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CANNED MAR 25 2014

Form **990-EZ**

Department of the Treasury

Short Form Return of Organization Exempt From Income Tax

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

OMB No 1545-1150 2013

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

Open to Public Inspection

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990. Internal Revenue Service A For the 2013 calendar year, or tax year beginning 20 2013, and ending C Name of organization B Check if applicable D Employer identification number Address change Number Theory Foundation c/o Carl Pomerance 74-2913961 Name change Number and street (or PO box, if mail is not delivered to street address) Room/suite E Telephone number Initial return HB-6188 Mathematics Department, Dartmouth College 603-646-1631 Terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Application pending Hanover, NH 03755 Number ▶ G Accounting Method. ☐ Cash ☐ Accrual Other (specify) ▶ H Check ► ☐ if the organization is not I Website: ▶ required to attach Schedule B J Tax-exempt status (check only one) - 501(c)(3) 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or (Form 990, 990-EZ, or 990-PF) Trust ☐ Other L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts if gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received. 66,380 2 Program service revenue including government fees and contracts 2 3 Membership dues and assessments 3 4 Investment income . . . 4 156 **5a** Gross amount from sale of assets other than inventory 5a b Less. cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than * ٦., Gross income from fundraising events (not including \$ of contributions * from fundraising events reported on line 1) (attach Schedule G if the *** sum of such gross income and contributions exceeds \$15,000) . . . Less: direct expenses from gaming and fundraising events 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 7a Gross sales of inventory researcturns and allowances Less: cost of goods sold Gross profit or (loss) from sales or inventory (Subtract line 7b from line 7a) 7c Other revenue (describe in Schedule O)

Total revenue. Add line 22, 3/A/Fod 66, 26 and 8

Grants and similar amounts paid (list in Schedule O) 8 8 9 66,536 10 21,000 Benefits paid to or for members G 11 11 Salaries, other compensation and employee benefits 12 12 13 Professional fees and other payments to independent contractors 13 14 Occupancy, rent, utilities, and maintenance . . . 15 Printing, publications, postage, and shipping. 15 Other expenses (describe in Schedule O) 16 16 Total expenses. Add lines 10 through 16 . 17 17 21,000 18 Excess or (deficit) for the year (Subtract line 17 from line 9) . 45,536 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 19 59,507 20 Other changes in net assets or fund balances (explain in Schedule O) . 20

Net assets or fund balances at end of year Combine lines 18 through 20

For Paperwork Reduction Act Notice, see the separate instructions.

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Form **990-EZ** (2013)

Part				_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	V Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	103	√
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a b 38a	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b 38a		1
b 39 a b 40a	If "Yes," complete Schedule L, Part II and enter the total amount involved			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	* * <u>1.2</u>	
c - d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	* * *		
е	reimbursed by the organization	* A * 3	* * * * * -##-	
41	transaction? If "Yes," complete Form 8886-T	40e	1	
		603-64	6.2635	
	Located at ► ZIP + 4 ►			
b	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)?	42b	Yes	No ✓
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶	42c		√
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	► []
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Tes	No ✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	< !	1
d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d	`	√
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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," Form 990 and Schedule R may need to be completed instead of	45a		✓
	Form 990-EZ (see instructions)	45b		1

