIRE | | | | |
| | | EAST ASIA AND THE PACIFIC | SPONSORSHIP FOR HTAI 2013 | 40,000 | WIRE | | | | |
| | | EAST ASIA AND THE PACIFIC | IAPO SE ASIA REGIONAL MTG 2013 SPONSORSHIP | 75,000 | WIRE | | | | |
| | | EAST ASIA AND THE PACIFIC | GRANT | 8,816 | WIRE | | | | |

| Form 990 Schedu | ıle F Part II | - Grants or Entiti | ies Outside The Uni | ited States | | | | , , , , , , , , , , , , , , , , , , , |
|--------------------------|--|------------------------------|---|------------------------------|------------------------------------|---|--|--|
| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) A mount of cash grant | (f) Manner of cash disbursement | (g) A mount of non- cash assistance | (h) Description of non-cash assistance | (ı) Method of valuatıon (book, FMV, appraısal, other) |
| | | EAST ASIA AND THE PACIFIC | 2013 STAKEHOLDER MAPPING PROJECT GRANT | 141,000 | WIRE | | | |
| | | EAST ASIA AND THE PACIFIC | GRANT FOR THE CHINA DRUG ADMIN LAW INITIATIVE PROJ- PHASE 2 | 204,125 | WIRE | | | |
| | | EUROPE | 2013 SUPPORT ECIPE'S RESEARCH & PROMOTION ADV COST | | WIRE | | | |
| | | EUROPE | EUROPEAN POLICY WRKSHP MAR 11- 12,2013 | 47,159 | WIRE | | | |

| Form 990 Schedu | 990 Schedule F Part II - Grants or Entities Outside The United States | | | | | | | | |
|--------------------------|---|--------------|---|------------------------------|------------------------------------|---|--|--|--|
| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) A mount of cash grant | (f) Manner of cash disbursement | (g) A mount of non- cash assistance | (h) Description of non-cash assistance | (ı) Method of valuatıon (book, FMV, appraısal, other) | |
| | | | GRANT- INNOVATION BRIEFING PAPER 2013 | 50,000 | WIRE | | | | |
| | | | PHRMA-PAPER ON VACCINES & RISK PERCEPTION 9/1- 9/30/13 | 5,000 | WIRE | | | | |
| | | NORTH AFRICA | SUPPORT OF AIFD ACTIVITIES & GROWTH STUDY, GMP CTD SURVEYS | 113,000 | WIRE | | | | |
| | | NORTH AFRICA | 2012 COMPETITIVE WORKSHOP GRANT | 35,886 | WIRE | | | | |

| Form 990 Schedule F Part II - Grants or Entities Outside The United States | | | | | | | | | |
|--|--|---------------|--|------------------------------|------------------------------------|---|--|--|--|
| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) A mount of cash grant | (f) Manner of cash disbursement | (g) A mount of non- cash assistance | (h) Description of non-cash assistance | (ı) Method of valuatıon (book, FMV, appraısal, other) | |
| | | NORTH AMERICA | GRANT TO DEVLOPMENT OF A WHITE PAPER & ORG OF A FORUM | 50,000 | WIRE | | | | |
| | | SOUTH AFRICA | SUPPORT VISION STUDY & STRATEGY ON IP PROJECTS | 75,000 | WIRE | | | | |
| | | SOUTH AMERICA | SUPP FOR THE 8TH AILANZA LATINA FORUM LIMA PERU NOV20-23/13 | 20,000 | WIRE | | | | |
| | | SOUTH AMERICA | BRAZILIAN REG POLICY RESEARCH PROJ 2013 50% PYMT | 121,148 | WIRE | | | | |

| Form 990 Schedu | ale F Part II | - Grants or Entiti | ies Outside The Un | ited States | | | | , , , , , , , , , , , , , , , , , , , |
|--------------------------|--|--------------------|---|------------------------------|------------------------------------|---|--|--|
| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) A mount of cash grant | (f) Manner of cash disbursement | (g) A mount of non- cash assistance | (h) Description of non-cash assistance | (ı) Method of valuatıon (book, FMV, appraısal, other) |
| | | SOUTH AMERICA | CONTRIB FOR THE 8TH ANNUAL FORUM OF ALIANZA LATINA 11/20-23 | 5,500 | WIRE | | | |
| | | | GRANT FOR PROD OF INNOV POLICIES & PROD GROWTH IN BRAZIL | 100,000 | WIRE | | | |
| | | | GRANT FOR IAPO LATIN AMERICA REGION MTG 2013 | 60,000 | WIRE | | | |

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

PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA

Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

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

Attach to Form 990

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

OMB No 1545-0047

DLN: 93493317063124

Open to Public Inspection

Employer identification number

| TIME TO THE RESEARCH WITH | THO PACTORERS O | T ATTENTON | | | | 53-0241211 | |
|---|--------------------------|--|-----------------------------|---|---|--|-------------------------------------|
| Part I General Information | n on Grants and | l Assistance | | | | • | |
| Does the organization maintain in the selection criteria used to aw Describe in Part IV the organization | ard the grants or as | sıstance? . | | | | | ▼ Yes |
| Part II Grants and Other As Form 990, Part IV, line | | | | | | | es" to |
| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of gra or assistance |
| See Additional Data Table | | | | | | | |
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| | | | | | | | |
| 2 Enter total number of section 50 | 1 1(c)(3) and governi | <u> </u> | ed in the line 1 table. | | | ► | 236 |

Enter total number of other organizations listed in the line 1 table

| Schedule I | (Form 990) 2013 |
|------------|---|
| 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) A mount of cash grant | (d)A mount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance | | | | |
|--------------------------------|---|-------------------------------------|-----------------------------------|--|---------------------------------------|--|--|--|--|
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| Part IV Supplemental Info | Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. | | | | | | | | |
| | | | | | | | | | |

| Part IV Supplemental In | 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 | | | | | | | | | | |
| | DEPENDING ON THE NATURE AND PURPOSE OF THE GRANT, PHRMA MAY REQUIRE THE RECIPIENT OF A GRANT TO SUBMIT PERIODIC REPORTS OR SIMILAR DOCUMENTATION TO VERIFY THAT THE GRANT IS BEING USED APPROPRIATELY FOR THE INTENDED USE IN GENERAL, UNLESS THE GRANT IS BEING USED TO SUPPORT A SPECIFIC EFFORT OR PROJECT, THEN NO ADDITIONAL FORMAL MONITORING MAY BE INVOLVED BEYOND ENSURING APPROPRIATE DOCUMENTATION OF THE GRANT AND LEGITIMACY OF THE RECIPIENT ORGANIZATION IRRESPECTIVE OF THE NATURE OR PURPOSE OF THE GRANT, PHRMA AWARDS GRANTS BASED ON THE UNDERSTANDING THAT RECIPIENTS ARE RESPONSIBLE FOR ENSURING THAT GRANTS ARE USED FOR PROPER PURPOSES AND IN COMPLIANCE WITH ALL LEGAL REQUIREMENTS | | | | | | | | | | |

Additional Data

Software ID:

Software Version:

EIN: 53-0241211

Name: PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA

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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|------------------------------------|------------------------------|---|--|--|---------------------------------------|
| ASIAN AMERICANS FOR COMMUNITY 2400 MOORPARK AVE STE 300 SAN JOSE,CA 95128 | 94-2292491 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| BOB MORETTI MEMORIAL SCHOLARSHIP 1215 K STREET STE 1800 SACRAMENTO,CA 95814 | 68-0049462 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CALIFORNIA HISPANIC CHAMBERS OF COMMERCE 770 L ST STE 900 SACRAMENTO,CA 95814 | 37-1561859 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| FAMILIA UNIDA LIVING 4716 E CESAR CHAVEZ AVE BLDG A LOS ANGELES,CA 90022 | 91-1898199 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| FEDERATION OF SOUTHERN COOPERATIVES 2769 CHURCH STREET EAST POINT,GA 30344 | 58-1026695 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| GEORGIA BIOSCIENCES ORGANIZATION 1199 EUCLID AVENUE NE ATLANTA,GA 30307 | 27-3855537 | 501(C)6 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | |
| GEORGIA LEGISLATIVE BLACK CAUCUS INC PO BOX 38028 ATLANTA,GA 30334 | 58-1500919 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | |
| GREEN DOOR 1623 16TH ST NW STE 500 WASHINGTON, DC 20009 | 52-1066168 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | |
| MASSACHUSETTS HEALTH COUNCIL 200 RESERVOIR STREET STE 101 NEEDHAM,MA 02494 | 04-2296739 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | |
| MERCATUS CENTER INC 3351 NORTH FAIRFAX DRIVE SUITE 450 ARLINGTON,VA 22201 | 54-1436224 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL ACADEMY OF SOCIAL INSURANCE 1776 MASSACHUSETTS AVE NW SUITE 400 400 WASHINGTON, DC 20036 | 52-1451753 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL WOMENS LAW CENTER 11 DUPONT CIRCLE NW STE 800 WASHINGTON, DC 20036 | 52-1213010 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| OREGON MEDICAL ASSOCIATION 11740 SW 68TH PARKWAY STE 100 PORTLAND,OR 97223 | 93-0497431 | 501(C)6 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PATIENT SERVICES INCORPORATED PO BOX 1602 MIDLOTHIAN,VA 23113 | 54-1596178 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PHYSICIANS LIABILITY INSURANCE COMPANY PO BOX 1838 OKLAHOMA CITY,OK 73101 | 73-1088591 | CORPORATION | 5,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SO OTHERS MIGHT EAT SOME 71 O STREET NW WASHINGTON,DC 20001 | 23-7098123 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| TUITION MAGICIAN 230 N SCREENLAND DRIVE BURBANK,CA 91505 | 20-8128143 | CORPORATION | 5,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| US RUSSIA BUSINESS COUNCIL 1110 VERMONT AVE NW STE 350 WASHINGTON,DC 20005 | 52-1797549 | 501(C)6 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| VIRGINIA CHAMBER OF COMMERCE 919 EAST MAIN STREET STE 900 RICHMOND,VA 23219 | 54-0421190 | 501(C)6 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| WASHINGTON TENNIS & EDUCATION FOUNDATION 16TH AND KENNEDY STREETS NW WASHINGTON, DC 20011 | 52-6046504 | 501(C)3 | 5,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN KIDNEY FUND 11921 ROCKVILLE PIKE STE 300 ROCKVILLE,MD 20852 | 23-7124261 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ARIZONA BIOINDUSTRY ASSOCIATION INC 107 S SOUTHGATE DRIVE CHANDLER,AZ 852263222 | 86-0938465 | 501(C)6 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ASIAN AMERICAN JUSTICE CENTER INC 1140 CONNECTICUT AVE NW STE 1200 WASHINGTON,DC 20036 | 13-3619000 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ASIAN PACIFIC AMERICAN INSTITUTE FOR 1001 CONNECTICUT AVE NW STE 320 WASHINGTON, DC 20036 | 45-5177589 | 501(C)4 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| CAMPAIGN TO END OBESITY 805 15TH ST NW SUITE 650 WASHINGTON,DC 20005 | 26-0389759 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| CENTER FOR HEALTHCARE INNOVATION 222 S RIVERSIDE PLAZA SUITE 1900 CHICAGO,IL 60606 | 27-3041119 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CHILDRENS DIABETES FOUNDATION 777 GRANT ST STE 302 DENVER,CO 80203 | 84-0745008 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| COALICION DEL SECTOR PRIVADO 9TH FLOOR AIG PLAZA 250 MUNOZ RIVERA AVE SAN JUAN,PR 00918 | 66-0720000 | CORPORATION | 5,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| COALITION OF TEXANS WITH DISABILITIES 316 W 12 STREET 405 AUSTIN,TX 78701 | 74-2071160 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CONGRESSIONAL AWARD FOUNDATION PO BOX 77440 WASHINGTON, DC 20013 | 52-1168592 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FAMILY AND YOUTH INITIATIVES 468 N DAYTON LAKEVIEW RD NEW CARLISLE, OH 45344 | 31-0960546 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| FLEET RESERVE ASSOCIATION 125 N WEST ST ALEXANDRIA,VA 22314 | 53-0067600 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FLORIDA CONFERENCE OF BLACK 400 NORTH ADAMS STREET STE B TALLAHASSEE,FL 32301 | 59-3183127 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| FLORIDA OSTEOPATHIC MEDICAL ASSOCIATION 2007 APALACHEE PARKWAY TALLAHASSEE,FL 32301 | 59-0730737 | 501(C)6 | 5,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FOUNDATION FOR EDUCATION & ECONOMIC 1012 NORTH WEST STREET JACKSON,MS 39202 | 57-0902377 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FOUNDATION HOMELESS CHILDREN 235 MONTGOMERY ST STE 1142 SAN FRANCISCO,CA 94104 | 01-0679337 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| FUND FOR AMERICAN STUDIES 1706 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20009 | 13-6223604 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| GREATER CLEVELAND PARTNERSHIP 1240 HURON ROAD STE 400 CLEVELAND,OH 44115 | 34-0149250 | 501(C)6 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| HOOPS FOR YOUTH FOUNDATION 10623 JONES STREET SUITE 101 A FAIRFAX,VA 22030 | 26-1525269 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| IBIO INSTITUTE 65 E WACKER PLACE SUITE 1600 CHICAGO,IL 60601 | 32-0092551 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| IRAQ AND AFGHANISTAN VETERANS OF AMERICA 292 MADISON AVE 10TH FLOOR NEWYORK,NY 10017 | 20-1664531 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LATINA BREAST CANCER AGENCY 6 MONTEREY BOULEVARD SAN FRANCISCO, CA 94131 | 01-0628124 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MENTAL HEALTH SYSTEMS INC 9465 FARNHAM ST SAN DIEGO,CA 92123 | 95-3302967 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MICHIGAN ACADEMY OF FAMILY PHYSICIANS 2164 COMMONS PARKWAY OKEMOS,MI 48864 | 38-2381592 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MICHIGAN HOSPICE AND PALLIATIVE CARE 721 N CAPITOL AVE STE 2 LANSING,MI 48906 | 38-2305630 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NEW YORK STATE ASSOCIATION OF BLACK AND PO BOX 2079 EMPIRE PLAZA STATION ALBANY,NY 12220 | 11-2832133 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NORTH CAROLINA PSYCHOLOGICAL FOUNDATION 1004 DRESSER COURT STE 106 RALEIGH,NC 27609 | 58-1958201 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| OHIO CHAMBER OF COMMERCE 230 E TOWN STREET COLUMBUS,OH 43215 | 31-4357206 | 501(C)6 | 5,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| OHIO MANUFACTURERS ASSOCIATION 33 N HIGH ST STE 600 COLUMBUS,OH 43215 | 31-4270490 | 501(C)6 | 5,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| ONE FUND BOSTON INC 800 BOLYSTON STREET 990009 BOSTON,MA 02199 | 46-2547157 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| RETIRED ENLISTED ASSOCIATION 1111 S ABILENE COURT AURORA,CO 80012 | 84-0537947 | 501(C)19 | 5,000 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| SOUTHWESTERN COMMUNITY COLLEGE 1501 WEST TOWNLINE STREET CRESTON,IA 50801 | 42-0927778 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| UNIVERSITY OF TEXAS AT AUSTIN NORTH OFFICE BLDG A RM 4308 PO BOX 7458 AUSTIN,TX 787137458 | 74-6000203 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| USAGAINST ALZHEIMERS NETWORK 1101 K STREET NW STE 400 WASHINGTON, DC 20005 | 45-0672514 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| WASHINGTON RESEARCH COUNCIL 16300 CHRISTENSEN ROAD SUITE 207 TUKWILA,WA 98188 | 91-0459840 | 501(C)3 | 5,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| WISCONSIN CIVIL JUSTICE COUNCIL INC 10 EAST DOTY STREET STE 500 MADISON,WI 53703 | 26-4413992 | 501(C)4 | 5,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| WMC ISSUES MOBILIZATION COUNCIL INC 501 E WASHINGTON AVE MADISON,WI 537032944 | 39-1743887 | 501(C)4 | 5,000 | | | | CONTRIB-GENERAL | | |

