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DLN: 93493353000194

Form **990** 

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		<b>2013 ca i</b> pplicable	C Name of organization	7-01-2013 , 2013, and ending 06	-30-2014	D Employ	er iden	tification number
	ress ch	• •	Law School Admission Council Inc			13-29	98164	
Nar	me cha	nge	Doing Business As					
_ Init	ıal retu	ırn	`	s not delivered to street address) Room,	/suite	E Telepho	ne numb	per
Ter	mınate	ed .	662 Penn Street Suite			(215)		
Am	ended	return	City or town, state or province, country Newtown, PA 18940	, and ZIP or foreign postal code		(213)	<del>500 I</del>	
Apr	olication	n pending	newtown, 111 20510			<b>G</b> Gross re	eceipts \$	72,464,641
			F Name and address of princip DANIEL O BERNSTINE	oal officer	H(a)	Is this a group	return	for
			662 PENN STREET			subordinates?		ΓYes <b>Γ</b> No
			NEWTOWN,PA 189402600		H(b)	Are all subordin	nates	┌ Yes ┌ No
<b>T</b> Ta	x-exem	npt status	▼ 501(c)(3)	rt no )	$\dashv$	included? If "No." attach	alıst (	(see instructions)
		<u> </u>	w Isac org	1517(4)(1) 61 7 527	Η			
				•	H(c)			
	n of org <b>rt I</b>		Corporation Trust Association mary	Other ►	L Ye	ar of formation 197	79 <b>M</b> :	State of legal domicile PA
Га			escribe the organization's mission o	ar most significant activities				
		,	AS FORMED TO CONSTRUCT, AD	_	RESFOR	RADMISSIONT	O LAW	SCHOOLS,
			<u>CT EDUCATIONAL RESEARCH, A</u>					
క								
≅	Ι.							
Ē.	Ι.							
Governance	2 (	Check tl	nis box 🛏 if the organization disco	ntinued its operations or dispose	d of more	than 25% of its	net ass	sets
						ı	_ 1	
Activities &	l		of voting members of the governing			-	3	20
Ě	l		of independent voting members of t				4	19
<u>₹</u>	l		mber of individuals employed in cal-			ŀ	5	315
Q,	l		mber of volunteers (estimate if nece			1	6 7a	150
	l		related business revenue from Part lated business taxable income fron				7a 7b	46,173
	В	ivet uiiie	Tated business taxable income non	1 Form 9 90-1, line 34	<del></del>	Prior Year	<b>/</b> B	Current Year
	8	Contri	butions and grants (Part VIII, line	1 h)		FIIOI Teal	0	0
₫	9				•	43,876,9		47,391,806
Revenue				service revenue (Part VIII, line 2g)				3,210,149
$\tilde{x}$	11		revenue (Part VIII, column (A), lin		·	19,585,8 7,315,0		6,917,101
	12		revenue—add lines 8 through 11 (m		ıne			
			<u> </u>			70,777,8		57,519,056
	13		s and sımılar amounts paıd (Part IX			1,561,6	-	1,355,761
	14		ts paid to or for members (Part IX,				0	0
83	15	Saları 5-10	es, other compensation, employee t	penefits (Part IX, column (A), line	s	32,280,3	94	33,879,793
Expenses	16a		sional fundraising fees (Part IX, co	lumn (A), line 11e)			0	0
훒	ь	Total fu	ndraısıng expenses (Part IX, column (D), lıı	ne 25) 🖦 0				
ш	17		expenses (Part IX, column (A), line		`.	26,277,2	69	25,236,898
	18	Total	expenses Add lines 13–17 (must e	equal Part IX, column (A), line 25	)	60,119,3	01	60,472,452
	19	Reven	ue less expenses Subtract line 18	from line 12		10,658,5	64	-2,953,396
\$ 8					Ве	ginning of Currer	nt	End of Year
Not Assets or Fund Balances	20	Total	accate (Part V. ling 16)		-	Year 214 208 2	30	
Ass 3Bs	20 21		assets (Part X, line 16) liabilities (Part X, line 26)		.	214,208,2	-	244,447,038
전 <u>분</u>	22		sets or fund balances Subtract line		·	191,874,0		214,600,430
			ature Block	21 Hom me 20	•	191,074,0	12	214,000,430
Unde my kı	r pena nowled	alties of dge and	perjury, I declare that I have exami belief, it is true, correct, and comple nowledge					
		1.				1		
		**** Sign:	** ature of officer			2013-11-15 Date		
Sign Here		'				Date		
1161	٠		EL O BERNSTINE PRESIDENT or print name and title					
		<u> </u>		Preparer's signature	Date	Check I If	PTIN	
Paid	4	F	RICHARD A SACKIN	- 		self-employed	P00184	276
	a pare		irm's name 🕨 EISNERAMPER LLP			Firm's EIN 🛏		
	,- ~. ·		rim's address ► 111 WOOD AVE SO STE 60			Phone no (215)		

ISELIN, NJ 088302700

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

✓ Yes ☐ No

Forn	n 990 (2013)					Page 2
Par		<b>it of Program Ser</b> nedule O contains a re		<b>plishments</b> to any line in this Part	III	٧
1	Briefly describe th	e organization's missio	on			
ADM					OTING INNOVATIVE ASS NAL PROGRAMS, DIVERSI	
	Did the organizatio	n undertake any signif	icant program s	ervices during the yea	r which were not listed on	
	the prior Form 990	or 990-EZ?				
3	•	n cease conducting, o		nt changes in how it co	onducts, any program	
	If "Yes," describe t	these changes on Sch	edule O			
4	expenses Section		(4) organizatior	ns are required to repor	ree largest program service t the amount of grants and a	
4a	(Code	) (Expenses \$	38,290,333	ıncludıng grants of \$	342,655 ) (Revenue \$	51,683,473 )
					CREDENTIAL ASSEMBLY SERVICE ( JCTED EDUCATIONAL RESEARCH F	
	(Code	) (Expenses \$	4,762,626	including grants of \$	) (Revenue \$	197,135 )
40	, HELD 10 NATIONAL LA	, , , , , ,	QUAINT STUDENTS	WITH THEIR LEGAL EDUCA	TION ALTERNATIVES HELD VARIOU	, ,
4c	(Code	) (Expenses \$	2,035,218	ıncludıng grants of \$	1,013,106 ) (Revenue \$	)
	CONDUCTED PROGRA	MS AND RESEARCH FOR TH	HE ADVANCEMENT	OF UNDERREPRESENTED IN	DIVIDUALS IN LEGAL EDUCATION	
	(Code OTHER PROGRAM SEF	) (Expenses \$	2,563,203	ıncludıng grants of \$	) (Revenue \$	1,763,522 )
4d	Other program se	rvices (Describe in Sc 2,563,203 ir	hedule O ) ncluding grants	of \$	) (Revenue \$	1,763,522)
	(EVACIOCO A	2,000,200 11	reruding grants	ν, ψ	/ (Nevenue p	-,, 00,022 /