Page	4

40	DJ. 14								T - 3	Yes	No
46		ne organization engage, directly or inc ndidates for public office? If "Yes," co					in opposii	ion	46	35	
Part \		Section 501(c)(3) organizations		<u></u>					1.35	L	
		All section 501(c)(3) organizations		stions 47-49b ar	nd 52, ar	d con	nplete th	e tat	oles f	or lin	es
		50 and 51.									
		Check if the organization used Sch	edule O to respond	to any question i	n this Pa	rt VI	<u> </u>	<u> </u>	<u> </u>		<u>. </u>
										Yes	No
47		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									1
48	Is the	the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E									
49a	Did th	ne organization make any transfers to	an exempt non-cha	ritable related orga	anızation?	٠			49a		✓
b		s," was the related organization a sec							49b	<u> </u>	<u>L</u> _
50		olete this table for the organization's									
	empi	oyees) who each received more than	\$100,000 of comper	nsation from the or				e, en	ter "IN	ione.	
	(a)					e) Estimated amount of other compensation					
no emp	loyees	5									
f		number of other employees paid over									
51 		olete this table for the organization's ,000 of compensation from the organ			ent contra	ectors	who each	rec	eived	more	than
	(a)	Name and business address of each independent	ent contractor	(b) Type of service			(c) Compensation				
d	Total	number of other independent contra	ctors each receiving	over \$100,000	. ▶						
52		ne organization complete Schedule A			ons and 4	947(a)	(1)				
	none	xempt charitable trusts must attach a	completed Schedul	<u>le A</u>		• •	·	▶ [Yes		No
Under pe	enalties rect. an	of perjury, I declare that I have examined this red complete. Declaration of preparer (other than	eturn, including accompan officer) is based on all info	ying schedules and statement of the statement of which prepared to the statement of the sta	tements, and rer has any	i to the i knowled	oest of my kr ge	nowled	dge and	i belief,	, it is
		1 (2 Homerance				7 2	111/14	<u> </u>			
Sign		Signature of officer				Date	///_/ /				
Here		Carl Pomerance, President									
		Type or print name and title	Table 1		D-4-				D.T.		
Paid		Print/Type preparer's name	Preparer's signature		Date		Check	if [PTIN		
Prepa	arer		L		L	T	self-emplo	yed			
Use (Only	Firm's name				s EIN ▶					
May th	e IRS	discuss this return with the preparer	shown above? See	instructions		Phor		▶	Ves		No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047 2013

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

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Name	or the organization						1.	-inbiolei ic	ici iu i Cabo	ii iidiiibei	
	er Theory Foundat									13961	
Par			rity Status (All orga						nstructio	ons.	
	•	•	ition because it is: (Fo		-		-				
1	-		hes, or association of			ed in sec	tion 1/0((D)(T)(A)(I).		
2											
3									N/L \/4\(A\	an Cotouthe	
4		earch organization ie, city, and state	on operated in conjunction of the conjunction of th	ction with	a nospit	al descrit	oea in se	ction 170	J(D)(T)(A)	(III). Enter the	
5	5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6 . 7											
8	☐ A community t	rust described i	n section 170(b)(1)(A)	(vi). (Cor	nplete Pa	ırt il.)					
9	receipts from support from	activities related gross investme	receives: (1) more that to its exempt funct ant income and unrel fter June 30, 1975. Se	ions-sul lated bus	oject to d siness tax	ertain ex kable inc	ceptions come (les	s, and (2) ss sectio	no more	e than 331/3%	of its
10	An organizatio	n organized and	operated exclusively	to test fo	r public s	safety. Se	e sectio	n 509(a)(4).		
11	An organization purposes of o	on organized ar ine or more pub	nd operated exclusive blicly supported organ describes the type of	ely for th	ie benefit described	of, to p	perform to non 509(a d comple	the funct a)(1) or se ete lines 1	ions of, ection 50 1e throu	9(a)(2). See s e gh 11h.	ection
	a 🗹 Type I	b 🗌 Type	II c ☐ Type III	l-Functio	nally integ	grated	d 🔲	Type III-N	lon-funct	tionally integra	ited
е		ndation manage	that the organization ers and other than one								
					L- IDC 4	ما فياسط	a Tuna	I Tuno	ll or Tur	a III aunnarti	20
f	-		a written determination							· · · ·	. 🔲
g	Since August following person		he organization accep	oted any	gift or co	ontributio	n from a	iny of the)		
			ndirectly controls, eithody of the supported				persons		d in (ii) a	nd Yes	No
	(ii) A family m	ember of a person	on described in (i) abo	ve?						11g(ii)	1
	• • •	•	a person described in							11g(iu)	1
h			on about the support								
(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organizai (i) organi	ls the tion in col ized in the S?	(vii) Amount of monetary support	
		ļ	, "	Yes	No	Yes	No	Yes	No	1	
(A) U.	Illinois Foundation statement 2)	37-600607	11A	,				,			0
(B)											
(C)										1	
(D)											
(E)								 			
										 	