| Form 990, Schedule 1, Part 11, 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 | cash | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| ASSEMBLY REPUBLICAN VICTORY 2011 PO BOX 225 COLONIA,NJ 07067 | 22-3087276 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| BENTLEY FOR GOVERNOR INC 5000 GRANTSWOOD RD SUITE 323 BIRMINGHAM,AL 35210 | 27-3270051 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CITIZENS FOR CHRISTINE RADOGNO PO BOX 3422 SPRINGFIELD,IL 62708 | 36-4207961 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| DEMOCRATIC LIEUTENANT GOVERNORS ASSOCIAT 412 FIRST STREET SE WASHINGTON,DC 20003 | 03-0457299 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CITIZENS FOR DURKIN PO BOX 367 WESTERN SPRINGS,IL 60558 | 36-4002366 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| KANSAS REPUBLICAN SENATORIAL COMMITTEE PO BOX 2663 TOPEKA,KS 66601 | 48-1036127 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FRIENDS OF MAGGIE HASSAN PO BOX 681 EXETER,NH 03833 | 56-2285568 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| OBENSHAIN FOR ATTORNEY GENERAL PO BOX 555 HARRISONBURG, VA 22803 | 45-4081393 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| OTTER FOR IDAHO PO BOX 1456 BOISE,ID 83701 | 20-1992148 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | cash | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| REPUBLICAN HOUSE CAMPAIGN COMMITTEE 14206 EBY OVERLAND PARK, KS 66221 | 48-1044547 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SENATE DEMOCRATIC VICTORY FUND 29 S LASALLE ST SUITE 936 CHICAGO,IL 60603 | 26-3309861 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990,Schedule 1, Pai | Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| SUSANA-PAC 6100 UPTON BLVD NE STE 590 ALBUQUERQUE,NM 87110 | 27-5216617 | 527 | 5,000 | | | | CONTRIB- POLITICAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| BIOFLORIDA INC 525 OKEECHOBEE BLVD STE 1500 WEST PALM BEACH,FL 33401 | 59-3436638 | 501(C)6 | 5,500 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| ECONOMIC CLUB OF WASHINGTON DC 1156 15TH ST NW STE 600 WASHINGTON, DC 20005 | 52-1469926 | 501(C)3 | 5,500 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CONNECTICUT RETAIL MERCHANTS ASSOCIATION 60 FOREST ST HARTFORD,CT 06105 | 06-6079119 | 501(C)6 | 5,700 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| NATIONAL ASSOCIATION OF CHAIN DRUG 1776 WILSON BLVD STE 200 ARLINGTON,VA 22209 | 51-0144922 | CORPORATION | 6,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN CANCER SOCIETY INC 30 SPEEN STREET FRAMINGHAM,MA 01701 | 13-1788491 | 501(C)3 | 6,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LATINO COMMISSION ON AIDS 24 W 25TH ST 9TH FLOOR NEW YORK, NY 10010 | 13-3629466 | 501(C)3 | 6,000 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| L A REPUBLICAN LEGISLATIVE DELEGATION PO BOX 44422 BATON ROUGE, LA 708044422 | 72-1259311 | 527 | 6,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SENATE REPUBLICAN MAJORITY PO BOX 225 COLONIA,NJ 07067 | 90-0044141 | 527 | 6,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MICHIGAN RURAL HEALTHCARE 3559 PINE ST DECKERVILLE,MI 48427 | 27-3039130 | 501(C)3 | 6,200 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL COUNCIL FOR COMMUNITY 1701 K ST NW STE 400 WASHINGTON, DC 20006 | 23-7092671 | 501(C)3 | 6,250 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CALIFORNIA MANUFACTURERS & TECHNOLOGY 980 NINTH STREET 2200 SACRAMENTO,CA 95814 | 95-1461050 | 501(C)6 | 6,500 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| RESEARCHAMERICA 1101 KING STREET SUITE 520 ALEXANDRIA,VA 22314 | 52-1609875 | 501(C)3 | 6,500 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FRIENDS OF MICHAEL J MADIGAN PO BOX 610 SPRINGFIELD,IL 62705 | 36-3418024 | 527 | 6,500 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| AMERICAN NURSES ASSOCIATION 1121 L STREET SUITE 409 SACRAMENTO,CA 95814 | 94-3214987 | 501(C)3 | 7,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| KEHOE GROUP 1477 EXPOSITION BLVD STE 31 SACRAMENTO,CA 95815 | 61-1442001 | 501(C)3 | 7,000 | | | | CONTRIB-GENERAL | | | |

| -orm 990,Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SOUTH CAROLINA SENATE DEMOCRATIC CAUCUS PO BOX 11484 COLUMBIA,SC 29211 | 57-1104282 | 527 | 7,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| KNOCK OUT ABUSE AGAINST WOMEN 1050 17TH STREET NW STE 1200 WASHINGTON, DC 20036 | 54-1907723 | 501(C)3 | 7,500 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| NATIONAL ALLIANCE ON MENTAL ILLNESS 309 W MILLBROOK RD STE 121 RALEIGH,NC 27609 | 56-1438623 | 501(C)3 | 7,500 | | | | CONTRIB-EVENT & GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| WALL CO RICHARD ZALDIVAR 111 N AVE 56 LOS ANGELES,CA 90042 | 95-4468225 | 501(C)3 | 7,500 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| COLORADO BIOSCIENCE ASSOCIATION 216 16TH ST STE 850 DENVER,CO 80202 | 84-1363258 | 501(C)6 | 7,500 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| COMBINED HEALTH AGENCIES DRIVE 4699 MURPHY CANYON ROAD SAN DIEGO,CA 92123 | 95-2644377 | 501(C)3 | 7,500 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| DELAWARE BIOSCIENCE ASSOCIATION INC 1 INNOVATION WAY SUITE 300 NEWARK,DE 19711 | 20-4147195 | 501(C)6 | 7,500 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| EDISON BIO TECHNOLOGY CENTER INC 1275 KINNEAR RD COLUMBUS,OH 43212 | 34-1577705 | 501(C)3 | 7,500 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| MIDWESTERN GOVERNORS ASSOCIATION 2025 M ST NW STE 800 WASHINGTON, DC 20036 | 27-4862860 | 501(C)3 | 7,500 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL ASSOCIATION FOR UNIFORMED SERVI 5535 HEMPSTEAD WAY SPRINGFIELD,VA 22151 | 52-0880162 | 501(C)19 | 7,500 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PRESCRIPTION DRUG ASSISTANCE FOUNDATION 200 BROADWAY STREET SUITE 100 SEATTLE,WA 98122 | 33-1134368 | 501(C)3 | 7,500 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| WISCONSIN WOMENS HEALTH FOUNDATION INC 2503 TODD DRIVE MADISON,WI 53713 | 39-1900678 | 501(C)3 | 7,500 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LA SENATE DEMOCRATIC CAMPAIGN COMMITTEE PO BOX 4385 BATON ROUGE, LA 708214385 | 72-0748953 | 527 | 7,500 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NJ SENATE DEMOCRATIC MAJORITY 196 WEST STATE ST TRENTON,NJ 08608 | 90-0039921 | 527 | 7,500 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAS HEALTH FOUNDATION 101 DUDDINGTON PLACE SE WAHINGTON,DC 20003 | 45-3048929 | 501(C)3 | 8,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| GOVERNORS CUP FOUNDATION INC 755 RIVERPOINT DR WEST SACRAMENTO,CA 95605 | 80-0356309 | 501(C)3 | 8,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ILLINOIS ACADEMY OF FAMILY PHYSICIANS 4756 MAIN STREET LISLE,IL 60532 | 36-2150319 | 501(C)3 | 8,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SOUTH CAROLINA BIOTECHNOLOGY 411 UNIVERSITY RIDGE STE A GREENVILLE,SC 29601 | 20-0613951 | 501(C)3 | 8,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MAKE A WISH FOUNDATION ONE MUSTANG DRIVE COHOES,NY 12047 | 14-1703503 | 501(C)3 | 8,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MASSACHUSETTS ASSOCIATION FOR MENTAL 130 BOWDOIN ST STE 309 BOSTON,MA 02108 | 04-2104711 | 501(C)3 | 8,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MEDTECH ASSOCIATION INC 235 HARRISON STREET SUITE 209 SYRACUSE,NY 13202 | 20-1405018 | 501(C)6 | 8,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL KIDNEY FOUNDATION 99 TROY RD STE 200 EAST GREENBUSH, NY 12061 | 14-1559082 | 501(C)3 | 8,000 | | | | CONTRIB-GENERAL | | | |