47,651,380

Total program service expenses ▶

4e

Part IV	Checklist of	Required	<b>Schedules</b>

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	140
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I^{\bullet}$	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part $IV^{\square}$	9		No
LO	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 $\sqrt{2}$	10		No
L1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule $E$	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2$	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

аı	Chack of School of Contains a grantone or note to any line in the Bort V			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   854			
)	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
:	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
a	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			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		105	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		N
•	organization solicit any contributions that were not tax deductible as charitable contributions?			- 11
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	7-		N
	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		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	79		
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 49667	9a 9b		
	Section 501(c)(7) organizations. Enter	טפ		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
ı	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	İ	N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

<u>Se</u>	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	20			
	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	19			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?		members, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons ui	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	9		No			
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the Internal R	eveni	ıe Cod	e.)
					Yes	No
40-	Did the organization have local chapters, branches, or affiliates?			40-		
10a	Did the organization have local chapters, branches, or annuces			10a		No
	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization.	tıvıtıe	s of such chapters,	10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the act	tıvıtıe on's e	s of such chapters, xempt purposes?		Yes	No
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it	tivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing 	10b	Yes	No .
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?	tivitie on's e s gov  Form 9	s of such chapters, xempt purposes? erning body before filing	10b		No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov  Form 9  ly inte	s of such chapters, exempt purposes? erning body before filing ended by the series of	10b 11a 12a	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with	tivitie on's e s gov form s ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes	No .
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FDID the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	tivitie on's e s gov Form S ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?	tivitie on's ess gov	s of such chapters, exempt purposes? erning body before filing 990 erests that could give olicy? If "Yes," describe	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a b c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a rev	tivitie on's e s gov form 9 ly inte the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the	tivitie on's e s gov  Form 9  ly inte  the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	tivitie on's e s gov  Form 9  ly inte  the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov  form 9  ly inte the p  iew ari e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov  form 9  ly inte the p  lew arise deli  rise deli  rise tep	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.  Other officers or key employees of the organization.  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organ participation in joint venture arrangements under applicable federal tax law, and take	tivitie on's e s gov  form 9  ly inte the p  lew arise deli  rise deli  rise tep	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the forganization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	tivitie on's e s gov  form 9  ly inte the p  lew arise deli  rise deli  rise tep	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's ess gov  Form S  ly inte  the p  iew arise deli  izatione step  a), 99  neck a	s of such chapters, exempt purposes? erning body before filing erests that could give olicy? If "Yes," describe and approval by beration and decision? ular arrangement with a to evaluate its is to safeguard the 0, and 990-T (501(c) ill that apply	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	

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

interest policy, and financial statements available to the public during the tax year

►MARJORIE LARUE BRITT 662 PENN STREET NEWTOWN,PA 18940 (215)968-1298

### Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

Organizations   Decomposition   Decompositio	(A) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot rect	not box h ar or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
TRUSTEE		organizations below	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organızatıon and related	
TRUSTEE	(1) JANICE L AUSTIN	1 5	×						690	0		
X									090	Ü		
1		37 5	x		х				625,138		32,225	
TRUSTEE		1 5	<u> </u>				-					
(4) IAN HOLLOWAY		1 2	х						1,060			
FINANCE & LEGAL AFFAIRS CHAIR (5) CAROLYN C JONES  1 5		1 5	Ţ,,									
TRUSTEE	FINANCE & LEGAL AFFAIRS CHAIR		×									
TRUSTEE (6) SUSAN L KRINSKY 15 X 1,069  TEST DEVELOP & RESEARCH CHAIR (7) CHRISTOPHER M PIETRUSZKIEWICZ 15 X  INVESTMENT COMMITTEE CHAIR (8) RICHARD L SCHMALBECK 15 X  TRUSTEE (9) MICHAEL J STATES 15 X  TRUSTEE (10) ATHORNIA STEELE 15 X  BOARD CHAIR (11) CHRISTINA B WHITMAN 15 X  AUDIT COMMITTEE CHAIR (12) STEVEN L WILLIBORN 15 X  TRUSTEE (14) R LAWRENCE DESSEM 15 X  TRUSTEE (15) MICHAEL A JOHNSON 15 X  TRUSTEE (16) CYNTHIA R MABRY 15 X  TRUSTEE (17) ARTHUR R PINTO 15 X  1,777		1 5										
1	TRUSTEE		X									
TEST DEVELOP & RESEARCH CHAIR   X		1 5										
TRUSTEE	TEST DEVELOP & DESEABLEH CHAID		Х						1,069			
NVESTMENT COMMITTEE CHAIR   X		1.5										
(8) RICHARD L SCHMALBECK	INVESTMENT COMMITTEE CHAID		Х									
TRUSTEE (9) MICHAEL J STATES 1 5		1 5	-									
1			х									
TRUSTEE  (10) ATHORNIA STEELE  (10) ATHORNIA STEELE  (11) CHRISTINA B WHITMAN  (11) CHRISTINA B WHITMAN  AUDIT COMMITTEE CHAIR  (12) STEVEN L WILLBORN  PAST CHAIR  (13) REYES AGUILAR  15		1.5										
TRUSTEE   To the content of the co			х									
BOARD CHAIR		1.5										
1   CHRISTINA B WHITMAN		1.5	х						783			
AUDIT COMMITTEE CHAIR (12) STEVEN L WILLBORN  1 5		4.5			_	$\vdash$		$\vdash$				
TRUSTEE   TRUS		15	x						1,776			
PAST CHAIR		<u> </u>				_						
PAST CHAIR		15	×						4,389			
TRUSTEE (14) R LAWRENCE DESSEM 1 5		<u> </u>			_	_		_				
TRUSTEE (14) R LAWRENCE DESSEM 1 5	(13) REYES AGUILAR	15	x						o	0		
TRUSTEE  (15) MICHAEL A JOHNSON  1 5												
TRUSTEE  (15) MICHAEL A JOHNSON  1 5  X  TRUSTEE  (16) CYNTHIA R MABRY  DIVERSITY INITIATIVES CHAIR  (17) ARTHUR R PINTO  1 5  X  1,577	(14) R LAWRENCE DESSEM	1 5	×						677	0		
TRUSTEE (16) CYNTHIA R MABRY 1 5 X DIVERSITY INITIATIVES CHAIR (17) ARTHUR R PINTO 1 5 X 1,577												
TRUSTEE  (16) CYNTHIA R MABRY  1 5  X  DIVERSITY INITIATIVES CHAIR  (17) ARTHUR R PINTO  1 5  X  1,577	(15) MICHAEL A JOHNSON	1 5	l x									
DIVERSITY INITIATIVES CHAIR  (17) ARTHUR R PINTO  1 5  X  1,577												
DIVERSITY INITIATIVES CHAIR  (17) ARTHUR R PINTO  1 5  X 1,577	(16) CYNTHIA R MABRY	1 5	l <sub>x</sub>									
X       1,577												
TDISTEE   ^	(17) ARTHUR R PINTO	1 5	_						1 577			
INOSILE	TRUSTEE		L^_	<u> </u>		L_						

