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Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Internal Revenue Service

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

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

Open to Public Inspection

A Fo	the 2013 calendar year, or tax year beginning and ending				
B Che	C Name of organization	D Employer identifica	ation number		
	ddress POPULATION CONNECTION				
lc	ame nange Doing Business As	94-17	03155		
lı	Number and street (or P 0 box if mail is not delivered to street address) Room/s	suite E Telephone number			
a	ermin- 2120 L STREET, NW 500	202-3	32-2200		
r	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	7,795,124.		
ti	WASHINGTON, DC 20037-1534	H(a) Is this a group retu			
P	F Name and address of principal officer JOHN SEAGER	for subordinates?	Yes X No		
	SAME AS C ABOVE	H(b) Are all subordinates incli			
	exempt status X 501(c)(3)		st (see instructions)		
	bsite: WWW.POPULATIONCONNECTION.ORG	H(c) Group exemption			
Part		Year of formation 1968 M	State of legal domicile: DC		
<u> </u>	1 Briefly describe the organization's mission or most significant activities SEE PART	1 TTT TTND 1			
Governance	III, LINE 1.				
L a	2 Check this box if the organization discontinued its operations or disposed of	more than 25% of its net asse	ets		
OVe	Number of voting members of the governing body (Part VI, line 1a)	3	14		
25	Number of independent voting members of the governing body (Part VI, line 1b)	4	14		
	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	22		
₹	Total number of volunteers (estimate if necessary)	6	700		
Activities	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.		
· 1	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.		
		Prior Year	Current Year		
e le	Contributions and grants (Part VIII, line 1h)	3,949,421.	5,548,499.		
Revenue	Program service revenue (Part VIII, line 2g)	1,967.	0.		
<u>é</u> 1	0 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	25,184.	62,962.		
	1 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	20,567.	21,190.		
	2 Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,997,139.	5,632,651.		
]	Grants and similar amou nts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members Ferri X, column (A), line 4)	0.	100,000.		
		1,329,774.	1 621 927		
Expenses	5 Salaries, other compensation, employee benefits (Part) column (A), lines 5·10) 6a Professional fundraising fees (Part IX, column (A), line Qe)	22,461.	1,621,827.		
le '	b Total fundraising expenses (Part IX, Column (D), line 25(2) 512,528.	22,401.	62,616.		
	7 Other expenses (Part IX, column (A), lines 11a-11a-11a-11a-11a-11a-11a-11a-11a-11a	2,178,211.	2,555,186.		
	8 Total expenses Add lines 13-12 (miles equal Part IX, column (A), line 25)	3,530,446.	4,339,629.		
	9 Revenue less expenses Subtract line 18 from line 12	466,693.	1,293,022.		
	The vertice loss expenses easities in normality 12	Beginning of Current Year	End of Year		
sign 2	O Total assets (Part X, line 16)	2,821,740.	4,281,217.		
Seg 2		456,896.	611,931.		
Net Assets or Fund Balances	,	2,364,844.	3,669,286.		
Part	II Signature Block				
Under p	enalties of perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to the best of my k	knowledge and belief, it is		
true, co	rrect, and complete Declaration of preparer (other than officer) is based on all information of which prej	parer has any knowledge			
	XI SON	8/13/17	<u>/</u>		
Sign	Signature of officer	Date /			
Here	JOHN SEAGER, PRESIDENT & CEO Type or print name and title				
		Date . Check	T DTIN		
Doud	Print/Type preparer's name Preparer's signature CPA Preparer's signature CPA CPA Preparer's signature CPA	(T_12 14) ii -	PIN 00211995		
Paid Prepare			1 0036695		
Use On		Firm's EIN	52-1392008		
036 UII	BETHESDA, MD 20814-2930	Phone no. (301) 951-9090 C			
May th	e IRS discuss this return with the preparer shown above? (see instructions)	j rnone no. (30	X Yes No		
	10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2013)		

⊀Form 990 (2013)

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	X	ļ
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_X_	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		7,7	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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	_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5_		X
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		Α_
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
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	Х	
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			3.7
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
ū	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	114		Х
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	ŀ		
	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		<u>X</u>
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			47
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15	-	_ <u>X</u> _
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	46		v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		<u>X</u>
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	\mathbf{x}	
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		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
		20b		
		Form	990 (2013)

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Part IV Checklist of Required Schedules (continued)

			ı	· ·
04	Did the executation report more than \$5,000 of events or other constance to any demostra events are		Yes	No
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		v	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,	21	X	
22	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22		
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
240		23	<u> </u>	
24a	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		X
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	 	
b	Did the organization invest any proceeds of tax-exempt borids beyond a temporary period exception. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
С		240	ľ	1
	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24d		
25a		05.0		х
L.	disqualified person during the year? If "Yes," complete Schedule L, Part 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	051		х
26	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	06		х
07	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
27				
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	0.7		х
28	of any of these persons? If "Yes," complete Schedule L, Part III	27		
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
a	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		Λ.
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	00		
0 1	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
02	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
-	sections 301 7701-2 and 301 7701 3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	<u> </u>		
•	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	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	х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		_ _	
	If "Yes," complete Schedule R, Part V, line 2	36		Х
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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note. All Form 990 filers are required to complete Schedule O	38	X	
			990	(2013)
		. 3		,

	Check if Schedule O contains a response or note to any line in this Part V							
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	5						
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b)						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?	1 <u>c</u>	X					
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 2a	<u> </u>						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	ļ .				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		ļ				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
þ	If "Yes," enter the name of the foreign country							
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			37				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
	If "Yes," to line 5a or 5b, did the organization file Form 8886 T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c		 				
Va	any contributions that were not tax deductible as charitable contributions?	60		X				
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a						
	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).	U						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		x				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7c		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х				
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		-				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A							
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		-				
9	Sponsoring organizations maintaining donor advised funds.	_						
a b	Did the organization make any taxable distributions under section 4966? N/A Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9a						
10	Section 501(c)(7) organizations. Enter	9b						
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a		,	1				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		l				
11	Section 501(c)(12) organizations. Enter	1		ĺ				
а	Gross income from members or shareholders N/A 11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1						
	amounts due or received from them)			ĺ				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a						
	Note. See the instructions for additional information the organization must report on Schedule O							
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ļ		1				
	organization is licensed to issue qualified health plans	↓						
С	Enter the amount of reserves on hand	\vdash						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		100:5:				
		Form	990	(2013)				

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

	Check if Schedule O contains a response or note to any line in this Part VI					LAI					
Sec	tion A. Governing Body and Management										
		1.	1 4		Yes	No_					
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	14	4							
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O										
b	Enter the number of voting members included in line 1a, above, who are independent	1b	14	4							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ıp with	any other								
	officer, director, trustee, or key employee?			2		X					
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	ct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?			4	Х	<u> X</u>					
4											
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		<u>X</u> _					
6	Did the organization have members or stockholders?			6		_X_					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or								
	more members of the governing body?			.7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or								
	persons other than the governing body?			7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following								
	The governing body?			8a	X	<u> </u>					
b	Each committee with authority to act on behalf of the governing body?			8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached :	at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		_X_					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	e Code)								
					Yes	No					
	Did the organization have local chapters, branches, or affiliates?			10a	X						
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,	10b	х						
	and branches to ensure their operations are consistent with the organization's exempt purposes?										
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
b											
12a											
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give risk			12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	res," d	escribe		77						
	In Schedule O how this was done			12c	X	——·					
13	Did the organization have a written whistleblower policy?			13	X						
14	Did the organization have a written document retention and destruction policy?			14_	X						
15	Did the process for determining compensation of the following persons include a review and approv		ndependent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,			3.5						
a	The organization's CEO, Executive Director, or top management official			15a	X						
b	Other officers or key employees of the organization			15b	Х						
40	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 arrange	ment v	vitn a			77					
	taxable entity during the year?			16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the control of the organization of the organization of the organization to evaluate the organization of the organizatio										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	ınızatıo	n's								
500	exempt status with respect to such arrangements?			16b		L					
	tion C. Disclosure	_									
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE		FO1/-\/O\\		1-						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	i (Sect	ion 501(c)(3)s only)	avallad	ie						
	for public inspection. Indicate how you made these available. Check all that apply	0-4	h - d . d + O)								
40	X Own website Another's website X Upon request Other (explain in Schedule O)										
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 a	ına rec	oras or the organiza	tion 🕨							
	JOHN SEAGER - (202)332-2200	7									
	2120 L STREET, NW, SUITE 500, WASHINGTON, DC 2003) /									