| orm 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| WOMENS FOREIGN POLICY GROUP 1615 M STREET NW STE 210 WASHINGTON, DC 20036 | 52-1818839 | 501(C)3 | 8,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| XCONOMY INC 215 FIRST STREET STE 030 CAMBRIDGE, MA 02142 | 02-0807038 | CORPORATION | 8,000 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule I, Par | 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL COMMITTEE FOR QUALITYASSURANCE 1100 13TH ST NW STE 1000 WASHINGTON, DC 20005 | 52-1191985 | 501(C)3 | 8,333 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL KIDNEY FOUNDATION 131 STEUART ST STE 520 SAN FRANCISCO,CA 94105 | 13-1673104 | 501(C)3 | 8,500 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| AMERICAN LIVER FOUNDATION 2033 6TH AVE STE 260 SEATTLE, WA 98121 | 36-2883000 | 501(C)3 | 9,000 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ASIAN PACIFIC AMERICAN INSTITUTE 1001 CONN AVE NW STE 530 WASHINGTON, DC 20036 | 52-1917903 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ASIAN PACIFIC ISLANDER 8359 ELK GROOVE FLORIN RD STE 103 186 SACRAMENTO,CA 95829 | 55-0849384 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| <u>Form 990,Schedule I, Pa</u> | 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| COMMUNITY HOPE INC 199 POMEROY ROAD PARSIPPANY,NJ 07054 | 22-2647038 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| DAVID A WINSTON HEALTH POLICY FELLOWSHIP 2000 14TH ST NORTH STE 780 ARLINGTON,VA 22201 | 52-1492039 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| GAY & LESBIAN MEDICAL ASSOCIATION 1326 18TH STREET SUITE 22 WASHINGTON, DC 20036 | 94-2901694 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| GREATER DES MOINES PARTNERSHIP 700 LOCUST STREET SUITE 100 DES MOINES,IA 50309 | 42-1489668 | 501(C)6 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990,Schedule I, Par | orm 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| HEALTHCARE CONFERENCE ADMINISTRATORS LLC 22529 39TH AVE SE BOTHELL,WA 98021 | 91-1892021 | LLC | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| HISPANIC FEDERATION INC 55 EXCHANGE PL 5TH FLOOR NEW YORK, NY 10005 | 13-3573852 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| HM&C CENTER STAGE LLC 233 PENNSYLVANIA AVE SE SECOND FLOOR WASHINGTON, DC 20003 | 26-1582812 | LLC | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| IDAHO GOVERNORS CUP SCHOLARSHIP FUND INC PO BOX 983 BOISE,ID 83701 | 20-8277116 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| INDEPENDENT WOMENS FORUM 1875 I STREET NW STE 500 WASHINGTON, DC 20006 | 54-1670627 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| KAKKIS EVERYLIFE FOUNDATION 77 DIGITAL DRIVE SUITE 210 NOVATO,CA 94949 | 26-4614274 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| KEYSTONE CENTER 1628 SAINTS JOHN ROAD KEYSTONE,CO 80435 | 84-0688506 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| LULAC INSTITUTEINC 201 E MAIN STE 605 EL PASO,TX 79901 | 52-2072106 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL COUNCIL OF LA RAZA 1126 16TH STREET NW STE 600 WASHINGTON, DC 20036 | | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL ITALIAN AMERICAN FOUNDATION 1860 19TH ST NW AMB PETER F SECCHIA BLDG WASHINGTON, DC 20009 | 52-1071723 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| OAKLAND MILITARY INSTITUTE 2269 CHESTNUT ST STE 500 SAN FRANCISCO, CA 94123 | 91-2073068 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| OLD NORTH STATE MEDICAL SOCIETY 114 WEST PARISH ST STE 300 DURHAM,NC 27701 | 56-6060861 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| -orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| OVARIAN CANCER NATIONAL ALLIANCE 901 E STREET NW STE 405 WASHINGTON, DC 20004 | 31-1581756 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| RARE PROJECT 28 ARGONAUT STE 150 ALISO VIEJO,CA 92656 | 26-3331487 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| ROBERTS FAMILY DEVELOPMENT CENTER PO BOX 188218 SACRAMENTO,CA 95818 | 68-0470557 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| SANDRE SWANSON YOUTH FOUNDATION 5429 MADISON AVE SACRAMENTO,CA 95841 | 27-4362460 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SOCIETY FOR WOMENS HEALTH RESEARCH 1025 CONNECTICUT AVENUE NW SUITE 601 WASHINGTON, DC 20036 | 52-1694732 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| STAGLIN MUSIC FESTIVAL FOR MENTAL HEALTH PO BOX 680 RUTHERFORD,CA 94573 | 68-0359707 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| STUDENT NATIONAL MEDICAL ASSOCIATION 5113 GEORGIA AVE NW WASHINGTON,DC 20011 | 52-0965479 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| TEXAS PUBLIC POLICY FOUNDATION 900 CONGRESS AVE STE 400 AUSTIN,TX 78701 | 74-2524057 | CORPORATION | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| VIRGINIA BIOTECHNOLOGY ASSOCIATION 800 E LEIGH ST STE 14 RICHMOND,VA 23219 | 54-1644709 | 501(C)6 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| WASHINGTON INTERNATIONAL TRADE 1300 PENNSYLVANIA AVE NW STE 400 WASHINGTON, DC 20004 | 52-1907420 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| WYOMING CONGRESSIONAL AWARD COUNCIL PO BOX 462 ENCAMPMENT,WY 82325 | 83-0264665 | 501(C)3 | 10,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ACTION CF 66 NOTTINGHAM RD FAIR LAWN,NJ 07410 | 20-0349885 | 501(C)4 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| ASIAN & PACIFIC ISLANDER AMERICAN 450 SUTTER ST STE 600 SAN FRANCISCO,CA 94108 | 94-3030866 | CORPORATION | 10,000 | | | | CONTRIB-GENERAL | | | | |

| Form 990,Schedule I, Pa | form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| BONNIE JADDARIO A BREATH AWAY FROM THE 1100 INDUSTRIAL ROAD SUITE 1 SAN CARLOS,CA 94070 | 20-4417327 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CAPITAL AREA REACH PROGRAM 601 PENNSYLVANIA AVE NW STE 900 SOUTH BUILDING WASHINGTON,DC 20006 | 26-5424088 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule I, Pa | form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CITIZENS UNITED FOR RESEARCH IN EPILEPSY 430 WERIE STE 210 CHICAGO,IL 60616 | 36-4253176 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| COMMITTEE FOR ECONOMIC DEVELOPMENT 2000 L STREET NW STE 700 WASHINGTON, DC 20036 | | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CONGRESSIONAL BLACK CAUCUS POLITICAL 227 MASS AVE NE STE 201 WASHINGTON, DC 20002 | 52-2270607 | 501(C)4 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CONGRESSIONAL COALITION 311 MASSACHUSETTS AVE NE WASHINGTON, DC 20002 | 54-2035617 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| HARMON KILLEBREW DANNY THOMPSON MEMORIAL PO BOX 232 SUN VALLEY,ID 83353 | 82-0341683 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| HISPANIC HERITAGE FOUNDATION 1444 DUKE STREET ALEXANDRIA,VA 22314 | 52-1818255 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| HOPE FOR THE WARRIORS 1335 WESTERN BLVD STE E JACKSONVILLE, NC 285465539 | 20-5182295 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| INSTITUTE FOR HEALTH AND PRODUCTIVITY 17470 N PACESETTER WAY SCOTTSDALE,AZ 85255 | 54-1856025 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| IOWA BIOTECHNOLOGY ASSOCIATION 900 DES MOINES ST DES MOINES,IA 50309 | 39-1885797 | 501(C)6 | 10,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Pa | 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| JAMES SYKES 5802 QUEENS CHAPEL ROAD 6 HYATTSVILLE,MD 20782 | 26-7230162 | SOLE PROPRIETOR | 10,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Pa | 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| JOBS FOR DELAWARE GRADUATES INC 381 W NORTH ST DOVER, DE 19904 | 51-0234401 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LAB SCHOOL OF WASHINGTON 4759 RESERVOIR ROAD NW WASHINGTON,DC 20007 | 52-1261627 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| LEADERSHIP CONFERENCE 1629 K STREET NW STE 1000 WASHINGTON, DC 20006 | 52-0789800 | 501(C)4 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| LOUISA SWAIN FOUNDATION PO BOX 1960 LARAMIE,WY 82073 | 83-0334123 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MEDICAL ASSOCIATION OF GEORGIA 1849 THE EXCHANGE SUITE 200 ATLANTA,GA 30339 | 58-0605267 | 501(C)6 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MENTAL HEALTH ASSOCIATION IN 194 WASHINGTON AVE STE 415 ALBANY,NY 12210 | 13-1954023 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| METROPOLITAN MILWAUKEE ASSOCIATION 756 N MILWAUKEE ST STE 400 MILWAUKEE,WI 53202 | 39-0475230 | 501(C)6 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL ASIAN PACIFIC CENTER ON AGING 1511 THIRD AVE STE 914 SEATTLE, WA 98101 | 52-1266741 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL ASSOCIATION OF HISPANIC NURSES 6301 RANCH DRIVE LITTLE ROCK,AR 72223 | 91-1010677 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL COUNCIL OF ASIAN PACIFIC 445 GRANT AVENUE STE 202 SAN FRANCISCO,CA 94108 | 27-3429376 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL HISPANIC CAUCUS OF STATE 444 NORTH CAPITOL ST NW STE 404 WASHINGTON, DC 20001 | 84-1168319 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL HISPANIC COUNCIL ON AGING 734 15TH NW SUITE 1050 WASHINGTON,DC 20005 | 52-1306347 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL LIEUTENANT GOVERNORS 71 CAVALIER BLVD STE 223 FLORENCE,KY 41042 | 61-1227811 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ONCOLOGY NURSING SOCIETY 125 ENTERPRISE DRIVE PITTSBURGH, PA 152751214 | 51-0183279 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| PHYSICIAN ASSISTANT FOUNDATION 2318 MILL ROAD STE 1300 ALEXANDRIA,VA 22314 | 54-1071370 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| RECTOR AND VISITORS OF THE PO BOX 800793 CHARLOTTESVILLE,VA 22908 | 54-6001796 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| SHAKESPEARE THEATRE 516 8TH STREET SE WASHINGTON,DC 20003 | 52-1405988 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| TEXANS FOR LAWSUIT REFORM 1701 BRUN ST STE 200 HOUSTON,TX 77019 | 76-0439129 | 501(C)6 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| TOUGALOO COLLEGE 500 W COUNTY LINE RD TOUGALOO,MS 39174 | 64-0303093 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| VERMONTERS FOR HEALTH CARE FREEDOM 97 STATE ST MONTPELIER,VT 05602 | 45-0833266 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| VIETNAM VETERANS OF AMERICA INC 8719 COLESVILLE ROAD STE 100 SILVER SPRING,MD 20910 | 13-2929110 | 501(C)19 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| WASHINGTON BIOTECHNOLOGY & 2324 EASTLAKE AVENUE E STE 500 SEATTLE, WA 98102 | 91-1453398 | 501(C)6 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| WASHINGTON LEGAL FOUNDATION 2009 MASSACHUSETTS AVE NW WASHINGTON, DC 20036 | 52-1071570 | 501(C)3 | 10,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CUCCINELLI FOR GOVERNOR 10560 MAIN ST STE 218 FAIRFAX,VA 22030 | 26-2280210 | 527 | 10,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | cash | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LEADERSHIP COUNCIL PO BOX 11025 OLYMPIA,WA 98508 | 91-1714860 | 527 | 10,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MICHIGAN CHAMBER PAC III 600 SOUTH WALNUT STREET LANSING,MI 48933 | 27-2985750 | 527 | 10,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| WASHINGTON STATE REPUBLICAN PARTY 16400 S CENTER PARKWAY SUITE 200 SEATTLE,WA 98188 | 91-0486656 | 527 | 10,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL MS SOCIETY 1800 M STREET NW STE 750 SOUTH WASHINGTON,DC 20036 | 53-0237585 | 501(C)3 | 10,100 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| UNITED SPINAL ASSOCIATION 75 20 ASTORIA BLVD STE 120 EAST ELMHURST, NY 113701177 | 13-5612621 | 501(C)3 | 11,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL DEMOCRATIC CLUB 30 IVY STREET SE WASHINGTON,DC 20003 | 53-0233594 | 501(C)7 | 12,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| TEXAS HEALTHCARE & BIOSCIENCE INSTITUTE 815 BRAZOS STREET STE 310 AUSTIN,TX 78701 | 76-0501034 | 501(C)6 | 12,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL CHAMBER LITIGATION CENTER 1615 H STREET NW WASHINGTON,DC 20062 | 52-1085809 | CORPORATION | 12,500 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SALT LAKE AREA CHAMBER OF COMMERCE 175 E UNIVERSITY BLVD 400 S SUITE 600 SALT LAKE CITY,UT 84111 | 87-0121901 | 501(C)6 | 13,500 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990,Schedule I, Pa | 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SHOOK HARDY & BACON LLP 2555 GRAND BLVD KANSAS CITY,MO 64108 | 44-0585497 | LLP | 13,742 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CALIFORNIA CHRONIC CARE COALITION 909 12TH STREET STE 201 SACRAMENTO,CA 95814 | 45-3074708 | 501(C)3 | 14,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN DIABETES ASSOCIATION 1701 NORTH BEAUREGARD ST ALEXANDRIA,VA 22311 | 13-1623888 | 501(C)3 | 14,250 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CENTER FOR HEALTH POLICY DEVELOPMENT 10 FREE STREET 2ND FLOOR PORTLAND,ME 04101 | 52-1576801 | 501(C)3 | 15,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990, Schedule 1, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| F D C REPORTS INC 685 ROUTE 202 206 BRIDGEWATER,NJ 08807 | 53-0178178 | CORPORATION | 15,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| INTERNATIONAL SOCIETY 3100 PRINCETON PIKE BLDG 3E LAWRENCEVILLE,NJ 08648 | 22-3369741 | 501(C)3 | 15,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LUPUS RESEARCH INSTITUTE 330 SEVENTH AVENUE SUITE 1701 NEW YORK, NY 10001 | 06-1565950 | 501(C)3 | 15,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL ASSOCIATION OF 444 N CAPITOL STREET NW WASHINGTON,DC 20001 | 27-3258188 | 501(C)3 | 15,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL ASSOCIATION OF STATES UNITED 1201 15 ST NW SUITE 350 WASHINGTON,DC 20005 | 39-6095459 | 501(C)3 | 15,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL COALITION FOR CANCER 1010 WAYNE AVE STE 315 SILVER SPRING, MD 20910 | 85-0357897 | 501(C)3 | 15,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL MEDICAL ASSOCIATION 8403 COLESVILLE ROAD STE 820 SILVER SPRING, MD 209106331 | 53-6010805 | 501(C)3 | 15,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SPINA BIFIDA ASSOCIATION OF AMERICA 4590 MACARTHUR BOULEVARD SUITE 250 WASHINGTON, DC 200074226 | 58-1342181 | 501(C)3 | 15,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| VIRGINIA HEALTHCARE FOUNDATION 707 E MAIN STREET STE 1350 RICHMOND,VA 23219 | 54-1639924 | 501(C)3 | 15,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN ASSOCIATION OF NURSE PO BOX 12846 AUSTIN,TX 78711 | 22-2547543 | 501(C)6 | 15,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN COLLEGE OF PREVENTIVE MEDICINE 1307 NEW YORK AVENUE SUITE 200 WASHINGTON, DC 20005 | 23-1722119 | 501(C)3 | 15,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| BOARD OF HISPANIC CAUCUS CHAIRS 1001 CONGRESS AVENUE SUITE 100 AUSTIN,TX 78701 | 20-2075553 | 501(C)3 | 15,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CALIFORNIA INDEPENDENT VOTER PROJECT 1215 K STREET SUITE 1500 SACRAMENTO,CA 95814 | 20-4842091 | 501(C)4 | 15,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| COLON CANCER ALLIANCE 1025 VERMONT AVE NW STE 1066 WASHINGTON,DC 20005 | 86-0947831 | 501(C)3 | 15,000 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| MEDICAL AND CHIRURGICAL FACULTY OF MARYL 1211 CATHEDRAL ST BALTIMORE, MD 21201 | 52-0410730 | 501(C)6 | 15,000 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL ASSOCIATION FOR THE ADVANCEMENT 4805 MOUNT HOPE DR BALTIMORE,MD 21215 | 13-1084135 | 501(C)3 | 15,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| WASHINGTON POLICY CENTER PO BOX 3643 SEATTLE, WA 981243643 | 91-1752769 | 501(C)3 | 15,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| YMCA OF SAN JUAN PO BOX 360590 SAN JUAN,PR 00936 | 66-0190784 | 501(C)3 | 15,000 | | | | CONTRIB-GENERAL | | |