	<u>`</u>		_				9	
Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)								
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under								
	Part III. If the organization fails to	qualify unde	er the tests lis	ted below, p	lease comple	te Part III.)		
Secti	Section A. Public Support							
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not	}			}	}		
	include any "unusual grants.")							
2	Tax revenues levied for the				{			
	organization's benefit and either paid				;			
	to or expended on its behalf							
3	The value of services or facilities	}			}	}		
	furnished by a governmental unit to the	}						
	organization without charge	Ĺ						
4	Total. Add lines 1 through 3	* * * *						
5	The portion of total contributions by							
	each person (other than a			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		* 5 4 5 7 7 7		
	governmental unit or publicly	7' 2 2' 3' 3'		, , , , , , ,				
	supported organization) included on line 1 that exceeds 2% of the amount	* * * * * * * * * * * * * * * * * * * *		** *** ***				
	shown on line 11, column (f)	* * * * * * * * *		3				
6	Public support. Subtract line 5 from line 4.	* * * * * * * *	* * * * * * * * * * * * * * * * * * * *		* * * * * *	***********		
	on B. Total Support			<u> </u>	1 ** * * * * * * * * * * * * * * * * *	8 8 2 4 7 6		
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
7	Amounts from line 4	} `-						
8	Gross income from interest, dividends,							
	payments received on securities loans,	}		,		Ì		
	rents, royalties and income from similar							
	sources							
9	Net income from unrelated business							
	activities, whether or not the business							
	is regularly carried on							
10	Other income. Do not include gain or							
	loss from the sale of capital assets							
	(Explain in Part IV.)				ļ			
11	Total support. Add lines 7 through 10	*******	* * * * * * *	*****	* * * * * * * * *			
12	Gross receipts from related activities, etc. First five years. If the Form 990 is for the					12	= F01(a)(2)	
13	organization, check this box and stop he	_					n 501(c)(5) ► □	
Secti	on C. Computation of Public Support							
14	Public support percentage for 2013 (line			1. column (fl)		14	%	
15	Public support percentage from 2012 Sci		-			15	%	
16a	331/3% support test-2013. If the organi							
	box and stop here. The organization qua	difies as a publ	icly supported	organization			. ▶ 🛚	
þ	331/3% support test-2012. If the organ					15 is 331/3%	or more,	
	check this box and stop here. The organ	ization qualifie	s as a publicly	supported org	ganization		. ▶ 🛛	
17a	10%-facts-and-circumstances test-2							
	10% or more, and if the organization me							
	Part IV how the organization meets the "	facts-and-circu		-	· · ·		upported	
	organization						. ▶ 🗆	
b	10%-facts-and-circumstances test-2							
	15 is 10% or more, and if the organiza							
	Explain in Part IV how the organization m							
46							. ▶ 🛚	
18	Private foundation. If the organization d							
	instructions						. 🕶 🕴	

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

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

	il the organization falls to quality	under the te	sis listed bei	ow, please c	ompiete Fart	111.)	
	on A. Public Support	T	T				
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees	}	ļ	l]]	:
_	received. (Do not include any "unusual grants.")	L			ļ	<u> </u>	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities	{		}	İ	}	1
	furnished in any activity that is related to the	1	1)	İ
	organization's tax-exempt purpose	<u></u>	<u>l</u>	L		<u> </u>	[
3	Gross receipts from activities that are not an	(\			,
	unrelated trade or business under section 513	}	}	{	1	1	1
4	Tax revenues levied for the						
	organization's benefit and either paid	l	1	l	}	} i	I
	to or expended on its behalf	(1	[-	{ !	ł
5	The value of services or facilities		,				
	furnished by a governmental unit to the	}	\	}	j)	I
	organization without charge	l	}	ì	,	}	I
6	Total. Add lines 1 through 5	ļ		1	1		
7a	Amounts included on lines 1, 2, and 3	}					
	received from disqualified persons .			1			i
b	Amounts included on lines 2 and 3		1		T		
	received from other than disqualified	}	1	{	1	1	1
	persons that exceed the greater of \$5,000	} _	-	1	-		-
-	or 1% of the amount on line 13 for the year	i	1)) 1	I
С	Add lines 7a and 7b		T		T		
8	Public support (Subtract line 7c from				1 2 7 3 9 4	\$ 2 × 1 × 1	
	line 6.)					4846	<u> </u>
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,	l	Ì	j]	}]	
	payments received on securities loans, rents,	({	
	royalties and income from similar sources .	<u></u>	}	•	}		i
b	Unrelated business taxable income (less	}	}	Ì	1) i	
	section 511 taxes) from businesses	{	Į.]		Į j	
	acquired after June 30, 1975						
C	Add lines 10a and 10b	L					<u> </u>
11	Net income from unrelated business	1	}	ł	Į	1	
	activities not included in line 10b, whether	Į.	1	(Į.		ļ
	or not the business is regularly carried on	L	1	<u> </u>	<u> </u>	<u> </u>	L
12	Other income. Do not include gain or	1			1		 J
	loss from the sale of capital assets	1	1	Į.	1.	1	1
	(Explain in Part IV)	ļ	ļ				
13	Total support. (Add lines 9, 10c, 11,	}	j	1			
	and 12.)	L	<u> </u>	<u> </u>	L	<u> </u>	<u></u>
14	First five years. If the Form 990 is for the				=		n 501(c)(3)
	organization, check this box and stop he				 		<u>···</u>
	on C. Computation of Public Suppo			10			
15	Public support percentage for 2013 (line					15	<u>%</u>
16	Public support percentage from 2012 Sc					16	<u> </u>
	on D. Computation of Investment In				(0)	T 4= T	
17	Investment income percentage for 2013	•	, ,	•	,		<u>%</u>
18	Investment income percentage from 201.						% and line
19a	331/a% support tests—2013. If the organ						
	17 is not more than 331/2%, check this box		_			-	_
b	331/a% support tests—2012. If the organi						
^^	line 18 is not more than 331/3%, check this		_				
20	Private foundation. If the organization d	іш поі спеск а	LUOX ON line 14	, 19a, or 19D,	CHECK THIS DOX	i and see instru	cu ons 🟲 [[