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 report able compensation (Box 5 of Form W 2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	(40	Position (do not check more than one				000	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week		cer an	o a d	recto	or/trus	stee)	from	from related	other
	(list any hours for	recto						the	organizations	compensation
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	truste	al trus		yee	m per		(11 21 1000 111100)		and related
	below	Individual trustee or director	Institutional trustee	a	Key employee	Highest compensated employee	<u></u>			organizations
	line)	휼	Insti	Officer	Key	High	Former			
(1) MARIANNE GABEL	2.00									
CHAIR (UNTIL JUNE 2013)	0.00	X		X				0.	0.	0.
(2) J. JOSEPH SPEIDEL	2.00	Į								
CHAIR	0.00	X		X		<u> </u>		0.	0.	0.
(3) BOB MUSIL	2.00									
TREASURER	1.00	X		X			ļ	0.	0.	0.
(4) BOB PETTAPIECE	2.00									
SECRETARY	0.00	Х		X				0.	0.	0.
(5) CATHERINE CAMERON	2,00		Ì							
SECRETARY (UNTIL JUNE 2013)	1.00	X	ļ					0.	0.	0.
(6) JO LYNNE WHITING	2.00									
VICE CHAIR	0.00	Х						0.	0.	0.
(7) MARY BARBARA ALEXANDER	2.00									
BOARD MEMBER (UNTIL JUNE 2013)		X						0.	0.	0.
(8) KRISTY BRUGAR	2.00									
BOARD MEMBER	0.00	X_				<u> </u>	_	0.	0.	0.
(9) DUFF G. GILLESPIE	2.00							_	_	
BOARD MEMBER	0.00	X			<u> </u>			0.	0.	0.
(10) CAROL ANN KELL	2.00							_ !	_	
BOARD MEMBER		X					<u> </u>	0.	0.	0.
(11) ANNA LOGAN LAWSON	2.00							_ ;		
BOARD MEMBER	0.00	Х						0.	0.	0.
(12) SACHEEN NATHAN	2.00								_	
BOARD MEMBER	0.00	Х					ļ	0.	0.	0.
(13) DARA E. PURVIS	2.00								_	
BOARD MEMBER	0.00	X				ļ		0.	0.	0.
(14) ESTELLE M. RABONI	2.00							_	_	_
BOARD MEMBER		X					_	0.	0.	0.
(15) CAROL VLASSOFF	2.00							_	_	
BOARD MEMBER	0.00	X						0.	0.	0.
(16) STACEY YOUNG	2.00								_	_
BOARD MEMBER	0.00	Х					_	0.	0.	0.
(17) HANIA ZLOTNIK	2.00								_	_
BOARD MEMBER	0.00	X		L.,	L	L .	L	0.	0.	0.

332007 10-29-13

Form **990** (2013)

Form 990 (2013)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Total revenue Related or other control of the state of th			Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
2 a Business Code C C C C C C C C C	-			•		· ·	Related or exempt function	Unrelated business	from tax under
2 a Business Code C C C C C C C C C	ıts ıts	1 a	Federated campaigns	1a		-			
2 a Business Code C C C C C C C C C	arar our	b	Membership dues	1b	690,015.				
2 a Business Code C C C C C C C C C	s, G Am	С	Fundraising events	1c					
2 a Business Code C C C C C C C C C	Sift lar	d	Related organizations	1d					
2 a Business Code C C C C C C C C C	ī, i	е	Government grants (contribut	ions) 1e					
2 a Business Code C C C C C C C C C	tior sr S	f	All other contributions, gifts, gran	its, and					
2 a Business Code C C C C C C C C C	the the		sımılar amounts not ıncluded abo	ve 1f	4,858,484.				
2 a Business Code C C C C C C C C C	d O	g	Noncash contributions included in lines	1a-1f \$	34,023.				
2 a b b c d d c d d d d d d	<u>2 g</u>	h	Total. Add lines 1a-1f		>	5,548,499.			
Total, Add lines 2a.2f	_				Business Code				
Total, Add lines 2a.2f	/ICe								
Total, Add lines 2a.2f	er. ue								
Total, Add lines 2a.2f	m S						<u> </u>		
Total, Add lines 2a.2f	gra								
Total, Add lines 2a.2f	ro								-
3 Investment income (including dividends, interest, and other similar amounts) 62,898. 6	_		, 5	enue					
Other similar amounts			_:	duudaada intara	est and				
4 Income from investment of tax exempt bond proceeds 5 Royalties 6 a Gross rents b Less rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gan or (loss) 4 Net gain or (loss) 7 a Gross ancome from fundraising events (iii) Securities (ivi) Securities (ivi) Other 2, 157, 240, 2, 157, 240, 4 Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross sales of inventory, less returns and allowances c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b S, 297, Set income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b C C d All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions 1 18, 427. 18, 427.		3		uividends, intere		C2 800			62.000
18,427, 18,4		4	•	v avamnt hand n	- 1	62,090.			62,090.
(i) Personal (ii) Personal (iii) Personal (iii) Personal (iii) Personal (iiii) Personal (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii				x exempt bond p	roceeds	10 427			19 427
6 a Gross rents b Less rental expenses c Rental expenses c Rental income or (loss)		5	noyanies	(I) Beal	(v) Personal	10,427.			10,427.
b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gam or (loss) 4 Net gain or (loss) 8 a Gross income from fundraising events (not including \$		6 2	Gross rents	(ly Freat	(ii) i ersonai				
C Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses 2 156 292 884 64 64 64 64 64 64 64 64 64 64 64 64 64				-			•		
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Garn or (loss) 948, -884, d Net gain or (loss) 8 a Gross income from fundraising events (not including \$			· ·						
7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 4 Net gain or (loss) 948884. d Net gain or (loss) 948884. d Net gain or (loss) 5 Of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less cost of goods sold b 5 297, c Net income or (loss) from sales of inventory 2 763, 2 763, Miscellaneous Revenue 8usiness Code 11 a b C All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions 5 5,632,651, 2 763, 0 81,389.					•				
assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) 948884. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$				(i) Securities					
b Less cost or other basis and sales expenses 2,156,292, 884, 948, -884, 64, 64, 64, 64, 64, 64, 64, 64, 64,				,	(.,) 0				
and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		b		2,107,240.					
Section Sect		_		2 156 292	884				
d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a b C d All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions 64. 64. 64. 64. 64. 64. 64. 64. 64. 64		С	•						
8 a Gross income from fundraising events (not including \$, ,			64.			64.
Including \$ of contributions reported on line 1c) See Part IV, line 18	ø.		, ,	g events (not		×			
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a b c d All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions Part IV, line 19 a Business Code 8 8,060, b Less cost of goods sold b 5,297, c Net income or (loss) from sales of inventory 2,763, 2,763, 3,763, 4,763, 5,632,651, 6,763, 7,763, 7,763, 8,1389	ň		including \$	of					
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a b c d All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions Part IV, line 19 a Business Code 8 8,060, b Less cost of goods sold b 5,297, c Net income or (loss) from sales of inventory 2,763, 2,763, 3,763, 4,763, 5,632,651, 6,763, 7,763, 7,763, 8,1389	eve		contributions reported on line	1c) See					
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a b c d All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions Part IV, line 19 a Business Code 8 8,060, b Less cost of goods sold b 5,297, c Net income or (loss) from sales of inventory 2,763, 2,763, 3,763, 4,763, 5,632,651, 6,763, 7,763, 7,763, 8,1389	E.		Part IV, line 18	а					
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a b c d All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions Part IV, line 19 a Business Code 8 8,060, b Less cost of goods sold b 5,297, c Net income or (loss) from sales of inventory 2,763, 2,763, 3,763, 4,763, 5,632,651, 6,763, 7,763, 7,763, 8,1389	the	b	Less direct expenses	b					
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b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 8,060, b Less cost of goods sold b 5,297, c Net income or (loss) from sales of inventory Niscellaneous Revenue Business Code		9 a	Gross income from gaming ac	ctivities See	-			-	
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances and allowances and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a 11d Total revenue See instructions			Part IV, line 19	а					1
10 a Gross sales of inventory, less returns and allowances a		b	Less direct expenses	b					
and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions a 8,060, b 5,297, c 763, c 7		С	Net income or (loss) from gam	ning activities					
b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions b 5, 297, 2, 763, 2, 763, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3		10 a	Gross sales of inventory, less	returns					
c Net income or (loss) from sales of inventory ▶ 2,763, 2,763, Miscellaneous Revenue Business Code 11 a Business Code c C d All other revenue C e Total. Add lines 11a 11d ► 12 Total revenue See instructions ► 5,632,651, 2,763, 0,81,389,			and allowances	а	8,060.				
Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a 11d 12 Total revenue See instructions		b	Less cost of goods sold	b	5,297.				
11 a		С	Net income or (loss) from sale		▶	2 763.	2,763.		-
b				ie	Business Code				
c d All other revenue e Total. Add lines 11a 11d ► 12 Total revenue See instructions ► 5,632,651, 2,763, 0, 81,389,		11 a							
d All other revenue e Total. Add lines 11a 11d ▶ 5,632,651, 2,763, 0, 81,389,		b					ļ		
e Total. Add lines 11a 11d 12 Total revenue See instructions ▶ 5,632,651, 2,763, 0, 81,389,		_							
12 Total revenue See instructions		_							
									