| -orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| DOMINION LEADERSHIP TRUST PAC 106 CARTER STREET FALMOUTH,VA 22405 | 05-0524341 | 527 | 15,000 | | | | CONTRIB- POLITICAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| EPILEPSY FOUNDATION 8301 PROFESSIONAL PLACE - EAST LANDOVER,MD 20785 | 52-0856660 | 501(C)3 | 15,025 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| ARTHRITIS FOUNDATION 35 COLD SPRING RD STE 411 ROCKY HILL,CT 06067 | 06-0672782 | 501(C)3 | 15,100 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| SAN JOSE SPORTS AUTHORITY SHELLY WOLF 55 ALMADEN BLVD SUITE 210 SAN JOSE,CA 95113 | 77-0269729 | 501(C)3 | 17,500 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ALZHEIMERS ASSOCIATION DISORDERS ASSOCIATION 225 N MICHIGAN AVE FL 17 SUITE 1700 CHICAGO,IL 606017633 | 13-3039601 | 501(C)3 | 18,100 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ARTHRITIS FOUNDATION NEW ENGLAND REGION 35 COLD SPRING ROAD STE 411 ROCKY HILL,CT 06067 | 04-2113261 | 501(C)3 | 19,500 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Pai | 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CALIFORNIANS FOR DIVERSITY 770 L ST STE 950 SACRAMENTO,CA 95814 | 26-2646375 | 501(C)4 | 19,500 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CALIFORNIANS FOR RESPONSIBLE HEALTHCARE 925 L ST SUITE 1402 SACRAMENTO,CA 95814 | 20-5551773 | PAC | 20,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CONGRESSIONAL BLACK CAUCUS FOUNDATION 1720 MASSACHUSETTS AVE NW WASHINGTON, DC 20036 | 52-1160561 | 501(C)3 | 20,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL HISPANIC MEDICAL ASSOCIATION 1920 L STREET STE 725 WASHINGTON,DC 20036 | 52-1884446 | 501(C)6 | 20,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| PENNSYLVANIA RUSSIA BUSINESS COUNCIL 1760 MARKET STREET STE 1100 PHILADELPHIA,PA 19103 | 23-2820194 | 501(C)6 | 20,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| PHARMACEUTICAL INDUSTRY ASSOCIATION OF STE 350 PARKSIDE PLAZA METRO OFFICE PARK GUAYNABO,PR 00968 | 66-0363440 | 501(C)6 | 20,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN MEDICAL ASSOCIATION 330 NORTH WABASH AVE STE 39300 CHICAGO,IL 606115885 | 36-0727175 | 501(C)6 | 20,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAS AGENDA HEALTH CARE FOR ALL 1301 K STREET NW 8TH FLOOR WASHINGTON, DC 20005 | 20-0682634 | 501(C)4 | 20,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| BOYS AND GIRLS CLUB OF GREATER 4103 BENNING RD NE WASHINGTON,DC 20019 | 53-0236759 | 501(C)3 | 20,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| DIGITAL CITIZENS ACTION ALLIANCE 1150 17 TH ST NW SUITE 700 WASHINGTON,DC 20036 | 46-0820996 | CORPORATION | 20,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| DUKE UNIVERSITY PO BOX 104132 DURHAM,NC 27708 | 56-0532129 | 501(C)3 | 20,000 | | | | CONTRIB-GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| KRISTINA MARIE LYBECKER 309 E SAN MIGUEL STREET COLORADO SPRINGS,CO 80903 | 52-2312963 | SOLE PROPRIETOR | 20,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PARKINSON ACTION NETWORK FOUNDATION 1025 VERMONT AVE NW STE 1120 WASHINGTON,DC 20005 | 94-3172675 | 501(C)3 | 20,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PENNSYLVANIA BIOTECHNOLOGY ASSOCIATION 650 E SWEDESFORD RD STE 190 WAYNE,PA 19087 | 25-1621500 | 501(C)6 | 20,000 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| RELIEF RESOURCES INC 5904 13TH AVENUE BROOKLYN,NY 11219 | 52-2323151 | 501(C)3 | 20,000 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, 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) A mount of cash grant | cash | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PHRMA TENNESSEE POLITICAL ACTION COMMITT POLITICAL ACTION COMMITTEE 100 GALLERIA PKWY STE 1180 ATLANTA,GA 30339 | 36-4746919 | 527 | 20,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| TERRY MCAULIFFE FOR GOVERNOR 7527 OLD DOMINION DR MCLEAN,VA 22102 | 46-1466919 | 527 | 20,000 | | | | CONTRIB- POLITICAL | | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| WASHINGTON STATE DEMOCRATS EXEMPT ACCOUN 615 2ND AVE STE 580 SEATTLE, WA 98104 | 91-1135732 | 527 | 20,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CALIFORNIA BIO-PHARMA 1127 11TH STREET STE 747 SACRAMENTO,CA 95814 | 06-1836225 | 501(C)6 | 22,500 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LUNGEVITY FOUNDATION 218 S WABASH AVE SUITE 540 CHICAGO,IL 60604 | 36-4433410 | 501(C)3 | 22,750 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CHERISH M HART 710 2ND AVE STE 900 SEATTLE,WA 98104 | 13-5613797 | 501(C)3 | 23,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MICHIGAN BIOSCIENCES INDUSTRY 3520 GREEN COURT STE 175 ANN ARBOR,MI 48105 | 38-3142021 | 501(C)6 | 24,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ALLIANCE FOR AGING RESEARCH 1700 K STREET NW STE 740 WASHINGTON, DC 20006 | 54-1379174 | 501(C)3 | 25,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| COMPETITIVE ENTERPRISE INSTITUTE 1899 L ST NW 12TH FL WASHINGTON,DC 20036 | 52-1351785 | 501(C)3 | 25,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| CONFERENCE OF WESTERN ATTORNEYS GENERAL 1300 I STREET SACRAMENTO,CA 95814 | 68-0250561 | 501(C)3 | 25,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NALEO EDUCATIONAL FUND 1122 W WASHINGTON BLVD 3RD FLR LOS ANGELES,CA 90015 | 52-1212849 | 501(C)3 | 25,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL DEMOCRATIC INSTITUTE 455 MASSACHUSETTS AVE NW 8TH FLR WASHINGTON, DC 20001 | 52-1338892 | 501(C)3 | 25,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL PARTNERSHIP FOR WOMEN& FAMILIES 1875 CONN AVE NW STE 650 WASHINGTON, DC 20009 | 23-7124915 | 501(C)3 | 25,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NEW YORK BIOTECHNOLOGY ASSOCIATION 25 E LOOP RD STONYBROOK,NY 11790 | 11-3026494 | 501(C)6 | 25,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PREVENT CANCER DBA STEP AWAY FROM CANCER 5K WALK RUN PO BOX 34885 ALEXANDRIA,VA 22334 | 52-1429544 | 501(C)3 | 25,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| YELLOW RIBBON FUND INC 4905 DEL RAY AVENUE SUITE 500 BETHESDA,MD 20814 | 36-4567583 | 501(C)3 | 25,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN ASSOCIATION FOR CANCER RESEARCH 615 CHESTNUT STREET 17TH FLOOR PHILADELPHIA,PA 19106 | 23-6251648 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN ASSOCIATION OF PEOPLE 2013 H STREET NW 5TH FL WASHINGTON, DC 20006 | 52-1930174 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CHILDRENS HOSPITAL FOUNDATION 801 ROEDER RD STE 300 SILVER SPRING,MD 20910 | 52-1640402 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| COALITION FOR COMMON SENSE 8440 JEFFERSON HWY SUITE 301 BATON ROUGE,LA 70809 | 26-1616184 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| COALITION OF STATE RHEUMATOLOGY 1100 E WOODFIELD ROAD STE 350 SCHAUMBURG,IL 60173 | 32-0093904 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CONGRESSIONAL HISPANIC CAUCUS INSTITUTE 300 M STREET NE SUITE 510 WASHINGTON, DC 20003 | 52-1114225 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CONGRESSIONAL INSTITUTE 1001 N FAIRFAX STREET STE 410 ALEXANDRIA,VA 22314 | 52-1504189 | 501(C)4 | 25,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| FASTERCURES 1250 FOURTH ST SANTA MONICA,CA 90401 | 95-4240775 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FUND FOR AMERICAN OPPORTUNITY PO BOX 65796 WASHINGTON,DC 20035 | 77-0640788 | 527 | 25,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| GLOBALWORKS FOUNDATION 888 SEVENTEENTH ST NW STE 1200 WASHINGTON,DC 20006 | 52-2341571 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| HEALTH HIV 2000 S STREET NW WASHINGTON,DC 20009 | 52-2253960 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | |

| Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVE NW WASHINGTON,DC 20036 | 52-1481896 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| JOBS FOR AMERICAS GRADUATE INC 1729 KING STREET SUITE 100 ALEXANDRIA,VA 22314 | 52-1194546 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MONTANA CHAMBER FOUNDATION PO BOX 1162 HELENA,MT 59624 | 23-7059679 | 501(C)6 | 25,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL ASSOCIATION OF COMMUNITY 7501 WISCONSIN AVENUE 1100 W BETHESDA,MD 20814 | 52-0939952 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| TEXAS CONSERVATIVE COALITION RESEARCH 919 CONGRESS AVE STE 425 AUSTIN,TX 78701 | 74-2763191 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | | | | |
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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| THIRD WAY FOUNDATION INC 1101 14TH ST NW STE 1250 WASHINGTON, DC 20005 | 52-1629221 | 501(C)3 | 25,000 | | | | CONTRIB-GENERAL | | | |

| -orm 990,Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| DEMOCRATIC ATTORNEYS GENERAL ASSOCIATION 1580 LINCOLN STE 1125 DENVER,CO 80203 | 13-4220019 | 527 | 25,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NEW JERSEY GOP 150 W STATE ST STE 230 TRENTON,NJ 08608 | 22-6199182 | 527 | 25,000 | | | | CONTRIB- POLITICAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | cash | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| REPUBLICAN ASSEMBLY CAMPAIGN COMMITTEE 315 STATE STREET 4TH FLR ALBANY,NY 12210 | 14-1713936 | 527 | 26,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LUPUS FOUNDATION OF MID AND NORTHERN PO BOX 139 UTICA,NY 13503 | 16-1083229 | 501(C)3 | 27,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CHILDRENS CHARITIES FOUNDATION INC 3000 K ST NW STE 600 WASHINGTON,DC 20007 | 52-1907059 | 501(C)3 | 28,000 | | | | CONTRIB-EVENT & GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL QUALITY FORUM 601 13TH ST NW 500 NORTH WASHINGTON,DC 20005 | 52-2175544 | 501(C)3 | 28,350 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LEUKEMIA LYMPHOMA SOCIETY 107 WEST PARK BLVD STE 150 COLUMBIA,SC 29210 | 13-5644916 | 501(C)3 | 28,778 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| JUVENILE DIABETES RESEARCH FOUNDATION IN 120 WALL STREET 19TH FLOOR NEW YORK, NY 10005 | 23-1907729 | 501(C)3 | 29,300 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| AMERICAN AUTOIMMUNE RELATED 22100 GRATIOT AVENUE DETROIT,MI 48021 | 38-3027574 | 501(C)3 | 30,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ASSOCIATION OF AMERICAN UNIVERSITIES 1200 NEW YORK AVE NW STE 550 WASHINGTON,DC 20005 | 52-1947112 | 501(C)3 | 30,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CALIFORNIA ISSUES FORUM PO BOX 191318 SACRAMENTO,CA 95819 | 01-0595129 | 501(C)4 | 30,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| DEPARTMENT OF THE ENVIRONMENT CITY & 11 GROVE STREET SAN FRANCISCO,CA 94102 | 94-6000417 | GOVT AGENCY | 30,000 | | | | CONTRIB-GENERAL | | | |