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers	than on is	one bot rect	note bo: thai or/ti	chec x, unle n offic rustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organization (W- 2/1099	on d is	Estim amount of compen from	ated of other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	-	organiz	lated
(18)	RENEE POST	1 5	×										
TRUS	TEE ROBERT L SOLOMON II	1.5				-	1				_		
` '		1 5	x										
(20)	ree Kristin Theis-Alvarez	1 5	1			+					-		
` '	ICES & PROGRAMS CHAIR		X										
	BRUCE M BACHMAN	37 5									_		
VP IN	FORMATION SERVICES, CIO				Х				332,737				23,994
(22)	IOAN E VAN TOL	37 5			х				289,261				36,881
	RAL COUNSEL				Ļ				203,201				30,001
(23)	MARJORIE LARUE BRITT	37 5			×				282,798				32,397
CFO (24)	PETER J PASHLEY	37 5				-					$\dashv$		
` '	CTOR TESTING & RESEARCH	]			×				284,372				23,929
	IAMES M VASELECK	37 5	1								$\dashv$		
SR D	R PBLC AFFRS/DEP GEN CNSL						×		256,048				30,887
(26)	KENT D LOLLIS	37 5					х		233,335				28,565
	IVERSITY INITIATIVES								255,555		_		20,303
(27)	FROY LOWRY	37 5					×		217,938				36,302
	OFTWARE SERVICES CAROL A ROMMEL	27.5									_		
		37 5					x		202,084				25,331
	DMIN SERVICES /IVIAN G BOWDEN	37 5	1										
	F EDUC & PRELAW PROGRAMS						×		192,329				26,182
1b	Sub-Total	<u> </u>		<u> </u>	<u> </u>	1	<u> </u>  ►-		<u> </u>				
	Total from continuation sheets to Par						►				+		
d	Total (add lines 1b and 1c)						▶		2,928,061		0		296,693
2	Total number of individuals (including \$100,000 of reportable compensation				ed a	bove	e) who	rec	eived more than		•		
												Yes	No
3	Did the organization list any <b>former</b> off on line 1a? <i>If "Yes," complete Schedule</i>									d employee	3		No
4	For any individual listed on line 1a, is to organization and related organizations individual									om the	4	Yes	
5	Did any person listed on line 1a receiv	e or accrue com	nencel	tion f	rom	anv	امرارا	later	d organization or u	ndividual for	4	res	
,	services rendered to the organization?										5		No
-54	ection B. Independent Contract	ors											
<del>`</del>	Complete this table for your five higher		ındana			+		+6-	+ was a a d mas wa th	#100 000	٠.		

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
FULBRIGHT JAWORSKI, 801 PENNSYLVANIA AVE NW WASHINGTON DC 20004	LAW FIRM	504,901
HARBOR PARTNERS LLC, 1055 WESTLAKES DR BERWYN PA 19312	IT CONSULTANTS	199,698
MISTI SOFTWARE GROUP, 22 SUSANNA WAY NEWTOWN PA 18940	IT CONSULTANTS	290,505

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►3

Part V	/ + + 1	Statement o						
		Check if Schedi	ule O contains a respo	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts Te	1a	Federated cam						312 314
	Ь	Membership du	ıes <b>1b</b>					
ş. Aπ	c	Fundraising ev	ents <b>1c</b>					
ar ar	d	Related organiz	zations 1d					
3, G	e	Government grant	s (contributions) <b>1e</b>					
iğ iz	f	All other contribution	ons, gifts, grants, and <b>1f</b>					
Program Service Revenue and and		sımılar amounts no	ot included above			ļ		
	g	Noncash contributi 1a-1f \$	ons included in lines					
	h	Total. Add line:	s 1 a - 1 f	🛌	0			
				Business Code				
eun	2a	LSAT		611710	23,802,526	23,802,526		
rwce Reve	b	CAS		611710	19,672,709	19,672,709		
	С	FOREIGN LLM		611710	1,983,770	1,983,770		
ž.	d	MPRE TEST ADMIN	NISTRATION	611710	1,648,075	1,648,075		
Program Serwice Revenue	e	FORUM AND WOR	KSHOP FEES	611710	197,135	197,135		
	f	All other progra	am service revenue		87,591	87,591		
š	g	Total. Add lines	s 2a-2f		47,391,806			
<u></u>	3	Investment inc	ome (including dividen	ds, interest,	422 272		10 140	414 124
	_		ar amounts) stment of tax-exempt bond		432,272		18,148	414,124
	4   5			proceeds	0			
		Royalties .	(ı) Real	(II) Personal				
	6a	Gross rents	975,731	(,				
	ь	Less rental	310,954					
	c	expenses Rental income	664,777	0				
	d	or (loss) Net rental inco	me or (loss)		664,777			664,777
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	16,541,349	673,009				
	ь	Less cost or	42.746.752	500 730				
		other basis and sales expenses	13,746,753	689,728				
	С	Gain or (loss)	2,794,596	-16,719	2 777 277		20.025	2 740 052
	d 8a		ss) from fundraising		2,777,877		28,025	2,749,852
evenue	Julia	events (not inc \$	luding s reported on line 1c)					
Other Revenue Program Service Revenue			а					
	b		penses b		0			
	C Qa		(loss) from fundraising from gaming activities	events 🛌	Ů			
	Ja		ne 19 a					
	Ь		penses b		0			
	10a				0			
			a	1,961,672				
	b		oods sold <b>b</b> (loss) from sales of inv	198,150	1,763,522	1,763,522		
	<u> </u>	Miscellaneous		entory <b>p</b> - Business Code	1,, 03,322	2,7 03,322		
	11a	LICENSING FE		611710	3,860,080	3,860,080		
	ь		N PROCESSING	611710	628,722	628,722		
		FEES						
	C							
	d		ue					
	е	Total. Add lines		• • • •	4,488,802			
	12	Total revenue.	See Instructions .	🕨	57,519,056	53,644,130	46,173	3,828,753

### Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations m	nust complete all columns	All other organizations must complete column (A)	Ī
· / · / · ·	•		_