	33200		Total revenue See instructions		<u>▶</u>]	5,632,651.	2,763	0	

Form 990 (2013) POPULATION CO. Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com			mplete column (A)	
	Check if Schedule O contains a respor			(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	100,000.	100,000.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
Ŭ	trustees, and key employees	154,345.	121,932.	9,261.	23,152.
6	Compensation not included above, to disqualified			2,1222	<u> </u>
Ŭ	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,234,865.	980,376.	92,309.	162,180.
7	-	1,234,003.	700,370.	72,307.	102,100.
8	Pension plan accruals and contributions (include	51,649.	39,228.	3,625.	0 706
_	section 401(k) and 403(b) employer contributions)				8,796.
9	Other employee benefits	84,261.	64,149.	5,864.	14,248.
10	Payroll taxes	96,707.	73,803.	6,394.	16,510.
11	Fees for services (non-employees)				
а	j	16 422	11 500	1 001	2 004
b	Legal	16,433.	11,508.	1,021.	3,904.
С	Accounting	100,031.	73,469.	5,495.	21,067.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	62,616.			62,616.
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	435,959.	435,124.	835.	
12	Advertising and promotion	11,780.	11,685.		95.
13	Office expenses	1,016,782.	944,438.	4,592.	67,752.
14	Information technology	298,411.	242,403.	14,315.	41,693.
15	Royalties				
16	Occupancy	304,326.	228,531.	19,312.	56,483.
17	Travel	280,570.	261,531.	1,977.	17,062.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	20,281.	14,956.	1,300.	4,025.
23	Insurance	16,583.	12,623.	1,131.	2,829.
23 24	Other expenses, Itemize expenses not covered				2,023.
44	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	MISCELLANEOUS	24,205.	22,887.	435.	883.
b	SUBSCRIPTIONS	16,573.	13,080.		3,493.
c	DUES, LICENSES & TAXES	13,014.	2,229.	5,045.	5,740.
d	DALLER	238.	238.	3,0=3.	<u>J/±0•</u>
	All other expenses	250.	250.		
25	Total functional expenses. Add lines 1 through 24e	4,339,629.	3,654,190.	172,911.	512,528.
<u>25</u> 26	Joint costs Complete this line only if the organization	4,333,023.	3,03=,1300		312,320.
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation Check here	001 611	733,776.	0.	150 065
	Check here If following SOP 98-2 (ASC 958-720)	884,641.	133,110.	<u>U•</u>	150,865.

(Form 990 (2013)
Part X | Balance Sheet

Pa	<u>rt X_</u>	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		400.	1	400.
	2	Savings and temporary cash investments		2,154,914.	2	2,330,579.
	3	Pledges and grants receivable, net	İ	15,000.	3	3,000.
	4	Accounts receivable, net		104,800.	4	674,617.
	5	Loans and other receivables from current and fo	rmer officers directors	104,000.		0/1/01/1
	~	trustees, key employees, and highest compensa				
		Part II of Schedule L	ned employees complete		5	
	6	Loans and other receivables from other disqualif	ied persons (as defined under			
	"	section 4958(f)(1)), persons described in section	·			
		employers and sponsoring organizations of sect	=			
S	1	employees' beneficiary organizations (see instr)		6		
Assets	7	Notes and loans receivable, net			7	
As	8	Inventories for sale or use		16,870.	8	11,574.
	9	Prepaid expenses and deferred charges	Ì	138,157.	9	127,079.
	10a		, ,			
		basis Complete Part VI of Schedule D	10a 402,586.			
	b	Less accumulated depreciation	10b 304,568.	23,113.	10c	98,018.
	11	Investments - publicly traded securities		5,191.	11	809,965.
	12	Investments - other securities See Part IV, line 1	1	346,093.	12	107,284.
	13	Investments - program-related See Part IV, line 1		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11		17,202.	15	118,701.
	16_	Total assets. Add lines 1 through 15 (must equa	al line 34)	2,821,740.	16	4,281,217.
	17	Accounts payable and accrued expenses		175,356.	17	257,895.
	18	Grants payable		18		
	19	Deferred revenue	ļ		19	
	20	Tax-exempt bond liabilities	ļ		20	
	21	Escrow or custodial account liability Complete F	Part IV of Schedule D		21	
S	22	Loans and other payables to current and former	officers, directors, trustees,			
皇		key employees, highest compensated employee	s, and disqualified persons			
Liabilities		Complete Part II of Schedule L			22	
_	23	Secured mortgages and notes payable to unrela	Ti de la companya de		23	
	24	Unsecured notes and loans payable to unrelated	· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, pay				
		parties, and other liabilities not included on lines	17-24) Complete Part X of	001 540		254 026
		Schedule D	-	281,540.	25	354,036.
	26	Total liabilities, Add lines 17 through 25		456,896.	26_	611,931.
	}	Organizations that follow SFAS 117 (ASC 958)				
ces		complete lines 27 through 29, and lines 33 and	d 34.	2 240 044		2 (20 20(
<u>an</u>	27	Unrestricted net assets	-	2,348,844.	27	3,628,286.
Ва	28	Temporarily restricted net assets	F	15,000. 1,000.	28	40,000.
рц	29	Permanently restricted net assets	SC 058) sheet have N	1,000.	29	1,000.
Net Assets or Fund Balances	ļ	Organizations that do not follow SFAS 117 (AS	SC 938), check here			
Ō Ķ	20	and complete lines 30 through 34. Capital stock or trust principal, or current funds			20	
set	30	Paid-in or capital surplus, or land, building, or eq	unment fund		30	
t As	31	Retained earnings, endowment, accumulated inc	· ·		31 32	
Ne.	32 33	Total net assets or fund balances	Joine, or outer lutius	2,364,844.	33	3,669,286.
	34	Total liabilities and net assets/fund balances	-	2,821,740.	34	4,281,217.
			L	<u> </u>	<u> </u>	Form 990 (2013)

Form **990** (2013)

	990 (2013) POPULATION CONNECTION	94-170	3155	Pag	ge 12		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,63	2,6	<u>51.</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,33	9,6	<u> 29.</u>		
3	Revenue less expenses Subtract line 2 from line 1	3	1,29	3,0	22.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))						
5	Net unrealized gains (losses) on investments	5	2,36 1:		20.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	3,669	9,2	86.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990 Cash Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a					
	separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,					
	consolidated basis, or both						
	Separate basis X Consolidated basis Both consolidated and separate basis						
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	1 1	1			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit		ļ			
	Act and OMB Circular A-133?		3a		<u>X</u> _		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit		ļ			
	or guides, explain why in Schodule O and describe any stone taken to undergo such audite		امدا	- 1			