| -orm 990,Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| REPUBLICAN PARTY OF FLORIDA 420 E JEFFERSON STREET TALLAHASSEE,FL 32301 | 59-0683241 | 527 | 30,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LUCY WEBB HAYES NATIONAL TRAINING SCHOOL 5255 LOUGHBORO ROAD NW WASHINGTON, DC 20016 | 53-0196602 | CORPORATION | 30,500 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN OSTEOPATHIC FOUNDATION 142 E ONTARIO ST STE 1450 CHICAGO,IL 60611 | 36-6056120 | 501(C)3 | 33,500 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD SUITE 200 BETHESDA,MD 20814 | 13-1930701 | 501(C)3 | 35,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN ACADEMY OF FAMILY 11400 TOMAHAWK CREEK PARKWAY STE 440 LEAWOOD,KS 66211 | 44-6013671 | 501(C)3 | 35,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CALIFORNIA STATE CONFERENCE OF THE NAACP 1215 K ST STE 1609 SACRAMENTO,CA 95814 | 95-4617376 | 501(C)3 | 35,000 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CIVIL JUSTICE ASSOCIATION OF CALIFORNIA 1201 K STREET SUITE 1960 SACRAMENTO,CA 95814 | 94-2565764 | 501(C)4 | 35,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CT PAIN FOUNDATION INC PO BOX 2182 SHELTON,CT 06484 | 26-2703521 | 501(C)3 | 35,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL CONFERENCE OF STATE LEGISLATURE 7700 EAST FIRST PLACE DENVER,CO 80230 | 74-2232576 | 501(C)3 | 37,500 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| DEMOCRATIC ASSEMBLY CAMPAIGN COMMITTEE H 107 WASHINGTON AVE STE 1 LL ALBANY,NY 12210 | 13-3041656 | 527 | 37,500 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PQA INC 6213 OLD KEENE MILL COURT SPRINGFIELD,VA 22152 | 26-2968498 | 501(C)3 | 39,500 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| STATE LEGISLATIVE LEADERS FOUNDATION 1645 FALMOUTH RD BUILDING D CENTERVILLE, MA 026322932 | 23-7148478 | 501(C)3 | 40,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| UTAH FAMILIES FOUNDATION 9160 SOUTH 300 WEST 21 SANDY,UT 84070 | 87-0509416 | 501(C)3 | 40,000 | | | | CONTRIB-EVENT & GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AIDS INSTITUTE INC 17 DAVIS BLVD STE 403 TAMPA,FL 33606 | 65-0380952 | 501(C)3 | 40,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN MEDICAL ASSOCIATION FOUNDATION 330 NORTH WABASH AVE STE 39300 CHICAGO,IL 606115885 | 36-6080517 | 501(C)3 | 40,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| ETHICS AND PUBLIC POLICY CENTER 1730 M STREET NW SUITE 910 WASHINGTON, DC 20036 | 52-1162185 | 501(C)3 | 40,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| SENATE DEMOCRATIC CAMPAIGN COMMITTEE 15 MAIDEN LANE STE 608 NEWYORK,NY 10038 | 11-2924245 | 527 | 40,000 | | | | CONTRIB- POLITICAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| US ALGERIA BUSINESS COUNCIL 2001 JEFFERSON DAVIS HIGHWAY SUITE 208 ARLINGTON,VA 22202 | 75-3078512 | 501(C)6 | 42,300 | | | | CONTRIB-GENERAL | | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| ASSOCIATION OF BLACK CARDIOLOGIST INC 2400 N STREET SUITE 249 WASHINGTON, DC 20037 | 95-3959283 | 501(C)3 | 42,500 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL BLACK CAUCUS OF STATE LEGISLATO 444 NORTH CAPITOL STREET NW STE 622 622 WASHINGTON, DC 20001 | 52-1218832 | 501(C)3 | 45,000 | | | | CONTRIB-EVENT & GENERAL | | |

| Form 990,Schedule I, Pa | 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| HEARTLAND INSTITUTE ONE SOUTH WACKER DRIVE STE 2740 CHICAGO,IL 60606 | 36-3309812 | CORPORATION | 45,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| WOODROW WILSON INTL CENTER FOR SCHOLARS ONE WOODROW WILSON PLAZA 1300 PENNSYLVANIA AVE NW WASHINGTON, DC 20004 | 52-1067541 | 501(C)3 | 46,910 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SENATE PRESIDENTS FORUM 66 WITHERSPOON STREET STE 226 PRINCETON,NJ 08540 | 22-3284046 | 501(C)3 | 47,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| BUSINESS INSTITUTE FOR POLITICAL ANALYSIS 888 16TH STREET NW SUITE 305 WASHINGTON, DC 20006 | 13-1985476 | CORPORATION | 50,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CONSORTIUM OF CATHOLIC ACADEMIES 145 TAYLOR STREET NE WASHINGTON,DC 20017 | 52-2050972 | 501(C)3 | 50,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| PHARMACEUTICAL INDUSTRY LABOR MANAGEMENT 1029 NORTH ROYAL STREET STE 350 ALEXANDRIA,VA 22314 | 48-1985339 | 501(C)6 | 50,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| SUSAN G KOMEN PO BOX 650309 DALLAS,TX 752650309 | 75-1835298 | 501(C)3 | 50,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| UNIVERSITY OF TEXAS 1515 HOLCOMBE BOULEVARD HOUSTON,TX 770304006 | 74-6001118 | GOVT AGENCY | 50,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| US CHAMBER OF COMMERCE 1615 H ST NW WASHINGTON,DC 20062 | 53-0045720 | 501(C)6 | 50,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| AMERICAN COMMITMENT 1300 PENNSYLVANIA AVE NW SUITE 190 406 WASHINGTON, DC 20004 | 45-2600535 | 501(C)4 | 50,000 | | | | CONTRIB-GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN MEDICINE CHEST CHALLENGE 155 MILLBURN AVE MILLBURN,NJ 07041 | 27-2484883 | 501(C)3 | 50,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| AMERICANS FOR TAX REFORM 722 12TH ST NW 4TH FLR WASHINGTON,DC 20005 | 52-1403587 | 501(C)4 | 50,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| CHILDRENS INN AT NIH INC 7 WEST DRIVE BETHESDA,MD 20814 | 52-1638207 | 501(C)3 | 50,000 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FRANKLIN CENTER FOR GLOBAL POLICY 1155 15TH ST NW SUITE 550 WASHINGTON, DC 20005 | 52-1159816 | 501(C)3 | 50,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| GALEN INSTITUTE INC PO BOX 320010 ALEXANDRIA,VA 22320 | 54-1770524 | 501(C)3 | 50,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| GALIEN FOUNDATION INC 60 BROAD ST STE 3502 NEW YORK, NY 10004 | 26-4549935 | 501(C)3 | 50,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| GAY & LESBIAN LEADERSHIP INSTITUTE 1133 15TH ST NW STE 350 WASHINGTON,DC 20005 | 52-1835268 | 501(C)3 | 50,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| JEFFERSON AWARDS FOR PUBLIC SERVICE 100 W 10TH ST STE 215 WILMINGTON, DE 19801 | 52-0959336 | 501(C)3 | 50,000 | | | | CONTRIB-GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NEW YORK STATE DEMOCRATIC COMMITTEE 461 PARK AVE SOUTH 9TH FLR NEW YORK, NY 10016 | | 527 | 50,000 | | | | CONTRIB- POLITICAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| COUNCIL OF STATE GOVERNMENTS 701 EAST 22ND ST STE 110 LOMBARD,IL 60148 | 36-6000818 | 501(C)3 | 51,000 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| HEALTH AFFAIRS PO BOX 148 CONGERS,NY 109200148 | 53-0242962 | 501(C)3 | 53,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| PACIFIC RESEARCH INSTITUTE 1 EMBARCADERO CENTER STE 350 SAN FRANCISCO,CA 94111 | 94-2528433 | 501(C)3 | 55,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| AMERICAN CANCER SOCIETY 901 E ST NW STE 500 WASHINGTON,DC 20004 | 52-2340031 | 501(C)4 | 57,500 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| INNOVATION STATE 1201 K STREET SUITE 750 SACRAMENTO,CA 95814 | 20-5995238 | CORPORATION | 60,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| US RUSSIA HEALTHCARE FOUNDATION 2900 SOUTH QUINCY STREET STE 150 ARLINGTON,VA 22206 | 45-3985955 | 501(C)3 | 60,000 | | | | CONTRIB-GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| AMYOTROPHIC LATERAL SCLEROSIS 27001 AGOURA RD STE 250 CALABASAS HILLS,CA 91301 | 13-3271855 | 501(C)3 | 60,150 | | | | CONTRIB-EVENT & GENERAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| BUSINESS COUNCIL FOR INTERNATIONAL 1212 AVENUE OF THE AMERICAS 10TH FLR NEW YORK, NY 10036 | 13-6161195 | 501(C)3 | 60,500 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| BIOTECHNOLOGY INDUSTRY ORGANIZATION 1201 MARYLAND AVE SW SUITE 900 WASHINGTON, DC 20024 | 52-1224577 | 501(C)6 | 65,000 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| GOPAC 1101 16TH ST NW STE 201 WASHINGTON,DC 20036 | 52-1237780 | 527 | 70,825 | | | | CONTRIB- POLITICAL | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| BRIGHAM AND WOMENS HOSPITAL INC 75 FRANCIS STREET BOSTON,MA 02115 | 04-2312909 | CORPORATION | 75,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| CENTER FOR MEDICINE IN THE PUBLIC 757 THIRD AVE 20TH FLOOR NEW YORK, NY 10017 | 20-4321812 | 501(C)3 | 75,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL ASSOCIATION OF NUTRITION AND 1612 K ST STE 400 WASHINGTON,DC 20006 | 04-2639088 | 501(C)3 | 75,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| CALIFORNIA HEALTHCARE INSTITUTE 1020 PROSPECT STREET 310 LAJOLLA,CA 92037 | 94-3174767 | 501(C)4 | 79,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| NATIONAL ALLIANCE ON MENTAL ILLNESS 3803 NORTH FAIRFAX DRIVE 100 ARLINGTON,VA 22203 | 43-1201653 | 501(C)3 | 80,000 | | | | CONTRIB-EVENT & GENERAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FRIENDS OF CANCER RESEARCH 2231 CRYSTAL DRIVE STE 200 ARLINGTON,VA 22202 | 52-1983273 | 501(C)3 | 81,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| SENATE REPUBLICAN CAMPAIGN COMMITTEE HO 99 WASHINGTON AVENUE STE 702 ALBANY,NY 12210 | 14-1753654 | 527 | 82,750 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| ALLIANCE FOR PATIENT ACCESS PO BOX 670 BETTENDORF,IA 52722 | 20-5130312 | 501(C)4 | 85,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| WOMEN IN GOVERNMENT LTD 1319 F ST NW STE 710 WASHINGTON,DC 20004 | 54-1527192 | 501(C)3 | 90,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PHRMA PAC CO JOHN EICHMAN 1127 11TH ST SUITE 300 SACRAMENTO,CA 95814 | 20-4447742 | 527 | 90,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| INFORMATION TECHNOLOGY & INNOVATION 1101 K ST NW STE 610 WASHINGTON,DC 20005 | 20-4403497 | 501(C)3 | 100,000 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| GERMAN MARSHALL FUND OF THE 1744 R STREET NW WASHINGTON, DC 20009 | 52-0954751 | 501(C)3 | 100,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| MANHATTAN INSTITUTE FOR POLICY RESEARCH 52 VANDERBILT AVENUE NEWYORK,NY 10017 | 13-2912529 | 501(C)3 | 100,000 | | | | CONTRIB-GENERAL | | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| DEMOCRATIC LEGISLATIVE CAMPAIGN COMMITTE 1401 K STREET NW STE 201 WASHINGTON, DC 20005 | 52-1870839 | 527 | 100,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| LUPUS FOUNDATION OF AMERICA 2000 L ST NW STE 415 WASHINGTON,DC 20036 | 23-7448063 | 501(C)3 | 106,500 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PHRMA COLORADO ACTION FUND 1740 BROADWAY DENVER,CO 80274 | 20-5123531 | 527 | 110,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| INSTITUTE FOR POLICY INNOVATION 1660 S STEMMONS FREEWAY STE 245 LEWISVILLE,TX 75067 | 75-2158093 | 501(C)3 | 117,000 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| INTEGRATED BENEFITS INSTITUTE 595 MARKET ST STE 810 SAN FRANCISCO,CA 94105 | 94-3228284 | 501(C)6 | 150,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| REPUBLICAN STATE LEADERSHIP COMMITTEE 1201 F ST NW STE 675 WASHINGTON,DC 20004 | 05-0532524 | 527 | 150,570 | | | | CONTRIB- POLITICAL | | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| CENTER FOR STRATEGIC & INTERNATIONAL 1616 RHODE ISLAND AVE NW WASHINGTON, DC 20036 | 52-1501082 | 501(C)3 | 173,245 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PARTNERSHIP FOR A DRUG FREE AMERICA 352 PARK AVE SOUTH 9TH FL NEW YORK,NY 10010 | | 501(C)3 | 175,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN ACADEMY OF PEDIATRICS 141 NORTHWEST POINT BOULEVARD ELK GROVE VILLAGE,IL 60007 | 36-2275597 | 501(C)3 | 180,000 | | | | CONTRIB-GENERAL | | | |