Juliedane V (i	rage 4							
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).							
·								

Number Theory Foundation, 74-2913961

2013 Form 990-EZ, Part IV– List of officers, directors, trustees, and key employees: Statement $\bf 1$

Name and address	Title, avg. hrs./week	Compensation	Employee ben. contrib.	Expense account
Carl Pomerance Math. Dept. Dartmouth Co Hanover, NH 03755	President, 1 ll.	0.	0.	0.
Harold Diamond Math. Dept. U. Illinois Urbana, IL 61801	Vice president, 1 & Treasurer	0.	0.	0.
Richard Blecksmith Math. Dept. N. Illinois U. Dekalb, IL 60115	Secretary, 0	0.	0.	0.
Michael Bennett Dept. Math. U. British Cole Vancover, BC, Canada	Director, 0 umbia	0.	0.	0.
John Brillhart Dept. Math. U. Arizona Tucson, AS 85721	Director, 0	0.	0.	0.
Brian Conrey American Inst. Math. 360 Portage Ave., Palo Alto	Director, 0 o, CA 94306	0.	0.	0.
Chantal David Math. Dept. Concordia U. Montreal, Quebec, Canada	Director, 0	0.	0.	0.

Kevin Ford Math. Dept. U. Illinois Urbana, IL 61801	Director, 0	0.	0.	0.
Ronald Graham Math. Dept. U. California La Jolla, CA 92093	Director, 0 San Diego	0.	0.	0.
Richard Guy Dept. Math. U. Calgary Calgary, Alberta, Canada	Emeritus Director, 0	0.	0.	0.
Bruce Reznick Dept. Math. U. Illinois Urbana, IL 61801	Director, 0	0.	0.	0.
Samuel Wagstaff, Jr. Dept. Comp. Sci. Purdue U W. Lafayette, IN 47907	•	0.	0.	0.
Hugh Williams Dept. Math. U. Calgary Calgary, Alberta, Canada	Director, 0	0.	0.	0.

Number Theory Foundation, 74-2912961

2013 Form 990-EZ, Schedule A, Part III, 3a- Explanation of qualifications to receive payments: Statement 2

Grants must be made to the University of Illinois Foundation, publicly supported organizations closely related in purpose to the UIF, or to individual members of the charitable class benefited by the UIF.

Number Theory Foundation, 74-2912961

2013 Form 990-EZ, Part I, 10- Grants and similar amounts paid: Statement 3, page 1

Class of activity/Donee	Relationship	Amount
2012 West Coast Number Theory Conference Kjell Wooding	none	2000.
Conference on Additive and Combinatorial Number Theory CUNY Graduate Center, M. Nathanson	none	500.
Society for Industrial and Applied Mathematics Workshop on Arithmetic Geometry Colorado State University Foundation	none	6000.
Erdős Centennial Conference MTA Rényi Institute	none	10000.
Pacific Northwest Number Theory Conference University of Washington	none	500.
2013 West Coast Number Theory Conference Kjell Wooding	none	2000.