332012 10-29-13

Form **990** (2013)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2013

Open to Public Inspection

Maille Of	tile organizati							-		identificat		
D	l Danasa		ION CONNECTI						9	4-1703	<u> 3155</u>	,
Part I	<u> </u>		ity Status (All organız				·	tructions				
The organ			because it is (For lines 1	_								
-1 ऱ			s, or association of chure			ection 170	(b)(1)(A)(i)).				
2 🖳			'0(b)(1)(A)(II). (Attach Sc									
3 🖳	•		tal service organization of									
4	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ıı	ı). Enter	the hospita	ıl's nan	ne,
	city, and stat											
5			benefit of a college or ur	niversity o	wned or of	perated by	a governi	mental uni	t describ	ed in		
	section 170	(b)(1)(A)(ıv). (Comple	ete Part II)									
6		•	ent or governmental unit									
7 X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
	-	b)(1)(A)(vi). (Comple										
8	-		section 170(b)(1)(A)(vi). (
9 📖	_	•	eives (1) more than 33 1							•		
		-	nctions - subject to certa	•	-	•				•		
			axable income (less sect	tion 511 ta	ix) from bu	sinesses a	acquired b	y the orga	nization	after June :	30, 197	/5
40		509(a)(2). (Complete	•	_4			500()(• •				
10	-	-	perated exclusively to tes	•	•			•			_	
11	ŭ		perated exclusively for the		•		•		•			or
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h											
	a Type	· · · · · · · · · · · · · · · · · · ·			nctionally		_	qyT 🔲 t	o III - No	n-functional	lly into	aratod
е 🔲			ر ا بے اور الکاری اللہ اللہ اللہ اللہ اللہ اللہ اللہ الل	, ,	,	•		• • •			•	_
с			han one or more publicly			-	-					
f			ten determination from t						λ(α)(Τ) ΟΙ	36011011 300	J(a)(2)	
•		rganization, check th			at it is a 1y	pe i, Type	ii, oi Type					
g		-	organization accepted an	ny aift or c	ontribution	from any	of the follo	owing pers	sons?			
9	•		rectly controls, either ale			•		•			Yes	No
	• • •	•	upported organization?			,		(, (,	11g(i)		
	_		n described in (i) above?							11g(II)		
		•	person described in (i) o		e?					11g(III)	$\overline{}$	
h		· · · · · · · · · · · · · · · · · · ·	about the supported org									
		Ü	.,		` ,							
(ı) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Did you	u notify the	(vi) ls	the	(vii) Amoun	nt of mo	netary
	anization	(11) = 114	(described on lines 1-9	in col. (ı) h	sted in your	organizat	ion in col.	organizátio (i) organiz	on in col. ed in the		port	iliciai y
•				governing	document?	(ເ) of you	support?	ÜS	?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
										<u> </u>		
								•				
												
										Í		
										-		
						ļ		<u> </u>				
				}								
Total		L		L	L	<u></u>	<u> </u>	<u> </u>		·		
LHA For F	Paperwork Re	duction Act Notice	, see the Instructions fo	or				Schedul	e A (Fori	m 990 or 99	90-EZ	2013

332021 09-25-13

Form 990 or 990-EZ.

(Form 990 or 990 EZ) 2013 POPULATION CONNECTION 94-1703155 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
	Gifts, grants, contributions, and								
	membership fees received (Do not								
	ınclude any "unusual grants ")	2,464,961.	3,026,408.	3,412,954.	3,949,421.	5,548,499.	18,402,243.		
2	Tax revenues levied for the organ-								
	ızatıon's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	2,464,961.	3,026,408.	3,412,954.	3,949,421.	5,548,499.	18,402,243.		
5	The portion of total contributions					, ,			
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						3,290,632.		
6	Public support. Subtract line 5 from line 4		·				15,111,611,		
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	Amounts from line 4	2,464,961.	3,026,408.	3,412,954.	3,949,421.	5,548,499.	18,402,243.		
8	Gross income from interest,			•					
	dividends, payments received on								
	securities loans, rents, royalties		1						
	and income from similar sources	32,322.	32,055.	26,504.	41,695.	81,325.	213,901.		
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)	921.	4,262.	2,014.	1.		7,198.		
11	Total support. Add lines 7 through 10						18,623,342.		
12	Gross receipts from related activities,	etc (see instruction	ons)			12	68,849.		
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)			
	organization, check this box and stop						▶ □		
Sec	ction C. Computation of Publ	ic Support Per	rcentage						
14	Public support percentage for 2013 (I	ıne 6, column (f) dı	vided by line 11, c	olumn (f))		14	81.14 %		
15	Public support percentage from 2012	Schedule A, Part	II, line 14			15	90.95 %		
16a	33 1/3% support test - 2013. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or n	nore, check this bo			
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright [X]$		
b	33 1/3% support test - 2012. If the o	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box		
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□		
17a	10% -facts-and-circumstances tes	t - 2013. If the org	anızatıon dıd not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	ere. Explaın ın Pai	rt IV how the organ	ızatıon		
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a j	publicly supported	organization				
b	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not c	heck a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or		
	more, and if the organization meets th	ne "facts-and-circui	mstances" test, ch	eck this box and	stop here. Explair	ın Part IV how the			
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.								
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	ind see instructions	<u>▶</u>		
					Sche	dule A (Form 990	or 990-EZ) 2013		

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

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

Section A. Public Support	on, picase comp	oloto i ait ii j	· · · · ·			
calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and		12,20.0			10,-5.0	1.7 : 3.00
membership fees received (Do not						
ınclude any "unusual grants ")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-				· · · · · ·		
ization's benefit and either paid to						
or expended on its behalf						
' <u>-</u>						
5 The value of services or facilities]	
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons				ļ. — · · · ·	-	
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the					}	
amount on line 13 for the year				-		
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support		T			1	
alendar year (or fiscal year beginning in) ► 📙	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6				<u> </u>		
Oa Gross income from interest,						
dividends, payments received on securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income	1					
(less section 511 taxes) from businesses	ļ					
acquired after June 30, 1975						
c Add lines 10a and 10b			· · · ·			
1 Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is regularly carried on						
12 Other income Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the	he organization's	s first, second, thir	d, fourth, or fifth t	ax vear as a sect		ation.
check this box and stop here	J. garnzation C	5000110, 11111	_, , or mark		(0)(0) 0.941112	▶
Section C. Computation of Public	Command Da	rcentage				
	: Support PA		·		15	
		ivided by line 13. d	:olumn (f))		, ,,,	
5 Public support percentage for 2013 (lin	e 8, column (f) d	•	column (f))		16	
Public support percentage for 2013 (linPublic support percentage from 2012 S	e 8, column (f) d Schedule A, Part	III, line 15	column (f))		16	
5 Public support percentage for 2013 (lin 6 Public support percentage from 2012 Section D. Computation of Invest	e 8, column (f) d Schedule A, Part ment Incom	III, line 15 e Percentage				
Public support percentage for 2013 (line Public support percentage from 2012 Section D. Computation of Invest Investment income percentage for 2013)	e 8, column (f) d Schedule A, Part ment Incom 3 (line 10c, colur	III, line 15 e Percentage mn (f) divided by lin			17	
Public support percentage for 2013 (lin Public support percentage from 2012 Section D. Computation of Invest Investment income percentage for 2013 Investment income percentage from 20	e 8, column (f) d Schedule A, Part ment Incom 3 (line 10c, colur 12 Schedule A,	III, line 15 e Percentage mn (f) divided by lir Part III, line 17	ne 13, column (f))		17 18	
Public support percentage for 2013 (ling Public support percentage from 2012 Section D. Computation of Invest Investment income percentage for 2013 Investment income percentage from 2019 a 33 1/3% support tests - 2013. If the o	e 8, column (f) d Schedule A, Part Iment Incom 3 (line 10c, colur 012 Schedule A, Irganization did n	III, line 15 e Percentage nn (f) divided by lin Part III, line 17 not check the box	ne 13, column (f)) on line 14, and line		17 18 33 1/3%, and line 1	7 is not
15 Public support percentage for 2013 (lin 16 Public support percentage from 2012 Soction D. Computation of Invest 17 Investment income percentage for 2013 18 Investment income percentage from 2019 19a 33 1/3% support tests - 2013. If the omore than 33 1/3%, check this box and	e 8, column (f) di Schedule A, Part Iment Incom 3 (line 10c, colur 012 Schedule A, Irganization did no distop here. The	e Percentage mn (f) divided by lir Part III, line 17 not check the box e organization qual	ne 13, column (f)) on line 14, and line ifies as a publicly	supported organ	17 18 33 1/3%, and line 1 ization	▶□
Public support percentage for 2013 (ling Public support percentage from 2012 Section D. Computation of Invest Investment income percentage for 2013 Investment income percentage from 2019 a 33 1/3% support tests - 2013. If the o	e 8, column (f) dischedule A, Partiment Incoming (line 10c, column) 12 Schedule A, rganization did not stop here. The rganization did not ganization did not ganization did not ganization did not ganization did not stop here.	III, line 15 e Percentage mn (f) divided by lin Part III, line 17 not check the box e organization qual not check a box or	ne 13, column (f)) on line 14, and lini ifies as a publicly lline 14 or line 19	supported organ a, and line 16 is n	17 18 33 1/3%, and line 1 ization nore than 33 1/3%, a	▶□