| Form 990, Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| TUFTS CENTER FOR THE STUDY OF 192 SOUTH STREET STE 550 BOSTON,MA 02111 | 04-2103634 | 501(C)3 | 195,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| NATIONAL ACADEMY OF SCIENCES 2101 CONSTITUTION AVE NW WASHINGTON, DC 20418 | 53-0196932 | 501(C)3 | 200,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| AMERICAN LEGISLATIVE EXCHANGE COUNCIL 1101 VERMONT AVE NW 11TH FLR WASHINGTON,DC 20005 | 52-0140979 | 501(C)3 | 201,600 | | | | CONTRIB-EVENT & GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NEW ENGLAND HEALTHCARE INSTITUTE ONE BROADWAY 15TH FL CAMBRIDGE, MA 02142 | 01-0624865 | 501(C)3 | 202,375 | | | | CONTRIB-GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PERSONALIZED MEDICINE COALITION 1710 RHODE ISLAND AVE NW STE 700 WASHINGTON, DC 20036 | 54-2134884 | 501(C)4 | 210,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| NATIONAL CONSUMERS LEAGUE INC 1701 K ST NW SUITE 1200 WASHINGTON,DC 20006 | 53-0242038 | 501(C)3 | 235,300 | | | | CONTRIB-GENERAL | | |

| Form 990,Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| REPUBLICAN GOVERNORS ASSOCIATION 1747 PENNSYLVANIA AVE NW SUITE 250 WASHINGTON, DC 20006 | 11-3655877 | 527 | 255,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| GENETIC ALLIANCE 4301 CONNECTICUT AVE NW SUITE 404 WASHINGTON,DC 20008 | 52-1571905 | 501(C)3 | 270,000 | | | | CONTRIB-GENERAL | | |

| Form 990, Schedule 1, Part 11, 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| DEMOCRATIC GOVERNORS ASSN 1401 K STREET NW STE 200 WASHINGTON, DC 20005 | 52-1304889 | 527 | 275,000 | | | | CONTRIB- POLITICAL | | | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| FOUNDATION FOR THE NATIONAL 9650 ROCKVILLE PIKE BETHESDA,MD 20814 | 52-1986675 | 501(C)3 | 300,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| REAGAN UDALL FOUNDATION FOR THE FDA 1025 CONNETICUT AVE NW SUITE 1000 WASHINGTON, DC 20036 | 26-3727917 | 501(C)3 | 400,000 | | | | CONTRIB-GENERAL | | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| NATIONAL HEALTH COUNCIL 1730 M STREET NW STE 500 WASHINGTON, DC 200364561 | 13-1624107 | 501(C)3 | 461,460 | | | | CONTRIB-GENERAL | | | | |

| Form 990,Schedule 1, Pal | Form 990,Schedule 1, Part 11, 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| PHRMA INDEPENDENT EXPENDITURE COMMITTEE 1127 11TH ST SUITE 300 SACRAMENTO,CA 95814 | 90-0239652 | 527 | 489,999 | | | | CONTRIB- POLITICAL | | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | |
| MICHIGAN REPUBLICAN PARTY ADMINISTRATIVE ACCOUNT 520 SEYMOUR ST LANSING,MI 48933 | 38-1221182 | 527 | 500,000 | | | | CONTRIB- POLITICAL | |

| 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | |
| PRESIDENT AND FELLOWS OF HARVARD COLLEGE 1033 MASSACHUSETTS AVE 2ND FLR CAMBRIDGE,MA 02138 | 04-2103580 | 501(C)3 | 515,432 | | | | CONTRIB-GENERAL | |

| 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) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| NATIONAL MINORITY QUALITY FORUM INC 1200 NEW HAMPSHIRE AVENUE NW SUITE 575 WASHINGTON, DC 20036 | 31-1750942 | 501(C)3 | 629,000 | | | | CONTRIB-EVENT & GENERAL |

| <u>Form 990,Schedule I, Pa</u> | 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) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | |
| PHRMA FOUNDATION 950 F STREET NW STE 300 WASHINGTON, DC 20036 | 52-6063009 | 501(C)3 | 660,000 | | | | CONTRIB-GENERAL | | |

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

DLN: 93493317063124

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

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

Open to Public Inspection

Name of the organization PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA **Employer identification number**

53-0241211

| Pa | rt I Questions Regarding Compensati | on | | | | |
|----|---|--|--|----|-----|----|
| | | | | | Yes | No |
| 1a | Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I | | ny of the following to or for a person listed in Form vide any relevant information regarding these items | | | |
| | First-class or charter travel | 굣 | Housing allowance or residence for personal use | | | |
| | ▼ Travel for companions | Г | Payments for business use of personal residence | | | |
| | ▼ Tax idemnification and gross-up payments | <u>~</u> | Health or social club dues or initiation fees | | | |
| | Discretionary spending account | Γ | Personal services (e g , maid, chauffeur, chef) | | | |
| b | If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses | | | 1b | Yes | |
| 2 | Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Ex | | | 2 | Yes | |
| 3 | Indicate which, if any, of the following the filing orgonization's CEO/Executive Director Check all used by a related organization to establish compe | that apply | | | | |
| | Compensation committee | ᅜ | Written employment contract | | | |
| | ✓ Independent compensation consultant | <u> - - - - - </u> | Compensation survey or study | | | |
| | Form 990 of other organizations | <u>~</u> | Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed in Form 990 or a related organization |), Part VII | I, Section A, line 1a with respect to the filing organization | | | |
| а | Receive a severance payment or change-of-control | ol paymen | nt? | 4a | | Νo |
| b | Participate in, or receive payment from, a supplem | nental non | iqualified retirement plan? | 4b | Yes | |
| c | | | | 4c | Yes | |
| | If "Yes" to any of lines 4a-c, list the persons and | | | | | |
| | Only 501(c)(3) and 501(c)(4) organizations only r | must comp | plete lines 5-9. | | | |
| 5 | For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of | A, line 1a | , did the organization pay or accrue any | | | |
| а | The organization? | | | 5a | | |
| b | Any related organization? | | | 5b | | |
| | If "Yes," to line 5a or 5b, describe in Part III | | | | | |
| 6 | For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of | A , line 1a | , did the organization pay or accrue any | | | |
| а | The organization? | | | 6a | | |
| b | Any related organization? | | | 6b | | |
| | If "Yes," to line 6a or 6b, describe in Part III | | | | | |
| 7 | For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes," | | | 7 | | |
| 8 | Were any amounts reported in Form 990, Part VII subject to the initial contract exception described in Part III | | accured pursuant to a contract that was ations section 53 4958-4(a)(3)? If "Yes," describe | 8 | | |
| 9 | If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)? | the rebutta | able presumption procedure described in Regulations | 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 o | f W-2 and/or 1099-MI | SC compensation | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(ı)-(D) | (F) Compensation | |
|---------------------------|--------------------------|---|---|--|---------------------------------|---------------------------------------|---|--|
| | (i) Base compensation | (ii) Bonus & ıncentıve compensatıon | (iii) Other reportable compensation | | | | reported as deferred in prior Form 990 | |
| See Addıtıonal Data Table | | | | | | | | |

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Also complete this part for any additional information

| Also complete this part for any additional information | | | | | | | |
|--|---|--|--|--|--|--|--|
| Return Reference | Explanation | | | | | | |
| PART I, LINE 1A | FIRST CLASS TRAVEL THE PRESIDENT AND EVP FOR ADVOCACY ARE AUTHORIZED TO TRAVEL USING FIRST CLASS TRAVEL FOR COMPANIONS COMPANIONS OCCASIONALLY TRAVEL WITH PHRMA EXECUTIVES ON BUSINESS TRAVEL IN SUCH CASES, COMPANION TRAVEL IS INCLUDED IN THE TAXABLE INCOME OF THE PHRMA EXECUTIVE TAX INDEMNIFICATION AND GROSS UP PAYMENTS THE JAPAN REPRESENTATIVE, AN EXPATRIATE RESIDING IN TOKYO, JAPAN AND ONE OF PHRMA'S TOP 5 COMPENSATED EMPLOYEES, IS TAX-EQUALIZED GROSS-UP PAYMENTS MAY BE PROCESSED FOR PHRMA EXECUTIVES WHEN A FRINGE BENEFIT IS CONSIDERED TAXABLE INCOME AND THERE IS A BUSINESS REQUIREMENT GIVING RISE TO THE TAXABLE FRINGE BENEFIT HOUSING ALLOWANCE THE APARTMENT LEASE FOR THE JAPAN REPRESENTATIVE WHO RESIDES IN TOKYO, JAPAN, IS PAID FOR BY PHRMA THE VALUE OF THE APARTMENT LEASE IS INCLUDED IN THE INCOME OF THE JAPAN REPRESENTATIVE AND TAX EQUALIZED HEALTH OR SOCIAL CLUB DUES ALL PHRMA EMPLOYEES ARE ELIGIBLE TO PARTICIPATE IN A PHRMA SPONSORED FITNESS CLUB MEMBERSHIP OR MAY RECEIVE A REIMBURSEMENT UP TO A CERTAIN VALUE ANNUALLY FOR A FITNESS CLUB MEMBERSHIP OF THEIR CHOOSING THE VALUE OF THIS BENEFIT IS CONSIDERED TAXABLE INCOME TO THE EMPLOYEE THE JAPAN REPRESENTATIVE BELONGS TO THE TOKYO AMERICAN CLUB THIS CLUB MEMBERSHIP IS PAID FOR BY PHRMA, INCLUDED IN THE INCOME OF THE JAPAN REPRESENTATIVE AND TAX EQUALIZED | | | | | | |
| PART I, LINES 4B-C | PHRMA SPONSORS A NON-QUALIFIED SECTION 457(F) DEFERRED COMPENSATION PLAN AMOUNTS PAID OUT UNDER THIS PLAN ARE INCLUDED IN PART VII (WHEN PAID) AND SCHEDULE J, RESPECTIVELY (WHEN PAID, EARNED AND REPORTED IN A PRIOR YEAR) NAME 457F (PRIOR YEAR LTIP & DEF COMP AWARDED IN 2013 BUT NOT PAID UNTIL FUTURE YEARS) JEFF BOND \$44,887,\$62,198 JOHN CASTELLANI \$796,670,\$441,525 WILLIAM CHIN \$0,\$2,500 CHESTER DAVIS \$58,553,\$84,385 ROSZELL HUNTER \$10,896,\$59,313 JOSEPHINE MARTIN \$16,998,\$53,200 LORI REILLY \$23,805,\$38,117 RICHARD SMITH \$55,270,\$0 JAMES SPEARS \$0,\$81,250 ARDELL PERSINGER \$58,051,\$0 DAVID WHEADON \$53,389,\$242 JANE FAIKS \$32,285,\$192 ROBERT FILIPPONE \$36,920,\$2,500 ANN KAPLAN \$126,399,\$2,500 JAY TAYLOR \$24,471,\$39,392 | | | | | | |

Schedule J (Form 990) 2013

Software ID: Software Version:

EIN: 53-0241211

Name: PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA

| Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees | | | | | | | | |
|---|-------------|--------------------------|---|-----------------------------|---------------|----------------|----------------------|--|
| (A) Name | | (B) Breakdown o | of W-2 and/or 1099-MI | SC compensation | (C) Deferred | (D) Nontaxable | (E) Total of columns | (F) Compensation |
| | | (i) Base Compensation | (ii) Bonus & incentive compensation | (iii) Other compensation | compensation | benefits | (B)(ı)-(D) | reported in prior Form 990 or Form 990-EZ |
| JOHN CASTELLANI PRESIDENT & CEO | (I) (II) | | 1,532,845 | 9,258 0 | 527,919 0 | 21,043 0 | 3,604,667 | 796,970 0 |
| ARDELL PERSINGER CFO, EVP | (ı) (ıı) | · I | 158,673 | 7,824 | 217,461 0 | 19,942 0 | 805,317 | 58,051 0 |
| JAMES SPEARS EVP | (ı) (ıı) | | 157,500 | 4,174 | 162,947 0 | 21,264 0 | 883,635 | 0 |
| JEFF BOND SENIOR VP | (ı) (ıı) | · | 141,896 | 3,945 | 169,976 0 | 23,403 | 718,710 | 44,887 0 |
| WILLIAM CHIN EVP | (ı) (ıı) | 'I ' I | 200,000 | 297,914 | 33,909 0 | 20,714 0 | 852,359 | 0 |
| CHESTER DAVIS EVP | (ı) (ıı) | | 222,322 | 2 21,950 | 136,577 0 | 24,623 | 960,204 | 58,553 0 |
| ROSZELL HUNTER SENIOR VP | (ı) (ıı) | | 94,221 | 1,762 | 129,036 | 27,123 0 | 633,881 | 10,896 0 |
| JOSEPHINE MARTIN EVP | (ı) (ıı) | | 110,597 | 7 2,684 0 0 | 139,418 0 | 25,226 0 | 677,917 | 16,998 0 |
| LORI REILLY EVP | (ı) (ıı) | ' | 112,844 | 4,357 | 98,903 0 | 25,347 0 | 578,809 | 23,805 0 |
| RICHARD SMITH EVP | (ı) (ıı) | | 1,524,492 | 2,564 | 55,714 0 | 12,683 | 2,009,988 | 55,270 0 |
| DAVID WHEADON SENIOR VP | (ı) (ıı) | | 182,930 | 876,870 | 48,108 0 | 3,266 0 | 1,152,745 | 53,389 0 |
| JAN FAIKS VICE PRESIDENT | (ı) (ıı) | | 1,228,488 | 1,083 | 13,156 0 | 843 0 | 1,282,505 | 32,285 0 |
| ROBERT FILIPPONE VICE PRESIDENT | (I) (II) | | 167,465 0 | 920 | 67,580 0 | 18,842 0 | 595,050 | 36,920 0 |
| ANN KAPLAN VICE PRESIDENT | (ı) (ıı) | | 553,842 | 184,527 | -267,273 0 | 9,829 | 626,688 | 324,102 0 |
| IRA WOLF JAPAN REPRESENTATIVE | (I) (II) | | 11,864 | 84,532 | 110,404 0 | 2,520 0 | 886,231 0 | 0 |
| JAY TAYLOR VICE PRESIDENT | (I) (II) | | 125,587 | 7 3,252 0 0 | | 26,858 0 | 579,540 0 | 24,471 0 |

DLN: 93493317063124

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Open to Public Inspection

| Name of the o | rganization AL RESEARCH & MA | ANUFACTURERS OF AM | ERICA | | | | | | | fication | number | • |
|----------------------|---------------------------------|---|-----------|----------------|---------------------|----------------------|---------------|------------------|----------------------------|----------|-------------------|--------|
| Part I Exc | acc Bonofit | Transactions | /coction | 2 E01/2\/2\ | and costion | E01/a\/4\ a= | | -024 | | | | |
| | | Transactions anization answered | | | | | | | | | 10b | |
| | ne of disqualifie | | | nıp between di | | (c) Descri | | | | | (d) Corre | ected? |
| - ` ` | • | | | and organizat | | . , | • | | | | Yes | No |
| | | | | | | | | | | | • | |
| | | | | | | | | | | | | |
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| | | | | | | | | | | | | |
| 2 5-1 | | | | | | | | | - k | | | |
| 2 Enterthe 4958 . | amount of tax i | incurred by organiz | zation ma | anagers or dis | squalified pers | ons during the | year u | ınder: | section \$\blue{F} \$\$ | | | |
| | amount of tax. | if any, on line 2, a | bove, rei | mbursed by t | he organizatio | n | | | | | | |
| | | | - | | | | | | , , | | | _ |
| | | or From Inte | | | | | | | | 2.5 | | |
| | | rganization answe orted an amount on | | | | line 38a, or Fo | orm 99 | O, Par | t IV, lin | ie 26, o | rifthe | |
| (a) Name of | (b) | (c) Purpose of | (d) Lo | | (e) O rigina | I (f) Balance | (g) In | g) In (h) | | | (i)Written | |
| interested | Relationship | loan | or fro | m the | principal | due | | | | Approved | | nent? |
| person | with organization | | organiz | ation? | amount | | | | by board | | | |
| | organization | | | | | | | | or | | | |
| | | | | | _ | | | | commi | ittee? | | |
| | | | То | From | 110.3 | 07 | Yes | No | Yes | No | Yes | No |
| (1) IRA WOLF | | 2011 TEQ | | X | 200,0 | | 7 | No | | No No | Yes | - |
| (2) WILLIAM CHIN | | DOWNPAYMENT | | X | 200,0 | 200,000 | | No | | No | Yes | |
| | | DC AREA | | | | | | | | | | |
| | | | | | | | | | | | _ | |
| | | | | | | | | | | | _ | |
| | | | | | | | | | | | _ | |
| | | <u> </u> | | | | | | | 1 | | 7 | |
| Total Part III Gr | ants or Ass | ► \$ istance Benefi | ittina T | ntaractad | Porcons | 200,000 | ס | | | | | |
| Co | omplete if the | organization an | swered | "Yes" on Fo | orm 990. Pai | rt IV. line 27 | _ | | | | | |
| (a) Name of | | (b) Relationship be | | | of assistance | 1 | | tance | (e) | Purpos | e of assi | stance |
| pers | on I | nterested person a | | | | | | | | | | |
| | | organization | | | | | | | | | | |
| | | | | | | | | | | | | |
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| Part IV Business Transactions I Complete if the organizatio | | | e 28a, 28b, or 28c. | | |
|---|--|-------------------------------|--------------------------------|---------------------------------------|----|
| (a) Name of Interested person | (b) Relationship between interested person and the organization | (c) A mount of transaction | (d) Description of transaction | (e) Sharing of organization revenues? | |
| | | | | Yes | No |
| (1) TIBER CREEK HEALTH STRATEGIES LLC | FORMER KEY EMPLOYEE JAMES BRYANT HALL IS A PRINCIPAL OF THIS COMPANY | 240,000 | CONSULTING SERVICES | | No |
| (2) METHENY PUBLIC AFFAIRS | FORMER KEY EMPLOYEE WES METHENY IS A PRINCIPAL OF THIS COMPANY | 240,000 | CONSULTING SERVICES | | No |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part V Supplemental Information

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

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2013

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As Filed Data -

DLN: 93493317063124

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

2013
Open to Public Inspection

| Name of the organization | Employer identification number |
|--|--------------------------------|
| PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA | |
| | 53-0241211 |

| Return Reference | Explanation |
|---|--|
| FORM 990, PART VI, SECTION A, LINE 4 | PHRMA AMENDED ITS BY-LAWS (EFFECTIVE JANUARY 1, 2013) TO (1) CLARIFY THE RESPECTIVE VOTING RIGHTS OF THE VOTING MEMBERS, THE RESEARCH ASSOCIATES, AND THE DIRECTORS, (2) DEFINE REQUIREMENTS FOR VOTING MEMBER MEETINGS AND MEETINGS OF THE DIRECTORS, AND (3) SUPPORT EFFECTIVE GOVERNANCE AND OPERATIONS THE AMENDMENTS WERE ADOPTED BY BOTH THE DIRECTORS AND THE MEMBERS IN ACCORDANCE WITH REQUIRED PROCEDURES THE BY-LAWS AMENDMENTS INCLUDED CHANGES TO PROVISIONS RELATING TO CLASSES OF MEMBERSHIP, MEMBERS' MEETINGS, MEMBERSHIP DUES AND ASSESSMENTS, DIRECTORS, OFFICERS, COMMITTEES, SECTIONS, AND AMENDMENTS TO ENSURE ALIGNMENT BETWEEN THE BY-LAWS AND PHRMA'S CERTIFICATE OF INCORPORATION, CONFORMING AMENDMENTS TO THE CERTIFICATE OF INCORPORATION WERE ALSO ADOPTED BY THE DIRECTORS AND THE MEMBERS IN ACCORDANCE WITH REQUIRED PROCEDURES THESE AMENDMENTS ALSO WENT INTO EFFECT ON JANUARY 1, 2013 PHRMA CHANGED ITS NAME FROM PHARMACEUTICAL RESEARCH AND MANUFACTURERS OF AMERICA, INC TO PHARMACEUTICAL RESEARCH AND MANUFACTURERS OF AMERICA, INC TO |

| Return Reference | Explanation |
|---|--|
| FORM 990, PART VI, SECTION A, LINE 6 | A CORPORATION, SUBSIDIARY OR DIVISION OF A COMPANY WITH OPERATIONS IN THE UNITED STATES THAT IS PREDOMINANTLY ENGAGED IN THE RESEARCH, MANUFACTURING AND MARKETING OF INNOVATIVE FINISHED DOSAGE PRESCRIPTION PHARMACEUTICAL OR BIOLOGICAL MEDICINES MAY QUALIFY FOR PHRMA MEMBERSHIP PHRMA HAS TWO CLASSES OF MEMBERSHIP MEMBERS AND RESEARCH ASSOCIATES MEMBERS ARE VOTING MEMBERS OF THE ASSOCIATION RESEARCH ASSOCIATES ARE NON-VOTING MEMBERS MEMBERS AND RESEARCH ASSOCIATES ARE REPRESENTED ON THE BOARD OF DIRECTORS |

| Return Reference | Explanation |
|--------------------|--|
| FORM 990, PART VI, | PHRMA'S BOARD OF DIRECTORS IS ELECTED BY ITS REGULAR MEMBERS AT EACH REGULAR ANNUAL MEETING, |
| SECTION A, LINE 7A | UPON RECOMMENDATION OF THE NOMINATING COMMITTEE AND PRIOR APPROVAL THEREOF BY THE BOARD |

| Return Reference | Explanation |
|--|--|
| FORM 990, PART VI, SECTION A, LINE 7B | CERTAIN MATTERS, SUCH AS AMENDING THE BY-LAWS OF THE ASSOCIATION, OR THE LEVYING OF SPECIAL ASSESSMENTS, REQUIRE MEMBER APPROVAL |

| Return Reference | Explanation |
|---|---|
| FORM 990, PART VI, SECTION B, LINE 11 | PHRMA'S FORM 990 IS PREPARED BY ITS ACCOUNTING FIRM, AND IS REVIEWED INTERNALLY BY KEY FINANCIAL MANAGEMENT, THE CFO AND INTERNAL LEGAL COUNSEL A COPY OF THE FORM 990 IS PROVIDED TO THE FINANCE AND AUDIT COMMITTEE (A SUBCOMMITTEE OF THE BOARD OF DIRECTORS) PRIOR TO FILING THE BOARD OF DIRECTORS IS ADVISED THAT THE FORM 990 HAS BEEN FILED AND THAT IT IS AVAILABLE UPON REQUEST |

| Return Reference | Explanation |
|---|--|
| FORM 990, PART VI, SECTION B, LINE 12C | PHRMA'S CONFLICT OF INTEREST POLICY (POLICY) REQUIRES ALL EMPLOYEES TO PROMPTLY DISCLOSE ANY FACT OR CIRCUMSTANCE THAT MAY INVOLVE A CONFLICT OF INTEREST TO THE EMPLOYEES SUPERVISOR OR THE LEGAL DEPARTMENT BEFORE STARTING AN ACTIVITY OR ACQUIRING AN INTEREST WHICH MAY BE QUESTIONABLE. THE POLICY IDENTIFIES SPECIFIC SITUATIONS WHICH MUST BE DISCLOSED BECAUSE A CONFLICT OF INTEREST COULD EXIST EMPLOYEES ARE DIRECTED TO CONTACT PERSONNEL. IN THE LEGAL DEPARTMENT OR FINANCE AND OPERATIONS DEPARTMENT WITH ANY QUESTIONS ABOUT A POSSIBLE CONFLICT OF INTEREST OFFICERS AND KEY EMPLOYEES MUST COMPLETE AN ANNUAL CERTIFICATION THAT REQUIRES THEM TO CERTIFY THEIR DUTY TO COMPLY WITH THE POLICY AND TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST MEMBERS OF PHRMA'S BOARD OF DIRECTORS ARE SUBJECT TO THE CONFLICT OF INTEREST POLICY WITH RESPECT TO MEMBERS OF THE BOARD OF DIRECTORS (DIRECTORS POLICY). THE DIRECTORS POLICY REQUIRES MEMBERS OF THE BOARD OF DIRECTORS TO DISCLOSE THE EXISTENCE OR POSSIBLE EXISTENCE OF ANY CONFLICT OF INTEREST TO THE BOARD OF DIRECTORS AND MEMBERS OF COMMITTEES OF THE BOARD OF DIRECTORS CONSIDERING THE PROPOSED MATTER GIVING RISE, OR RELATING, TO SUCH EXISTING OR POSSIBLE CONFLICT OF INTEREST. THE REMAINING BOARD OF DIRECTORS OR COMMITTEE MEMBERS DETERMINE IF A CONFLICT OF INTEREST EXISTS WITH RESPECT TO THE DIRECTOR WHO MADE THE DISCLOSURE. IF A CONFLICT OF INTEREST IS FOUND TO EXIST, THE INTERESTED DIRECTOR IS BARRED FROM PARTICIPATING IN A MEETING OR ANY RELATED DELIBERATIONS DISCUSSING OR WITH RESPECT TO THE MATTER GIVING RISE TO THE CONFLICT OF INTEREST, RECEIVING ANY COMMUNICATIONS REGARDING SUCH MATTER, AND PARTICIPATING IN OR BEING PRESENT FOR A VOTE ON SUCH MATTER, EACH BOARD MEMBER MUST SIGN AN ANNUAL ACKNOWLEDGEMENT WITH RESPECT TO COMPLIANCE WITH THE DIRECTORS POLICY |
| | |