	Check if Schedule O contains a response or note to any line in this				
	ot include amounts reported on lines 6b, p, 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	1,071,714	1,071,714		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	30,000	30,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	254,047	254,047		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,399,385	1,545,133	1,854,252	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	20,793,909	19,288,256	1,505,653	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,836,432	1,660,457	175,975	
9	Other employee benefits	6,280,072	4,040,904	2,239,168	
10	Payroll taxes	1,569,995	1,440,896	129,099	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	1,169,647	4,975	1,164,672	
c	Accounting	175,401		175,401	
d	Lobbying	37,000		37,000	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	418,128		418,128	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	175,249	139,660	35,589	
13	Office expenses	507,187	319,479	187,708	
14	Information technology	1,650,433	1,649,768		
15	Royalties	0	, ,		
16	Occupancy	3,011,101	1,408,469	1,602,632	
17	Travel	840,168	658,510	181,658	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	000,010	101,000	
19	Conferences, conventions, and meetings	3,075,843	3,074,754	1,089	
20	Interest	3,142	, , , , , ,	3,142	
21	Payments to affiliates	0		, -	
22	Depreciation, depletion, and amortization	1,944,132	1,017,250	926,882	
23	Insurance	355,690		355,690	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	TEST ADMINISTRATION	3,490,029	3,489,129	900	
b	FEE WAIVERS	3,174,223	3,174,223		
c	OTHER CONSULTANTS	1,656,181	1,580,732	75,449	
d	POSTAGE/SHIPPING	1,172,688	1,111,340	61,348	
e	All other expenses	2,380,656	691,684	1,688,972	
25	Total functional expenses. Add lines 1 through 24e	60,472,452	47,651,380	12,821,072	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Pa	rt X	Check if Schedule O contains a response or note to any line i	n this l	Part X				
					<b>(A)</b> Beginning of year		(B) End of year	
	1	Cash-non-interest-bearing			0	1	0	
	2	Savings and temporary cash investments			13,965,678	2	21,363,864	
	3	Pledges and grants receivable, net			0	3	0	
	4	Accounts receivable, net			757,331	4	1,402,453	
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete Schedule L	Part II	of	o	5	0	
इ	6	section $4958(f)(1)$ ), persons described in section $4958(c)(3$ employers and sponsoring organizations of section $501(c)(9$	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L					
Assets	7	Notes and loans receivable, net			0		0	
4	8	Inventories for sale or use			228,373		223,655	
	9	Prepaid expenses and deferred charges	<b>-</b>				1,209,481	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	53,966,048	1,250,942	9	1,200,401	
	Ь	Less accumulated depreciation	<del>                                     </del>				14,814,221	
	11	Investments—publicly traded securities	15,393,151 87,989,440		93,414,462			
	12	Investments—other securities See Part IV, line 11	94,520,785		111,944,894			
	13	Investments—program-related See Part IV, line 11			0		0	
	14	Intangible assets			0	14	0	
	15	Other assets See Part IV, line 11			102,538		74,008	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			214,208,238		244,447,038	
	17	Accounts payable and accrued expenses			4,818,938		12,204,969	
	18	Grants payable			0		0	
	19	Deferred revenue			4,422,174		3,053,317	
	20	Tax-exempt bond liabilities			0		0,000,017	
	21	Escrow or custodial account liability Complete Part IV of Sc			0		0	
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquared to the compensated employees.	ctors, t					
죭		persons Complete Part II of Schedule L			О	22	0	
	23	Secured mortgages and notes payable to unrelated third part	ies .		0	23	0	
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0	
	25	Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete F						
		D			13,093,114	25	14,588,322	
	26	Total liabilities. Add lines 17 through 25			22,334,226	26	29,846,608	
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.	✓ ar	d complete				
<u>8</u>	27	Unrestricted net assets			191,874,012	27	214,600,430	
ä	28	Temporarily restricted net assets			0	28	0	
Ξ	29	Permanently restricted net assets			0	29	0	
r Fu		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here 🕨	-				
2	30	Capital stock or trust principal, or current funds				30		
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31		
Ą	32	Retained earnings, endowment, accumulated income, or othe	r funds			32		
Net	33	Total net assets or fund balances			191,874,012	33	214,600,430	
_	34	Total liabilities and net assets/fund balances	<u>.</u> .	<u></u>	214,208,238	34	244,447,038	
							Form 000 (2012)	

Par	t XI Reconcilliation of Net Assets				age ==
	Check if Schedule O contains a response or note to any line in this Part XI				·
	Tabel assessed (north annal Dart WIII), asking a (A) king 42)				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		57,	519,056
2	Total expenses (must equal Part IX, column (A), line 25)	2		60 4	172,452
3	Revenue less expenses Subtract line 2 from line 1				
_		3		-2,9	53,396
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		191,8	374,012
5	Net unrealized gains (losses) on investments	5		25 6	524,123
6	Donated services and use of facilities			23,	72 1,123
_	<u>.                                    </u>	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
		9			55,691
10	10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))				500,430
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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As Filed Data -

DLN: 93493353000194

OMB No 1545-0047

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

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

2013

Open to Public Inspection

Name of the organization Law School Admission Council Inc Employer identification number

13-2998164

	rt I			blic Charity Sta						nstructions	<u>.                                    </u>
The o	rganı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	igh 11, check	only one b	ox)		
1	$\sqcap$	A chur	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in <b>s</b> e	ection 170(	b)(1)(A)(i).		
2	$\sqcap$	A scho	ol described	in <b>section 170(b)(1</b>	. <b>)(A)(ii).</b> (At	tach Schedı	ıle E)				
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descri	bed in <b>sectio</b>	n 170(b)(1)	(A)(iii).		
4	$\sqcap$	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in <b>se</b>	ction 170(b)(	1)(A)(iii). E	nter the
_	_			ty, and state							<del></del>
5	ı			erated for the benefi		or universit	ty owned or o	perated by	a governmen	tal unit desc	ribed in
_	_			A)(iv). (Complete P	•			4=4(1)4			
6	_			local government or	_						
7	ı	_		at normally receives on 170(b)(1)(A)(vi).		•	support from	a governme	ental unit or f	rom the gene	eral public
8	Г			described in <b>section</b>			nplete Part II	)			
9	Ī		•	at normally receives			-	-	outions, mem	bership fees	, and gross
		receipt	s from activ	ities related to its ex	xempt function	ons—subject	t to certain e:	xceptions, a	and (2) no mo	re than 331/	3% of
				oss investment inco							
		acquire	ed by the org	janization after June	30,1975 S	ee <b>section</b> 5	<b>509(a)(2).</b> (C	omplete Pa	rt III )		
10	Γ	An orga	anızatıon org	ganized and operated	dexclusively	to test for p	oublic safety	See <b>sectio</b>	n 509(a)(4).		
11	$\Gamma$	An orga	anızatıon org	ganized and operated	d exclusively	for the bene	efit of, to perf	orm the fun	ctions of, or t	o carry out t	he purposes of
				y supported organiz					. , . ,	ee <b>section 5</b>	<b>09(a)(3).</b> Check
				bes the type of supp <b>b</b> Type II <b>c</b>						on functions	lly integrated
_	_			ox, I certify that the			· -				, -
е	'			on managers and ot							
			509(a)(2)				,				( . ) ( . )
f			_	received a written de	etermination	from the IR:	S that it is a	Туре I, Тур	e II, or Type	III supporti	ng organizatio <u>n,</u>
			this box	2006, has the organi	zation accor	stad any gift	or contributi	on from any	of the		J
g			ng persons?	1000, nas the organi	ization accep	ited any gnt	or contributi	on nom any	or the		
			<b>.</b>	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons de	scribed in (ii)	)	Yes No
		and (111	) below, the	governing body of th	e supported	organızatıor	۱?			11g	(i)
		(ii) A fa	amıly memb	er of a person descr	bed in (i) abo	ove?				11g	(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g(	(iii)
h		Provide	the follown	ng information about	the supporte	ed organizati	ıon(s)				
•	) Nan		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you	•	(vi) Is		(vii) A mount of
	support e organizat			organization (described on	organızatı col (i) lıst		the organiz		organizat		monetary support
g				lines 1- 9 above	your gove		suppor	•	in the U		Jupport
				or IRC section	docume	nt?					
				(see							]
				instructions))	Yes	No	Yes	No	Yes	No	
Total											