Schedule A	(Form 990 or 990-EZ) 2013 POPULATION CONNECTION	94-1703155 Page 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)	
		

. SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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

OMB No 1545-0047

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	n 501(c)(4), (5), or (6) organiza	ations Complete Part III	•		
Name of c	rganization			Empl	oyer identification number
	POPULAT	CION CONNECTION			94-1703155
Part I-	Complete if the or	ganization is exempt und	der section 501(c) or is a section 527 o	rganization.
2 Politi	de a description of the organi cal expenditures iteer hours	zation's direct and indirect politic	cal campaign activities		
Part I-I	Complete if the or	ganization is exempt und	der section 501(c)(3).	
		incurred by the organization un-			
2 Enter	the amount of any excise tax	incurred by organization manag	ers under section 495		
3 If the	organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was	a correction made?				Yes No
	s," describe in Part IV	 			
Part I-0	Complete if the org	ganization is exempt und	der section 501(c		
	• •	d by the filing organization for se	•		
	0 0	nization's funds contributed to of	ther organizations for		
	pt function activities	. Add been 1 and 0 February			
line 1	•	s Add lines 1 and 2 Enter here a	and on Form 1120-PO	•	
	70 ne filing organization file Form	1120-POL for this year?		▶\$	Yes No.
5 Enter made contr	the names, addresses and en payments. For each organizar abutions received that were pu	mployer identification number (E ation listed, enter the amount pai romptly and directly delivered to additional space is needed, pro-	d from the filing organ a separate political or	iization's funds Also enter th ganization, such as a separa	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
_					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

LHA

332041 11-08-13

Schedule C (Form 990 or 990 EZ) 2013	POPULATI	ON CONNECTION		94-1	703155 Page 2
	_	exempt under section	on 501(c)(3) and fil	ed Form 5768	
(election under sec	ction 501(h)).				
A Check 🕨 📖 if the filing organiza	ation belongs to	an affiliated group (and list i	n Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and sha	are of excess lob	bying expenditures)			
B Check 🕨 🔛 if the filing organiza	ation checked bo	ox A and "limited control" pr	ovisions apply		r
	its on Lobbying ditures" means	Expenditures amounts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	luence public op	oinion (grass roots lobbying)	-	0.	
b Total lobbying expenditures to infl	luence a legislati	ive body (direct lobbying)		93,424.	
c Total lobbying expenditures (add	lines 1a and 1b)			93,424.	
d Other exempt purpose expenditur	res			4,246,205.	
e Total exempt purpose expenditure	es (add lines 1c a	and 1d)		4,339,629.	
f_Lobbying nontaxable amount_Ent	ter the amount fr	rom the following table in bo	th columns	366,981.	
If the amount on line 1e, column (a)	or (b) is. T	he lobbying nontaxable an	nount is:		
Not over \$500,000	20	0% of the amount on line 1e)		
Over \$500,000 but not over \$1,00	00,000 \$	100,000 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,5	500,000 \$	175,000 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17	7,000,000 \$2	225,000 plus 5% of the exc	ess over \$1,500,000		
Over \$17,000,000	\$	1,000,000			
g Grassroots nontaxable amount (er	nter 25% of line	1f)		91,745.	
h Subtract line 1g from line 1a If zei	ro or less, enter	-0-		0.	
i Subtract line 1f from line 1c If zer	•			0.	
J If there is an amount other than ze		1h or line 1i, did the organiz	zation file Form 4720	_	
reporting section 4911 tax for this				L	Yes No
•	zations that ma	ear Averaging Period Under ide a section 501(h) election See the instructions for lin	n do not have to comp		
	Lobbying	Expenditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	298,3	309,169.	326,522.	366,981.	1,301,009.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,951,514.
c Total lobbying expenditures	118,6	66,391.	63,883.	93,424.	342,379.
d Grassroots nontaxable amount	74,5	77,292.	81,631.	91,745.	325,252.
e Grassroots ceiling amount (150% of line 2d, column (e))					487,878.

Schedule C (Form 990 or 990-EZ) 2013

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2013 POPULATION CONNECTION 94-1703155 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

				(t	
	obbying activity	Yes	No	Amo	ount
1 [During the year, did the filing organization attempt to influence foreign, national, state or		_		
	ocal legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of				
	/olunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
-	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		-		
	Other activities?				
	otal Add lines 1c through 1i				
-	old the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	f "Yes," enter the amount of any tax incurred under section 4912				
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)	(5), or se	ection	
	501(c)(6).		(0), 0. 00		
_				Yes	
- - V	Vere substantially all (90% or more) dues received nondeductible by members?		1	Yes	
	Vere substantially all (90% or more) dues received nondeductible by members? Out the organization make only in-house lobbying expenditures of \$2,000 or less?		1 2	Yes	
: C	old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		2 3 (5), or se	ection	
c cart	old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		2 3 (5), or se R (b) Par	ection	ne 3
ort	Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Oues, assessments and similar amounts from members	'No," OF	2 3 (5), or se	ection	
Irt Irt	old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes." Oues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	'No," OF	2 3 (5), or se R (b) Par	ection	
ort S	old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Oues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	'No," OF	2 3 (5), or se R (b) Par	ection	
[[] [] [] [] [] [] [] [] [] [old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes." Oues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	'No," OF	2 3 (5), or se R (b) Par	ection	
C S S S S S S S S S S S S S S S S S S S	old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Oues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Ourrent year Carryover from last year	'No," OF	2 3 (5), or se R (b) Par	ection	
in the second se	old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Oues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Ourrent year Carryover from last year fotal	'No," OF	2 3 (5), or se R (b) Par	ection	
E S S S S S S S S S S S S S S S S S S S	old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Oues, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Ourrent year Carryover from last year fotal aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	'No," OF	2 3 (5), or se R (b) Par	ection	
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(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Part I Organization Sequence		POPULATION CONNECT		94-1703155
Total number at end of year Aggregate contributions to (drung year) Aggregate contributions to (drung year) Aggregate contributions to (drung year) Aggregate yalue at end of year She yea	Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the
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a Revenues included in Form 990, Part VIII, line 1	2	- · · · · · · · · · · · · · · · · · · ·		n, provide
			16 (ASC 958) relating to these items	
b Assets included in Form 990, Part X				S
	b	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

		ION CONNEC			_			0315		age 2
Pa	rt III Organizations Maintaining C	ollections of A	t, Historical Tr	easures, o	r Othe	r Simila	r Asse	ts (contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that	are a sig	gnificant u	se of its	collection	ıtem	S
	(check all that apply)									
а	Public exhibition	d	Loan or exc	hange prograi	ms					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organizatio	n's exen	npt purpos	se in Par	t XIII		
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	sures, or othe	r sımılar	assets				
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's co	ollection?				Yes		No
Pa	rt IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "	Yes" to F	orm 990,	Part IV, I	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21								
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other ass	ets not i	ncluded				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table							
		•	•					Amount		
С	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	217					Yes		No
	If "Yes," explain the arrangement in Part XIII			provided in P	art XIII					j
	rt V Endowment Funds. Complete)				
		(a) Current year	(b) Prior year	(c) Two years		d) Three ye	ars back	(e) Four	vears	back
1a	Beginning of year balance	1,000.	1,000.		.000.		1,000.			000.
b	Contributions				, , , , ,					
c	Net investment earnings, gains, and losses					-				
q	Grants or scholarships							-	_	
e	Other expenditures for facilities									
·	and programs									
-	Administrative expenses									
g	End of year balance	1,000.	1.000.	1	.000		1.000.		1	000.
2	Provide the estimated percentage of the curr				,000.1		1,000.			000.
a	Board designated or quasi-endowment	one your one balance	%	,,, 11010 00						
b	Permanent endowment ► 100.00	%								
	Temporarily restricted endowment	%								
·	The percentages in lines 2a, 2b, and 2c shou									
32	Are there endowment funds not in the posse		ation that are held a	nd administer	ed for th	e organiza	ition			
Ja	by	ocion of the organiza	anon mar are riola a	na darimiotor	00 101 111	o organiza		Г	Yes	No
	(i) unrelated organizations							3a(i)	163	X
	(ii) related organizations							3a(II)		X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R2					3b		
4	Describe in Part XIII the intended uses of the							[SD]		
,	rt VI Land, Buildings, and Equipm		Willett lunus					_		—
	Complete if the organization answered		Part IV line 11a S	ee Form 990	Part X II	ne 10				
	Description of property	(a) Cost or o				cumulated		(d) Book		
	Description of property	basis (investr	, , ,	(other)		reciation	'	(a) boor	value	3
	Land	2433 (11143411	Justs	(04101)	geb		-	·		
	Land									
b	Buildings		12	6 126		36 43	- -			
C	Leasehold improvements			6,436.	<u>_</u>	36,43		E /		0.
d	Equipment			2,134.	1	53,09			0,6	
	Other Add lines 1a through 1e (Column (d) must e	must Form DCC Dist		4,016.		<u>15,03</u>	4.	_	3 <u>,9</u>	
	i eciciones la minuno Le li Allimo la must e	oose com 990 PSM	A COMMENT DELLINA 1	1.117.1				~ ,		· O .