| PART VI, ORGANIZATION VALUES SENIOR LEADERSHIP, INCLUDING THE PRESIDENT/CEO, REVIEW THESE EVALUATIONS AND MAKE SECTION B, RECOMMENDATIONS FOR ANY COMPENSATION ADJUSTMENTS, INCLUDING MERIT INCREASES AND BONUS APPROPRIATE | Return Reference | Explanation |
|---|--|--|
| COMMITTEE CONSIDERS AND APPROVES THE CEO'S ANNUAL COMPENSATION ADJUSTMENT, ANNUAL BONUS, LONG-TERM INCENTIVE AWARD AND DEFERRED COMPENSATION AWARD, BASED ON PERF TO ANNUAL OBJECTIVES PHRMA ENGAGES AN INDEPENDENT CONSULTANT TO ADVISE ON EXECUTIVE COMPENSATION, INCLUDING THAT OF THE PRESIDENT/CEO | FORM 990, PART VI, SECTION B, LINE 15 | ORGANIZATION VALUES SENIOR LEADERSHIP, INCLUDING THE PRESIDENT/CEO, REVIEW THESE EVALUATIONS AND MAKE RECOMMENDATIONS FOR ANY COMPENSATION ADJUSTMENTS, INCLUDING MERIT INCREASES AND BONUS APPROPRIATE TO PERFORMANCE AND WITHIN AVAILABLE BUDGET THESE RECOMMENDATIONS ARE REVIEWED WITH AND APPROVED BY THE GOVERNANCE AND COMPENSATION COMMITTEE OF THE PHRMA BOARD HUMAN RESOURCES REVIEWS ALL SALARY ADJUSTMENTS TO ASSURE SALARIES REMAIN WITHIN A REASONABLE RANGE COMPARED TO MARKET BENCHMARKS THE GOVERNANCE & COMPENSATION COMMITTEE REVIEWS AND APPROVES MERIT INCREASE, ANNUAL BONUS AND LONGTERM INCENTIVE AWARDS PRESIDENT/CEO COMPENSATION IS ESTABLISHED BY PHRMA'S BOARD OF DIRECTORS, WITH RECOMMENDATION BY THE GOVERNANCE AND COMPENSATION COMMITTEE. THE GOVERNANCE AND COMPENSATION COMMITTEE CONSIDERS AND APPROVES THE CEO'S ANNUAL COMPENSATION ADJUSTMENT, ANNUAL BONUS, LONG-TERM INCENTIVE AWARD AND DEFERRED COMPENSATION AWARD, BASED ON PERF TO ANNUAL OBJECTIVES PHRMA ENGAGES |

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

| Return Reference | Explanation |
|--------------------------------|---|
| FORM 990, PART IX, LINE 11G | CONSULTANTS 40,205,364 PRODUCTION, WRITING, & EDITING 1,023,193 WEBSITE MAINTENANCE & DEV 1,569,283 RECRUITING 1,055,986 OTHER 275,268 TRANSLATION 212,982 TEMPORARY SERVICES 254,898 |

| Return Reference | | Explanation |
|------------------|------------|---|
| FORM 990, PART X | (I, LINE 9 | CHANGES IN PENSION AND POST RETIREMENT 30,097,258 |

| Return Reference | Explanation |
|-----------------------------|---|
| FORM 990, PART XII, LINE 2C | THE AUDIT OVERSIGHT PROCESS REMAINS UNCHANGED FROM THE PRIOR YEAR |

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 Attach to Form 990.
 See separate instructions.
 Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

2013

DLN: 93493317063124OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA

Employer identification number

| | | | | | 53-02412 | 11 | | | |
|--|--------------------------------|---|-----------------------|----------|---|-------------------|--|--------------------|----|
| Part I Identification of Disregarded Entities Con | mplete if the organization | n answered "Yes" or | n Form 990, P | Part IV, | lıne 33. | | | | |
| (a) Name, address, and EIN (If applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | End-of- | (e) year assets | D | (f) Direct controlling entity | | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| Part II Identification of Related Tax-Exempt Orgon more related tax-exempt organizations dur | ganizations Complete if | the organization ai | nswered "Yes | on For | rm 990, Pa | art IV, | line 34 because it | had or | ne |
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code se | ection (| (e) Public charity if section 501 | status (c)(3)) | (f) Direct controlling entity | Section (13) co | |
| (1) PHRMA PAC | POLITICAL | CA | | | | | | Yes Yes | No |
| 1127 11TH STREET SUITE 300 | POLITICAL | | | | | | | Tes | |
| SACRAMENTO, CA 95814 | | | | | | | | | |
| 20-4447742 (2) PHRMA INDEPENDENT EXPENDITURE COMMITTEE | POLITICAL | CA | | | | | | Yes | + |
| 1127 11TH STREET SUITE 300 | | | | | | | | | |
| SACRAMENTO, CA 95814 90-0239652 | | | | | | | | | |
| (3) PHRMA RI PAC | POLITICAL | RI | | | | | | Yes | 1 |
| 125 WASHINGTON STREET UNIT 1 | | | | | | | | | |
| FOXBORO, MA 02035 20-5127823 | | | | | | | | | |
| (4) PHRMA COLORADO ACTION FUND | POLITICAL | СО | | | | | | Yes | |
| 1740 BROADWAY | | | | | | | | | |
| DENVER, CO 80274 20-5123531 | | | | | | | | | |
| (5) PHRMA BETTER GOVERNMENT COMMITTEE | POLITICAL | DC | | | | | | Yes | |
| 950 F STREET NW | | | | | | | | | |
| WASHINGTON, DC 20004 52-1606127 | | | | | | | | | |
| (6) PHRMA TN PAC | POLITICAL | TN | | | | | | Yes | |
| 950 F STREET NW | | | | | | | | | |
| WASHINGTON, DC 20004 53-0241211 | | | | | | | | | |
| | | | | | | | | | |

| Part III | Identification of Related Org because it had one or more rela | | | | | | atıon ansv | vered "Ye | es" on | Form | 990, Part : | [V, lıı | ne 34 | ļ |
|----------|--|----------------------|--|---|----------------------------|---|---------------------------------|---|-----------------------------|-------------|---|-----------------------|-----------------|---------------------------------------|
| | (a) Name, address, and EIN of related organization | | (b) Primary activity | (c) Legal domicile (state or foreign country) | entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512- 514) | (f) Share of total income | (g) Share of end-of-yea assets | (h Disprop r allocat | rtionate | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | Gene mana parti | agıng :ner? | (k) Percentage ownership |
| | | | | | | , | | | Yes | No | | Yes | No | |
| | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | $\vdash \vdash$ | |
| Part IV | line 34 because it had one or mo | ore related organiza | ations treated as | | poration or (d) | trust during (e) | the tax ye | ar. | (g) | | (h) | (i | i) | IV, |
| N | ame, address, and EIN of related organization | Primary activity | Legal domicile (state or foreign country) | | Dırect controllı entity | ng Type of entit (C corp, S corp, or trust) | | e of | e of end- -year ssets | | ercentage wnership | (b)(contr ent | rolled tity? | |
| | | | | | | | | | | | | Yes | | No |
| | | | | | | | | | | | | | | |
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| Part V | Transactions With Related Organizations Complete if the organizations | tion answered "Yes" (| on Form 9 | 90, Part IV, line | 34, 35b, or 36. | | | |
|---------------------|---|-------------------------------------|---------------|------------------------|--------------------|----------------------|---------|----|
| Note | Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule | | | | | | Yes | No |
| 1 During | the tax year, did the orgranization engage in any of the following transactions with one | e or more related organiz | zations liste | ed in Parts II-IV? | | | | |
| a Rec | eipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity | | | | | 1a | | No |
| b Gift, | grant, or capital contribution to related organization(s) | | | | | 1b | | No |
| c Gıft, | grant, or capital contribution from related organization(s) | | | | | 1 c | | No |
| d Loar | ns or loan guarantees to or for related organization(s) | | | | | 1d | | No |
| e Loar | ns or loan guarantees by related organization(s) | | | | | 1e | | No |
| f Divi | dends from related organization(s) | | | | | 1 f | | No |
| g Sale | e of assets to related organization(s) | | | | | 1 g | | No |
| h Puro | chase of assets from related organization(s) | | | | | 1h | | No |
| i Exch | nange of assets with related organization(s) | | | | | 1i | | No |
| j Leas | se of facilities, equipment, or other assets to related organization(s) | | | | | 1 j | | No |
| k Leas | se of facilities, equipment, or other assets from related organization(s) | | | | | 1k | | No |
| I Perfo | ormance of services or membership or fundraising solicitations for related organization | n(s) | | | | 11 | | No |
| m Perfo | ormance of services or membership or fundraising solicitations by related organization | n(s) | | | | 1m | | No |
| n Shar | ing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | | | 1n | | No |
| o Sha | ring of paid employees with related organization(s) | | | | | 10 | | No |
| p Rein | mbursement paid to related organization(s) for expenses | | | | | 1 p | | No |
| q Rein | nbursement paid by related organization(s) for expenses | | | | | 1 q | | No |
| r Othe | er transfer of cash or property to related organization(s) | | | | | 1r | Yes | |
| s Othe | er transfer of cash or property from related organization(s) | | | | | 1s | | No |
| 2 If the | e answer to any of the above is "Yes," see the instructions for information on who mus | t complete this line, inc | :luding cove | red relationships | and transaction th | resholds | | |
| | (a) Name of related organization | (b) Transactı type (a- | | (c) Amount involved | Method of dete | (d) mining amount | involve | d |
| (1) PHRMA I | | R | | 90,000 | CASH | | | |
| | INDEPENDENT EXPENDITURE COMMITTEE | R | | 489,999 | | | | |
| (3) PHRMA I | BETTER GOVT | R | | 113,787 | CASH | | | |
| (4) PHRMA (| CO PAC | R | | 110 000 | CASH | | | |

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

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

| revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships | | | | | | | | | | | | | | |
|--|--------------------------------|---|--|---|----|------------------------------------|--|--|----|---|-----|--------|--------------------------------|--|
| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | (e) Are all partners section 501(c)(3) organizations? | | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproprtionate allocations? | | (i) Code V7UBI amount in box 20 of Schedule K-1 (Form 1065) | | | (k) Percentage ownership | |
| | | | 314) | Yes | No | | | Yes | No | | Yes | No | | |
| | | | | | | | | | | | |] | | |
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Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013

Software ID: **Software Version:**

EIN: 53-0241211

Name: PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA

| Form 990, Schedule R, Part II - Identification of Rel | ated Tax-Exempt Or | ganizations | | _ | | | ! |
|--|-----------------------------|---|--------------------------------------|---|-------------------------------|--|----------|
| Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c) (3)) | (f) Direct controlling entity | (g) Section 512 (b)(13) controlled entity? | |
| | | | | | | Yes | No |
| (1) PHRMA PAC | POLITICAL | CA | | | | Yes | 1 |
| 1127 11TH STREET SUITE 300 SACRAMENTO, CA 95814 20-4447742 | | | | | | | |
| (1) PHRMA INDEPENDENT EXPENDITURE COMMITTEE | POLITICAL | CA | | T | | Yes | <u> </u> |
| 1127 11TH STREET SUITE 300 SACRAMENTO, CA 95814 90-0239652 | | | | | | | |
| (2) PHRMA RI PAC | POLITICAL | RI | | | | Yes | |
| 125 WASHINGTON STREET UNIT 1 FOXBORO, MA 02035 _20-5127823 | | | | | | | |
| (3) PHRMA COLORADO ACTION FUND | POLITICAL | СО | | | | Yes | |
| 1740 BROADWAY DENVER, CO 80274 _20-5123531 | | | | | | | |
| (4) PHRMA BETTER GOVERNMENT COMMITTEE | POLITICAL | DC | | | | Yes | |
| 950 F STREET NW WASHINGTON, DC 20004 52-1606127 | | | | | | | |
| (5) PHRMA TN PAC | POLITICAL | TN | | | | Yes | |
| 950 F STREET NW WASHINGTON, DC 20004 53-0241211 | | | | | | ١ | |