Sch	edule A (Form 990 or 990-EZ) 2013						Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	( <b>b)</b> 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV )						
11	<b>Total support</b> (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and <b>stop here.</b> The organization qua <b>33</b> 1/3% <b>support test—2012.</b> If the				and line 15 is 33	8 1/3% or more	
	box and <b>stop here.</b> The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	<b>-2013.</b> If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	<b>-2012</b> . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	<b>▶</b> 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		<b>▶</b> □
18	<b>Private foundation.</b> If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) <b>▶</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 20	13	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do		0	0	0		0	0
	not include any "unusual grants ")							
2	Gross receipts from admissions,							
	merchandise sold or services							
	performed, or facilities furnished in any activity that is related to	53,842,143	46,571,081	45,718,684	45,879,062	49,	353,475	241,364,445
	the organization's tax-exempt							
	purpose							
3	Gross receipts from activities							0
	that are not an unrelated trade or business under section 513							0
4	Tax revenues levied for the							
	organization's benefit and either paid to or expended on its behalf							0
5	The value of services or facilities furnished by a governmental unit to the organization without							0
	charge							
6	Total. Add lines 1 through 5	53,842,143	46,571,081	45,718,684	45,879,062	49,	353,475	241,364,445
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons							0
b	A mounts included on lines 2 and							
	3 received from other than disqualified persons that exceed							
	the greater of \$5,000 or 1% of							0
	the amount on line 13 for the							
	year							0
8	Add lines 7a and 7b <b>Public support</b> (Subtract line 7c							
0	from line 6 )							241,364,445
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 20	13	(f) Total
9	Amounts from line 6	53,842,143	46,571,081	45,718,684	45,879,062	49,	353,475	241,364,445
.0a	Gross income from interest,	, ,	, ,	, ,	, ,			· · ·
	dividends, payments received							
	on securities loans, rents,	4,048,186	2,910,434	2,942,706	1,961,013	1,	408,003	13,270,342
	royalties and income from similar sources							
b	Unrelated business taxable							
	income (less section 511							0
	taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b	4,048,186	2,910,434	2,942,706	1,961,013	1,	408,003	13,270,342
11	Net income from unrelated							
	business activities not included							0
	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	4,452,894	5,371,100	5,123,555	4,918,016	4,	488,802	24,354,367
	capital assets (Explain in Part IV )							
13	<b>Total support.</b> (Add lines 9,	62,343,223	54,852,615	53,784,945	52,758,091	55	250,280	278,989,154
	10c, 11, and 12)		, ,	, ,	, ,		, i	
14	First five years. If the Form 990 is check this box and stop here	for the organizat	ion's first, second	l, third, fourth, or	fifth tax year as a	501(c)(3	3) organı	zation, ►
Se	ction C. Computation of Pub	olic Support P	ercentage					<u> </u>
15	Public support percentage for 201			13, column (f))		15		86 514 %
16	Public support percentage from 20					16		85 329 %
	ction D. Computation of Inv			ne		1 10		33 32 9 70
17	Investment income percentage for				ın (f))	17		4 757 %
18	Investment income percentage tro	III <b>ZUIZ</b> Schenne	A. Part III line 1	. /		1 10 '		E E C O 0/-
18 19a	Investment income percentage fro 33 1/3% support tests—2013. If the				line 15 is more t	18 han 33 1/3	0% and 1	5 568 %

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Facts And Circumstances Test

Explanation

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or

SCHEDULE A, PART III, LINE 12

Return Reference

INCLUDED ON FORM 990, PART VIII, LINE 7D IS \$2,777,877 OF NET GAIN FROM SALE OF SECURITIES, WHICH IS EXCLUDED FROM SCHEDULE A

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493353000194

### OMB No 1545-0047

### **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.

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

	me of the organization School Admission Council Inc			Employer ide	ntification number	
∟а₩				13-299816		
ar	t I-A Complete if the or	ganization is exempt under s	section 501(	c) or is a section 52	7 organization.	
L	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign act	ıvıtıes ın Part IV		
2	Political expenditures			▶	\$	
3	Volunteer hours					
ar	t I-B Complete if the or	ganization is exempt under s	section 501(	c)(3).		
L	Enter the amount of any excise	e tax incurred by the organization unc	ler section 4955	; <b>-</b>	\$	
2	Enter the amount of any excise	e tax incurred by organization manage	ers under sectioi	n 4955 🕨	\$	
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		┌ Yes ┌ No	
4a	Was a correction made?				┌ Yes ┌ No	
b	If "Yes," describe in Part IV					
ar	t I-C Complete if the or	ganization is exempt under s	section 501(	c), except section 5	01(c)(3).	
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	ot function activities 🕨	\$	
2	Enter the amount of the filing of exempt function activities	rganızatıon's funds contributed to otl	ner organizations	s for section 527	\$	
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b	\$	
4	Did the filing organization file <b>F</b>	le Form 1120-POL for this year?				
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid fro rectly delivered	om the filing organization's to a separate political org	funds Also enter the partine games a	
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	contributions received	

section 4911 tax for this year?