Schedule D (Form 990) 2013

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GIFT ANNUITY LIABILITY	313,343.
(3) DEFERRED RENT	40,693.
(4)	
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 354,036.

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

Schedule D (Form 990) 2013

Sche	dule D (Form 990) 2013 POPULATION CONNECTION		94-	1703155	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per P	leturn) .	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a				
1	Total revenue, gains, and other support per audited financial statements		1	5,916	,168.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a 11,420.]		
b	Donated services and use of facilities	2ь 266,800.]		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d 5,297.	1		
e	Add lines 2a through 2d		2e	283	,517.
3	Subtract line 2e from line 1		3	5,632	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b		4c		0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	5,632	
	t XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per	, - , ,		, 0321
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a				
_	Total expenses and losses per audited financial statements		1	4,611	726
1	Amounts included on line 1 but not on Form 990, Part IX, line 25		 	4,011	120.
2		2a 266,800.			
a	Donated services and use of facilities		1		
b	Prior year adjustments	2b	1		
C	Other losses	2c 5,297.	1		
đ	Other (Describe in Part XIII)	2d 5,297.	ا ۔ ا	272	007
e	Add lines 2a through 2d		2e	4,339	<u>, 097.</u>
3	Subtract line 2e from line 1		3	4,335	,023.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	4-			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1		
b	Other (Describe in Part XIII)	4b			^
	Add lines 4a and 4b		4c	4,339	629
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) † XIII Supplemental Information.		5	4,333	,023.
		IV lines the and the Doubly lines	4. Doort	V los 0 Dort 1	
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part		4, Part	A, line 2, Part	ΛI,
lines	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any add	itional information			
D 7.	om tr time 4.				
PA.	RT V, LINE 4:				
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<u>ea.</u>	PLANATION: PERMANENTED RESTRICTED NET ASSE	15 KEPKESENI INE	رظ للا ا	3 CORSA	
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Part XIII Supplemental Information (continued)
RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS.
THE FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS
SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR
THREE YEARS AFTER IT IS FILED.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
COST OF GOODS SOLD INCLUDED AS AN EXPENSE ON FINANCIAL 5,297.
STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990, PART VIII, LINE 10C.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
COST OF GOODS SOLD INCLUDED AS AN EXPENSE ON FINANCIAL 5,297.
STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990, PART VIII, LINE 10C.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Open To Public Inspection

Name of the organization	about Schedule G (Form 990 or 990-EZ)	and its	instru	ctions is at WWW.IFS.		entification number
· ·	OTON CONNECTION				94-1703	
	FION CONNECTION 5. Complete if the organization answert	ered "Y	es" to	Form 990, Part IV, I		
Indicate whether the organization rail X Mail solicitations X Internet and email solicitation C X Phone solicitations d In-person solicitations 2 a Did the organization have a written	e X Solicita s f Solicita g Special or oral agreement with any individual Part VII) or entity in connection with p	tion of tion of I fundra I (inclui profess	non g gover alsing ding o lional f	overnment grants nment grants events fficers, directors, trui undraising services?	stees or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iII) fundr have c or con contrib	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
AAL WARWICK ASSOCIATES - 2550		Yes	No			
NINTH ST. STE #103, BERKELEY	DIRECT MAIL		Х	1,334,956.	166,984.	1,167,972.
PUBLIC INTEREST						
COMMUNICATIONS, INC 7700	TELEMARKETING	-	Χ	22,332.	38,184.	-15,852.
Total			•	1,357,288,	205,168.	1,152,120.
3 List all states in which the organization or licensing AL, AK, AR, AZ, CA, CO, CT, OH, OK, OR, PA, RI, SC, TN,	FL,GA,HI,IL,KS,KY,			<u> </u>		egistration
					·	
						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2013

332081 09-12-13

Gevent type			le G (Form 990 or 990-EZ) 2013 POPULAT				-1703155 Page 2
(d) Total events (do Cori (a) through (event type) (event type) (total number) (add cori (a) through cori (e)) 2 Less Contributions 3 Gross receipts 2 Less Contributions 3 Gross receipts 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expense summary Subtract line 10 from line 9, column (d) 1 Net income summary Subtract line 10 from line 9, column (d) 1 Gross revenue 2 Cash prizes 4 Rent/facility costs 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expense summary Subtract line 10 from line 9, column (d) 1 Gross revenue 2 Cash prizes 4 Rent/facility costs 5 Other direct expenses summary Add lines 4 through 9 in column (d) 1 Gross revenue 2 Cash prizes 5 Other direct expenses summary Add lines 4 through 5 in column (d) 1 Gross revenue 3 Noncash prizes 5 Other direct expenses 6 Volunteer labor 7 Direct expenses summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization operates gaming activities 1 is the organization licensed to operate gaming activities in each of these states? 9 Enter the state(s) in which the organization operates gaming activities in each of these states? 10 Were any of the organization is gaming licenses revoked, suspended or terminated during the tax year? 10 Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	Ра	irt i		-			
(event type) (event type) (total number) Committee			or idital and gr	r			(d) Total events (add col (a) through
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5 Other direct expenses Yes	ᇙ	4	Rent/facility costs				
Yes	_	5	Other direct expenses				
8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain	-			<u> </u>			
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b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain				_		· · · · · · · · · · · · · · · · · · ·	
b If "Yes," explain							Yes No
332082 09-12-13 Schedule G (Form 990 or 990-EZ) 2						year?	Yes No
Schedule G (Form 990 or 990-EZ) 2		_		 			
32082 09-12-13 Schedule G (Form 990 or 990-EZ) 2		_		·		· · · - · · · · · · · · · · · · · · · ·	
	3208	32 09	9-12-13			Schedule G (Fo	rm 990 or 990-EZ) 201

Schedule G (Form 990 or 990 EZ) 2013 POPULATION CONNECTION	<u> 4-170315</u> 5	Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	□ No
13 Indicate the percentage of gaming activity operated in		
a The organization's facility	13a	%
b An outside facility	13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records	<u> </u>	
Name ►		
Address ▶		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount	nt	
of gaming revenue retained by the third party 🕨 \$		
c If "Yes," enter name and address of the third party		
Name		·-·.
Address >		
16 Gaming manager information		
Name ▶		
Gaming manager compensation ▶ \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	Yes	∟ No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in organization's own exempt activities during the tax year \$	tne	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Pa	rt III lines 9 9h 16)h 15h
15c, 16, and 17b, as applicable Also complete this part to provide any additional information (see instruction		
COMEDINE C. DADM T. LINE OD LICH OF MEN HICHER DAID FINIDAT	anna.	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAI	SEKS:	
(I) NAME OF FUNDRAISER: MAL WARWICK ASSOCIATES		
(I) ADDRESS OF FUNDRAISER: 2550 NINTH ST. STE #103, BERKELEY,	CA 9471	0
	<u> </u>	
(I) NAME OF FUNDRAISER: PUBLIC INTEREST COMMUNICATIONS, INC.		
(I) ADDRESS OF FUNDRAISER:		
7700 LEESBURG PIKE NORTH #301, FALLS CHURCH, VA 22043		
332083 09-12-13 Schedule G	(Form 990 or 990	-EZ) 2013

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs gov/form990

OMB No 1545-0047

Inspection

Open to Public

Employer identification number å 0 94-1703155 GRASSROOTS ADVOCACY & (h) Purpose of grant or assistance SOVERNMENT RELATIONS X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant 100,000, Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 501(C)(4) Enter total number of other organizations listed in the line 1 table POPULATION CONNECTION 46-3083014 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization POPULATION CONNECTION ACTION FUND or government WASHINGTON, DC 20037 Name of the organization 2120 L STREET, NW Part I Part II

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

(f) Description of non-cash assistance 94-1703155 (e) Method of valuation (book, FMV, appraisal, other) 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 ACTION FUND, AND ITS RECORD KEEPING IS MAINTAINED BY POPULATION CONNECTION EXPLANATION: POPULATION CONNECTION GAVE A GRANT TO A RELATED ORGANIZATION Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information STAFF. THEREFORE, MONITORING OF THE GRANT IS DONE ON A CONTINUOUS BASIS. POPULATION CONNECTION ACTION FUND. POPULATION CONNECTION CONTROLS THE (d) Amount of non cash assistance (c) Amount of cash grant (b) Number of recipients POPULATION CONNECTION (a) Type of grant or assistance Schedule I (Form 990) (2013) 7 LINE PART I Part IV Part III

Page 2

Schedule I (Form 990) (2013)

. SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, a

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

Complete if the organization answered "Yes" on 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.

2013

Open to Public Inspection

Name of the organization

POPULATION CONNECTION

Employer identification number 94-1703155

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990),		
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			1
	First class or charter travel Housing allowance or residence for personal	use		
	Travel for companions Payments for business use of personal residents.	ence		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization	n's		
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization	to		ĺ
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations	mittee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			İ
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		ŀ	
	contingent on the revenues of		ı	
а	The organization?	5a	L.	X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		.	
	contingent on the net earnings of		1 1	
а	The organization?	6a		X
b	Any related organization?	6b		_X_
	If "Yes" to line 6a or 6b, describe in Part III		, T	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		_X_
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	ınıtıal contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (Forn	n 990)	2013

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Schedule J (Form 990) 2013

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

								•
		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	ple	(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base compensation	(II) Bonus & Incentive compensation	(iii) Other reportable compensation	compensation		(a)-(i)(a)	reported as deletred in prior Form 990
(1) JOHN SEAGER	Ξ	139,963.	0	0	7,639.	6,742.	154,344.	
PRESIDENT & CEO	<u> </u>	0	0	0	0	0.	0	0
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Schedule J (Form 990) 2013

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Schedule J (Form 990) 2013

. SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Name of the organization

Employer identification number

		POPULATION C	ONNECT	TON			94-1	<u>. 703</u>	<u>133</u>	
Pa	rt I	Types of Property			ı 					
			(a) Check if applicable	(b) Number of contributions or litems contributed	(c) Noncash contri amounts repor Form 990, Part VI	ted on	(d) Method of de noncash contribu	etermir	_	s
1	Art -	Works of art		Nome commence	101111 000, 1 011 11	, <u>.</u>				
2	Art -	Historical treasures								
3		Fractional interests			-	- ··				
4	Book	ks and publications				-				
5		ning and household goods								
6		and other vehicles								
7		s and planes								
8		ectual property	-			•				
9		urities - Publicly traded	X	15	34,	023.	FMV			
10		urities - Closely held stock								
11		urities - Partnership, LLC, or								
		interests								
12	Secu	ırıtıes · Miscellaneous								
13	Qual	ified conservation contribution -								
	Histo	oric structures								
14	Qual	ified conservation contribution - Other								
15	Real	estate - Residential								
16	Real	estate - Commercial								
17	Real	estate - Other					-			
18	Colle	ectibles								
19	Food	Inventory								
20		s and medical supplies								
21	Taxio	dermy							-	
22	Histo	orical artifacts								
23	Scie	ntific specimens								
24	Arch	eological artifacts								
25	Othe	er 🕨 ()								
26	Othe	r > ()				•				
27	Othe	er > (
28	Othe	er > (
29	Num	ber of Forms 8283 received by the organi	zation during	g the tax year for c	ontributions					
	for w	hich the organization completed Form 82	83, Part IV, I	Donee Acknowledg	gement	29			0	
									Yes	No
30a	Durir	ng the year, did the organization receive b	y contributio	n any property rep	orted in Part I, line	es 1 - 28, t	hat it must hold for			_
	at lea	ast three years from the date of the initial o	contribution	, and which is not i	required to be use	d for exen	npt purposes for			
	the e	entire holding period?						30a		X
b	If "Ye	es," describe the arrangement in Part II								
31	Does	the organization have a gift acceptance	policy that re	equires the review	of any non-standa	rd contrib	utions?	31		X
32a	Does	the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sel	l noncash				
		ributions?						32a	-	X
b	If "Ye	es," describe in Part II								
33	If the	organization did not report an amount in	column (c) f	or a type of proper	ty for which colum	nn (a) is ch	ecked,			I
	desc	ribe in Part II								<u></u>
LHA	Fo	r Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.		Schedule M	(Form	990) (2013)

332141 09-03-13

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Part II	Supple is reporting	mental Ir	nformation. (column (b), the tional information	Provide the inform number of contrib	nation required putions, the nu	by Part I, lines 3 mber of items re	30b, 32b, and 33, ceived, or a comb	and whether the opination of both. A	organization also complete
SCHED	ULE M,	PART	I, COLUM	IN (B):					
EXPLA	NATION	: THIS	COLUMN	REPRESEN	TS THE 1	NUMBER OF	F CONTRIB	UTORS.	
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332142 09-03	3-13							Schedule M	(Form 990) (2013

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2013
Open to Public Inspection

Name of the organization

POPULATION CONNECTION

Employer identification number 94-1703155

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: BY EARTH'S RESOURCES. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: IN JUNE, WITH NEARLY 60 PARTICIPANTS. LETTERS TO THE EDITOR WERE PUBLISHED IN THE NEW YORK TIMES AND TIME; JOHN SEAGER WAS QUOTED IN STORIES IN BLOOMBERG NEWS, GRIST, AND THE INTERNATIONAL BUSINESS TIMES; AND SEVERAL ONLINE VENUES FEATURED HIS COLUMNS. - AS OF OCTOBER 2013, WE HAD 44,139 FOLLOWERS ON FACEBOOK AND 2,042 FOLLOWERS ON TWITTER. STARTED CONNECTIONS NEWSLETTER, AS WELL AS A BLOG ON WWW.POPULATIONCONNECTION.ORG. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: THE NEW EDITION OF THE ELEMENTARY CURRICULUM, "COUNTING ON PEOPLE: K-5 ACTIVITIES FOR GLOBAL CITIZENSHIP" WAS RELEASED AND INCORPORATED INTO WORKSHOPS. - RELEASED "TEACHING POPULATION: HANDS-ON ACTIVITIES", A "BEST OF" CD OF TEACHING ACTIVITIES GEARED TO ALL GRADE LEVELS. - DEVELOPED AND UNVEILED NEW POP-ED WEBSITE. WWW.POPULATIONEDUCATION.ORG, WHICH INCLUDES A BLOG, EDUCATIONAL STANDARDS, AND SAMPLE ACTIVITIES. - JUDGED THE 2ND ANNUAL VIDEO CONTEST FOR STUDENTS, COVERING THE TOPICS OF WILDLIFE HABITAT, FOOD SECURITY, STATUS OF GIRLS AND WOMEN. - COMPLETED THE $2011 ext{--}2012$ BIANNUAL EVALUATION OF POPULATION EDUCATION,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization **Employer identification number** POPULATION CONNECTION 94-1703155 WITH 97% OF POPULATION EDUCATION WORKSHOP ATTENDEES RATING THE TEACHING MATERIALS AS "EXCELLENT" OR "GOOD." FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: GOVERNMENT RELATIONS - TO INFORM CONGRESS AND THE ADMINISTRATION ABOUT POPULATION ISSUES AND TO ADVOCATE THE ADOPTION OF MEASURES TO MOVE THE UNITED STATES AND THE WORLD TOWARDS STABILIZING POPULATION; TO INFLUENCE POPULATION-RELATED LEGISLATION; TO MOBILIZE MEMBERS TO TAKE ACTION ON PENDING LEGISLATION. EXPENSES \$ 475,134. INCLUDING GRANTS OF \$ 50,000. REVENUE \$ 0. FIELD AND OUTREACH - TO ASSIST THE POPULATION CONNECTION ACTIVISTS NATIONWIDE IN BUILDING AND SUSTAINING STATE AND LOCAL EDUCATIONAL, MEDIA AND LOBBYING EFFORTS ON BEHALF OF POPULATION CONNECTION THROUGH ORGANIZING AND PROVIDING TRAINING, TECHNICAL ASSISTANCE AND FUNDING. REPRESENT POPULATION CONNECTION IN COALITIONS FOCUSED ON GRASSROOTS ACTION AND AT PUBLIC PRESENTATIONS AND EXHIBITIONS AS NEEDED. 2013 HIGHLIGHTS INCLUDE: - HOSTED SEVERAL EVENTS AT SEATTLE UNIVERSITY, INCLUDING A SHOWING OF THE DOCUMENTARY, MOTHER: CARING FOR 7 BILLION. - SCREENED "12TH AND DELAWARE" AT OHIO STATE IN PARTNERSHIP WITH THE GLOBAL HEALTH INITIATIVE, AS WELL AS HOSTING OTHER PRESENTATIONS FOR THE GROUP. - OVER 100 ACTIVISTS ATTENDED CAPITOL HILL DAYS IN APRIL, VISITING NEARLY 80 LEGISLATIVE OFFICES. JON O'BRIEN, PRESIDENT OF CATHOLICS FOR CHOICE GAVE THE KEYNOTE ADDRESS.