┌ Yes ┌ No

## Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	37,000	
c	Total lobbying expenditures (add lines 1a and 1i	o)	37,000	
d	Other exempt purpose expenditures		57,261,226	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	57,298,226	
f	Lobbying nontaxable amount Enter the amount f	1,000,000		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 477	20 reporting	

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

	Lobbying Expe	nditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	( <b>d)</b> 2013	<b>(e)</b> Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	43,867	49,135	39,350	37,000	169,352
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures				lulo C (Form 990 d	

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	<b>.</b>	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c	)(5), c	or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201104410 3 (1 01111 3 3 0 01 3 3 0 12 ) 2 0 1 3		i age -			
Part IV Supplemental Information	on <i>(continued)</i>				
Return Reference	Explanation				

Schedule D (Form 990) 2013

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DLN: 93493353000194

OMB No 1545-0047

### **SCHEDULE D**

(Form 990)

Department of the Treasury

### **Supplemental Financial Statements**

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

Open to Public

al Revenue Service and in	ts instructions is at <u>www.irs.gov/10/11/990</u> .	Inspection
ame of the organization w School Admission Council Inc		Employer identification number
w School Authosion Council Inc		13-2998164
	onor Advised Funds or Other Similar F	unds or Accounts. Complete if the
organization answered "Yes" to F	<del></del>	405
Total number at and of year	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate contributions to (during year)  Aggregate grants from (during year)		
Aggregate value at end of year		
	L nor advisors in writing that the assets held in doi	nor advised
funds are the organization's property, subjec	t to the organization's exclusive legal control?	☐ Yes ☐ No
	ors, and donor advisors in writing that grant funds the benefit of the donor or donor advisor, or for a	
rt III Conservation Easements. Co	mplete if the organization answered "Yes"	to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held	by the organization (check all that apply)	
Preservation of land for public use (e g , i	recreation or education)   Preservation of a	n historically important land area
Protection of natural habitat	Preservation of a	certified historic structure
Preservation of open space		
•	tion held a qualified conservation contribution in	the form of a conservation
easement on the last day of the tax year		Held at the End of the Year
Total number of conservation easements		2a
Total acreage restricted by conservation eas	sements	2b
Number of conservation easements on a cert		2c 2c
Number of conservation easements included	, ,	
historic structure listed in the National Regis		2d
Number of conservation easements modified	l, transferred, released, extinguished, or terminat	ed by the organization during
the tax year 🛌		
Number of states where property subject to o	conservation easement is located 🛌	
Does the organization have a written policy renforcement of the conservation easements	regarding the periodic monitoring, inspection, han it holds?	ndling of violations, and <b>Yes No</b>
Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservation ease	ments during the year
A mount of expenses incurred in monitoring,	inspecting, and enforcing conservation easement	ts during the year
<b>▶</b> \$		
Does each conservation easement reported and section 170(h)(4)(B)(II)?	on line 2(d) above satisfy the requirements of se	ction 170(h)(4)(B)(i)
	reports conservation easements in its revenue an text of the footnote to the organization's financia on easements	
t IIII Organizations Maintaining Co	ollections of Art, Historical Treasures, wered "Yes" to Form 990, Part IV, line 8.	or Other Similar Assets.
works of art, historical treasures, or other si	er SFAS 116 (ASC 958), not to report in its rever milar assets held for public exhibition, education, footnote to its financial statements that describe	, or research in furtherance of public
If the organization elected, as permitted und	er SFAS 116 (ASC 958), to report in its revenue milar assets held for public exhibition, education,	statement and balance sheet
(i) Revenues included in Form 990, Part VII	II, line 1	<b>►</b> \$
(ii) Assets included in Form 990, Part X		<u></u>
If the organization received or held works of	art, historical treasures, or other similar assets f der SFAS 116 (ASC 958) relating to these items	for financial gain, provide the
Revenues included in Form 990, Part VIII, I		<b>▶</b> \$
Assets included in Form 990, Part X		<b>▶</b> \$
ASSECT MCIAGO III I OIIII 330, FAIL A		- Ψ

	III Organizations Maintaining Co		•								7 7 7 7 7	memaca
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ds, ch	ieck	any of th	ne foll	owing that a	re a	sıgnıfıca	nt use	of its	
а	Public exhibition		d	Γ	Loan o	rexc	hange progr	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and expla	ın hov	v the	y further	the o	organızatıon	's ex	empt pur	pose II	n	
	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as	part o	f the	organız	atıon	's collection	?			_ Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answere	d "Y ——	es" to Fo	orm 9	90, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	an or other interme	diary	for c	ontribut	ions	or other ass	ets r	not	Γ	_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	follow	ving t	able		_					
										Am	ount	
С	Beginning balance						-	1c				
d	Additions during the year						-	1d				
e	Distributions during the year						-	1e				
f	Ending balance							<b>1</b> f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line	e 21?							Γ	Yes	Г No
b	If "Yes," explain the arrangement in Part XII $$	I Check here if the	expla	anatı	on has b	een p	rovided in F	art :	XIII			<u> </u>
Par	t V Endowment Funds. Complete											
1-	Pagunning of year balance	(a)Current year	(b)	Prior	year <b>t</b>	<b>b (c)</b> T	wo years back	(d)	Three years	back	(e)Four y	ears back
1a	Beginning of year balance				+			┢				
b	Net investment earnings, gains, and losses							$\vdash$		-		
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities											
£	and programs							$\vdash$				
'	End of year balance				+			$\vdash$				
g	•		/ !			(- ))	L - I - I	<u> </u>				
2	Provide the estimated percentage of the curr	ent year end balanc	e (IIn	e 1g	, column	(a))	neid as					
a	Board designated or quasi-endowment ►											
b	Permanent endowment -											
	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	ıld equal 100%										
За	Are there endowment funds not in the posses	sion of the organiza	ation t	that	are held	and a	dministered	for	the			
	organization by									2-4	Yes	No
	(i) unrelated organizations			•				•		3a(i		
	(iii) valatad avaanimatiana										'/	
b	(ii) related organizations							•				<del>                                     </del>
b 4	(ii) related organizations		d on S	chec	lule R?			•		3b		
4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the tyle Land, Buildings, and Equipme	ns listed as required e organization's end	d on S dowm	ched ent f	lule R? unds			' to	Form 99	3b	<b>'</b>	ne
4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of th	ns listed as required e organization's end	d on S dowm	ched ent for rgan	lule R? unds	ansv		her	Form 99	3b 00, Pa	rt IV, lı	ne ok value
4 Par	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the  tVI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1	ns listed as required e organization's end	d on S dowm	ched ent for rgan	lule R? unds ization Cost or of s (investm	ansv	vered 'Yes  (b)Cost or ot basis (othe	her	(c) Accun	3b 00, Pa	rt IV, lı	ok value
Pari	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the  tVI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1  Description of property	ns listed as required e organization's end	d on S dowm	ched ent for rgan	lule R? unds ization Cost or of s (investm	ansv ther nent)	vered 'Yes  (b)Cost or ot basis (othe	her r) ,623	(c) Accum depreci	3b 00, Pa	rt IV, lı	ok value 871,218
Pari	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of th  VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1  Description of property  and	ns listed as required e organization's end	d on S dowm	ched ent for rgan	Jule R?  Junds  Junds  Cost or of s (investment)	ansv ther nent)	wered 'Yes  (b)Cost or ot basis (othe	her r) ,623	(c) Accum depreci	3b 00, Pa nulated ation	rt IV, lı	ok value 871,218
1a L b E c L	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the tyle Land, Buildings, and Equipmed 11a. See Form 990, Part X, line 1 Description of property  and	ns listed as required e organization's end	d on S dowm	ched ent for rgan	lule R? unds uzation Cost or of s (investm 230 4,226	ansv ther nent)	wered 'Yes  (b)Cost or ot basis (othe	her r) ,623 ,616	(c) Accum depreci	3b 00, Pa nulated ation	rt IV, lı	871,218 1,161,065
1a L b E c L d E	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the tyle Land, Buildings, and Equipmed  11a. See Form 990, Part X, line 1 Description of property  and	ns listed as required e organization's end	d on S dowm	ched ent for rgan	lule R? unds uzation Cost or of s (investm 230 4,226	ansv ther nent) 0,595	vered 'Yes  (b)Cost or ot basis (othe	her r) ,623 ,616	(c) Accum depreci	3b 00, Pa nulated ation	rt IV, lı	

See Form 990, Part X, line 12.	complete if the organization a	nswered Yes to Form 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
(3)Other		
(A) HEDGE FUNDS	31,749,926	F
(B) INTERNATIONAL EQUITY FUNDS	30,996,218	F
		_
(C) US EQUITY FUNDS	25,903,168	F
(D) PRIVATE EQUITY FUNDS	11,569,874	F
(E) FIXED INCOME FUNDS	11,725,708	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 )  Part VIII  Investments—Program Related.		answored 'Vos' to Form 990 Part IV June 11c
See Form 990, Part X, line 13.	Complete ii tile organization	answered les to form 990, Part IV, line IIC.
(a) Description of investment	( <b>b</b> ) Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>F</b>	
	ation answered 'Yes' to Form 990,	Part IV, line 11d See Form 990, Part X, line 15
(a) De	scription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) lin	ne 15 )	
		▶  Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.		· ,
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
ACCRUED POSTRETIREMENT BENEFIT	14,294,425	
ACCRUED POSTRETIREMENT BENEFIT CURRENT PORTION OF LT CAPITAL	185,002 24,818	
LONG TERM PORTION OF LT CAPITA	84,077	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>▶</b> 14,588,322	

Par	t XI		evenue per Audited Financial Statements With Revenue powered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete If
1	Total		r support per audited financial statements	1	80,478,060
2	A mo	unts included on line 1 bu	t not on Form 990, Part VIII, line 12		
а	Netu	ınrealızed gaıns on ınvest	ments 2a   25,624,123		
b	Dona	ted services and use of fa	acilities		
c	Reco	veries of prior year grants	s		
d	Othe	r (Describe in Part XIII )			
е	A dd I	ines <b>2a</b> through <b>2d</b> .		2e	26,133,227
3	Subti	ract line <b>2e</b> from line <b>1</b> .		3	54,344,833
4	A mo	unts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>		
а	Inve	stment expenses not incli	uded on Form 990, Part VIII, line 7b . 4a		
b	Othe	r (Describe in Part XIII )	4b 3,174,223		
С	A dd I	ines 4a and 4b		4c	3,174,223
5	Total	revenue Add lines 3 and	l <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	57,519,056
Part		Reconciliation of E	xpenses per Audited Financial Statements With Expenses swered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Total		audited financial statements	1	57,807,333
2	A mot	unts included on line 1 bu	t not on Form 990, Part IX, line 25		
а	Dona	ted services and use of fa	ecilities		
b	Prior	year adjustments			
С	Othe	rlosses			
d	Othe	r (Describe in Part XIII )			
e	A dd I	ines <b>2a</b> through <b>2d</b>		2e	509,104
3	Subtr	act line <b>2e</b> from line <b>1</b> .		3	57,298,229
4	A mot	unts included on Form 99	0, Part IX, line 25, but not on line <b>1:</b>		
а	Inves	stment expenses not incli	uded on Form 990, Part VIII, line 7b   4a		
b			4b 3,174,223		
С	A dd I	ines 4a and 4b		4c	3,174,223
5	Total	expenses Add lines 3 ar	nd <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	60,472,452
Par		Supplemental Inf			
Part		4, Part X, line 2, Part XI	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional
	Re	eturn Reference	Explanation		
PART	XI, LII	NE 2D	OTHER COST OF GOODS SOLD \$198,150 RENTAL EXPENSE 310,95	4 TO	 ΓΑL \$509,104
PART	XI, LII	NE 4B	OTHER LSAT AND CAS FEE WAIVERS \$3,174,223		·
PART	XII, LI	NE 2D	OTHER COST OF GOODS SOLD \$198,150 RENTAL EXPENSE 310,95	4 TO	TAL \$509,104
PART	XII, LI	NE 4B	OTHER LSAT AND CAS FEE WAIVERS \$3,174,223		
PART	X, LIN	E 2	THE INTERNAL REVENUE SERVICE (THE "IRS") HAS RECOGNIZED T TAX EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE FOR UNCERTAINTY IN INCOME TAXES CLARIFIES THE ACCOUNTING INCOME TAXES RECOGNIZED IN AN ENTERPRISE'S FINANCIAL STAHAS ANALYZED THE TAX POSITIONS TAKEN BY THE ORGANIZATION THAT AS OF JUNE 30, 2014 AND 2013. THERE ARE NO UNCERTAIN	JE CO NG FO ATEMI ON AN	DE ACCOUNTING R UNCERTAINTY IN ENTS MANAGEMENT D HAS CONCLUDED

FILED

OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE THE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE FINANCIAL STATEMENTS THE ORGANIZATION RECOGNIZES ACCRUED INTEREST OR PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS, IF ANY THERE WERE NO INCOME-TAX RELATED INTEREST OR PENALTIES RECORDED FOR THE YEARS ENDED JUEN 30, 2014 AND 2013 THE INCOME TAX RETURNS OF THE ORGANIZATION FOR THE YEARS ENDED JUNE 30, 2013, 2012 AND 2011 ARE SUBJECT TO EXAMINATION BY THE IRS AND OTHER TAXING AUTHORITIES, GENERALLY FOR THREE YEARS AFTER THEY ARE

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

### **Statement of Activities Outside the United States**

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

	e of the organization School Admission Council Inc				Employer ident	ification number
_a w	School Admission Council The				13-2998164	
Pa	rt I General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiz	ation answered
1	For grantmakers. Does the or	_			_	d
	other assistance, the grantee	- '	_	•		
	to award the grants or assista	ance?				✓ Yes  No
2	<b>For grantmakers.</b> Describe in assistance outside the United		ganızatıon's pı	rocedures for monitorii	ng the use of its grant	s and other
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ce is needed )	
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1	) See Add'l Data					
( 2	)					
( 3	)					
( 4	)					
( 5	)					
	Sub-total					1,084,823
ı	Total from continuation sheets to Part I					
(	c Totals (add lines 3a and 3b)					1,084,823