40

EXPENSES \$ 396,194. INCLUDING GRANTS OF \$ 50,000.

2012 04010 DODITI APTONI CONNIDCRITONI

REVENUE \$ 0.

Employer identification number 94-1703155

FORM 990, PART VI, SECTION A, LINE 4:

EXPLANATION: ON FEBRUARY 23RD, 2013 THE BYLAWS WERE AMENDED TO MAKE CHANGES OR ADD: 1) ACTION VIA EMAIL; 2) EMERGENCY POWERS; 3) ROLE OF THE EX OFFICIO CHAIR; 4) ALIGNED DIRECTOR AND OFFICER NOMINATION AND ELECTION PROCESS; 5) CLARIFICATION OF PARTIAL TERM ELECTIONS; 6) RESIGNATION/REMOVAL LANGUAGE; 7) EXECUTIVE COMMITTEE RESPONSIBILITIES; AND 8) RETAINING THE CONFLICT OF INTEREST SECTION (UPDATED AS OF THE OCTOBER 2012 BOARD MEETING), WITH A NEW CONFLICT OF INTEREST TO BE SIGNED BY ALL DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE PRESIDENT AND BOARD MEMBERS. A COPY OF THE FINAL 990 WAS GIVEN TO THE ENTIRE BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: POPULATION CONNECTION MONITORS AND ENFORCES COMPLIANCE OF A
WRITTEN CONFLICT OF INTEREST POLICY WITH ITS BOARD OF DIRECTORS AND STAFF
MEMBERS. DIRECTORS AND STAFF ARE REQUIRED TO PERIODICALLY DISCLOSE
CONFLICTS, SHOULD THEY ARISE.

IF A CONFLICT ARISES, IT IS BROUGHT IMMEDIATELY TO THE ATTENTION OF BOTH

THE CHAIR AND THE PRESIDENT. IF THE BOARD IS TO TAKE ACTION IN SUCH A

SITUATION, THE PERSON HAVING A CONFLICT DOES NOT PARTICIPATE IN THE FINAL

DELIBERATION OR DECISION REGARDING THE MATTER UNDER CONSIDERATION AND,

AFTER PROVIDING ALL RELEVANT INFORMATION REGARDING THE MATTER, RETIRES FROM

THE PROCEEDINGS AND ROOM IN WHICH THE BOARD IS MEETING AND DOES NOT

PARTICIPATE IN THE VOTE.

Schedule O (Form 990 or 990-EZ) (2013)

10101

SCHEDULE R (Form 990)

Name of the organization

Part 1

POPULATION CONNECTION

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

► See separate instructions.

2013 Open to Public	•	ı	•
	•	2013	<u>6</u>

Inspection

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

Employer identification number 94-1703155

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2013 ŝ entity? Direct controlling Yes × entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year Direct controlling entity POPULATION CONNECTION End-of-year assets **e** status (if section Public charity 501(c)(3)) Total income Exempt Code ত্ত section DISTRICT OF COLUMBIA 501(C)(4) Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) STABILIZE WORLD POPULATION SUSTAINABLE BY EARTH'S Primary activity Primary activity RESOURCES Name, address, and EIN (if applicable) POPULATION CONNECTION ACTION FUND -46-3083014, 2120 L STREET NW, #500 Name, address, and EIN of related organization of disregarded entity WASHINGTON, DC 20037 Part II

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

332161 09-12-13 LHA

43

94-1703155

Page 2

Schedule R (Form 990) 2013 POPULATION CONNECTION

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year

		Ž.	1						;	ļ;	,
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	Predomina (related, i excluded fro	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(1) Code V.UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing e partner? 5) Yes No	(J) (k) General or Percentage managing ownership.
								1.			
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year	ganizations Taxable a	is a Corport	oration or Trust Col year	mplete if the	e organization	answered "Yes	" on Form 990	Part IV, line 34	because it had	one or mo	re related
(a) Name, address, and EIN of related organization	Z c	Prim	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(f) Share of total income	(g) Share of Pend-of-year cassets	(h) Percentage ownership	Section 512(b)(13) controlled entity?
				:							
332162 09-12-13		:		44					Schedu	le R (Forr	Schedule R (Form 990) 2013

Page 3

Schedule R (Form 990) 2013 POPULATION CONNECTION

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

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						(9)
						(5)
			BOOK VALUE	12,490.	a	(4) POPULATION CONNECTION ACTION FUND
	ŀ		BOOK VALUE	28,926.	0	(3) POPULATION CONNECTION ACTION FUND
			BOOK VALUE	60,082.BOOK	Ω	(2) POPULATION CONNECTION ACTION FUND
			100,000.BOOK VALUE	100,000.	Д	(1) POPULATION CONNECTION ACTION FUND
		lved	Method of determining amount involved	Amount involved	Transaction type (a-s)	Name of related organization
				3	3	(2)
}			relationships and transaction thresholds	this line, including covered	who must complete	
×		15				s Other transfer of cash or property from related organization(s)
: :						
	×	19				
×		ç				 Beimbursement paid to related organization(s) for expenses
	×	10				o Sharing of paid employees with related organization(s)
×		1n			tion(s)	
×		Ξ.	•		anization(s)	m Performance of services or membership or fundraising solicitations by related organization(s)
×		Ŧ	•		anization(s)	
		¥				k Lease of facilities, equipment, or other assets from related organization(s)
×		1				J Lease of facilities, equipment, or other assets to related organization(s)
×		1-				 Exchange of assets with related organization(s)
×		1h				h Purchase of assets from related organization(s)
×		19				g Sale of assets to related organization(s)
×		1f				f Dividends from related organization(s)
×		1e				e Loans or loan guarantees by related organization(s)
	×	14	•			d Loans or loan guarantees to or for related organization(s)
×		10	•			c Gift, grant, or capital contribution from related organization(s)
	×	1p	,			 b Gift, grant, or capital contribution to related organization(s)
×		1a				a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
			in Parts II:1V?	related organizations listed	ns with one or more	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
8	Yes					Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Page 4

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

(a)	(a)	(5)	(a) (b)	9	(0)	3	(i)	3	(k)
Name, address, and EIN of entity	Primary activity	eg G	Predominant income partiers sec (related, unrelated, 501(c)(3) excluded from 13x	<u>ν</u>	of 'ear	Dispropor- tionate allocations?	Disploor- Code V-UBI General or Percentage Initial amount in box 20 managing ownership	General or managing partner?	Percentage ownership
		country)	under section 512-514) Yes	lucome	assets	Yes No	(Form 1065)	Yes No	
								1	
		•				_			
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			-						
						_			
		-							
]			

Schedule R (Form 990) 2013

chedule R (Form 990) 2013 POPULATION CONNECTION	<u>94-1703155_Page 5</u>
Part VII Supplemental Information	
Provide additional information for responses to questions on Schedule R (see instructions)	
	
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