Part IV, li	ne 15, for any	<u>y recipient who rece</u>	eived more than \$5,0	<u>000. Part II can be (</u>	<u>duplicated if additio</u>	<u>nal space is needec</u>	1	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
(1)		Europe (Including Iceland and Greenland)	RESEARCH	152,039	СНЕСК			
( 2)		North America		7,259	CHECK			
(3)		Europe (Including Iceland and Greenland)	RESEARCH	94,749	СНЕСК			
(4)								
			ted above that are r e or counsel has pro					3
3 Enter total num	nber of other	organizations or en	tities					0

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or	(b) Region	(c) Number of	(d) A mount of	(e) Manner of cash	(f) A mount of	(g) Description	(h) Method of
assistance		recipients	cash grant	dısbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV , appraisal, other)
(1) RESEARCH	Europe (Including Iceland and Greenland)						
(2)			1	1		1	
(3)			1	,		1	
(4)		†	<u> </u>	1	<del>                                     </del>	1	
(5)		+ + +	<u> </u>	†		1	
(6)		†		1	<u> </u>	1	
(7)		†	<u> </u>	†	†	1	
(8)		+ + +	<u> </u>	<u>'</u>		1	
(9)		+ + +	<u> </u>	<u> </u>	<u> </u>	1	
( 10)		†		1		1	
(11)	†	†	<u> </u>	1		1	
( 12)	†	†	1	1		1	
( 13)		†	<u> </u>	<u>'</u>		1	
( 14)		+ + +	<u> </u>	<u> </u>	<u> </u>	1	
( 15)		+ + +	<u> </u>	<u>'</u>		1	
( 16)		+ + +	<u> </u>	<u> </u>	<u> </u>	1	
( 17)		†	<u> </u>	<u>'</u>	<u> </u>	1	
( 18)	+	†	<u> </u>	1	†	1	
						Sched	ule F (Form 990) 2013

### Part IV Foreign Forms

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

Schedule F (Form 990) 2013

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

### Part V Supplemental Information

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

### 990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	GRANTS FOR MORE THAN \$5,000 ARE INITIALLY REVIEWED BY SPECIAL LSAC SUB-COMMITTEES, IF APPL ICABLE, AND ARE THEN REFERRED TO THE DESIGNATED LSAC STANDING COMMITTEE - DIVERSITY INITIA TIVES, TEST DEVELOPMENT & RESEARCH (TD&R), OR SERVICES & PROGRAMS (S&P) THE COMMITTEES RE VIEW AND DISCUSS GRANT REQUESTS AND MAKE RECOMMENDATIONS TO THE LSAC BOARD OF TRUSTEES FOR FINAL APPROVAL THE LSAC BOARD HAS THE OPPORTUNITY TO DISCUSS THE GRANT REQUESTS FURTHER PRIOR TO THEIR APPROVAL UPON APPROVAL, A CONTRACT IS DRAWN UP WHICH STATES THE TERMS AND CONDITIONS OF THE GRANT, INCLUDING DELIVERABLES AND PAYMENT SCHEDULES THE ACTUAL PAYMENTS ARE MADE BASED UPON THE GRANTEE MEETING THE STATED TERMS OF THE CONTRACT AN INDIVIDUAL A T LSAC IS DESIGNATED TO FOLLOW UP TO ENSURE THAT THE TERMS OF EACH GRANT CONTRACT ARE MET

### **Additional Data**

Software ID: Software Version:

**EIN:** 13-2998164

Name: Law School Admission Council Inc

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	=
Central America and the Caribbean			Program Services	ADMINISTER TEST	700
North America			Program Services	ADMINISTER TEST	622,615
Sub-Saharan Africa			Program Services	ADMINISTER TEST	3,160

Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region						
East Asia and the Pacific			Program Services	ADMINISTER TEST	121,072						
Europe (Including Iceland and Greenland)			Program Services	ADMINISTER TEST	313,571						
Middle East and North Africa			Program Services	ADMINISTER TEST	7,675						

Form 990 Schedule F F	art I - Activit	ies Outside T	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	_
Russia and the Newly Independent States			Program Services	ADMINISTER TEST	3,583
South Asia			Program Services	ADMINISTER TEST	12,447

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

Department of the Treasury

Law School Admission Council Inc

Internal Revenue Service

Name of the organization

DLN: 93493353000194

OMB No 1545-0047

Schedule I **Grants and Other Assistance to Organizations,** (Form 990)

Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

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

► Attach to Form 990

Open to Public **Inspection** 

**Employer identification number** 

113-2998164

						1 1 2 2 3 3 0 1 0 1	
Part I General Information	n on Grants and	Assistance				•	
<ol> <li>Does the organization maintain r the selection criteria used to awa</li> <li>Describe in Part IV the organiza</li> </ol>	ard the grants or ass	ıstance?					▽ Yes ┌ N
Part II Grants and Other As Form 990, Part IV, line							es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							

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

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Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	<b>(f)</b> Description of non-cash assistance
(1) RESEARCH GRANT	1	30,000			

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

Return Reference	Explanation
	GRANTS FOR MORE THAN \$5,000 ARE INITIALLY REVIEWED BY SPECIAL LSAC SUB-COMMITTEES, IF APPLICABLE, AND ARE THEN REFERRED TO THE DESIGNATED LSAC STANDING COMMITTEE - DIVERSITY INITIATIVES, TEST DEVELOPMENT & RESEARCH (TD&R), OR SERVICES & PROGRAMS (S&P) THE COMMITTEES REVIEW AND DISCUSS GRANT REQUESTS AND MAKE RECOMMENDATIONS TO THE LSAC BOARD OF TRUSTEES FOR FINAL APPROVAL THE LSAC BOARD HAS THE OPPORTUNITY TO DISCUSS THE GRANT REQUESTS FURTHER PRIOR TO THEIR APPROVAL UPON APPROVAL, A CONTRACT IS DRAWN UP WHICH STATES THE TERMS AND CONDITIONS OF THE GRANT, INCLUDING DELIVERABLES AND PAYMENT SCHEDULES THE ACTUAL PAYMENTS ARE MADE BASED UPON THE GRANTEE MEETING THE STATED TERMS OF THE CONTRACT AN INDIVIDUAL AT LSAC IS DESIGNATED TO FOLLOW UP TO ENSURE THAT THE TERMS OF THE GRANT CONTRACTS ARE MET
Schedule I, Part II, Line 1b and	The remaining information is available upon request

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 13-2998164

Name: Law School Admission Council Inc

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

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN INDIAN LAW CENTER PO BOX 4456 ALBUQUERQUE,NM 87196	85-0250024	501(c)(3)	150,000				PROGRAM SERVICE

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OHIO LAW & LEADERSHIP INSTITUTE 1700 LAKE SHORE DRIVE COLUMBUS,OH 43204	26-4709314	501(c)(3)	67,625				PRO GRAM SERVICE			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF BUFFALO 319 OBRIEN HALL BUFFALO,NY 14260	16-1691816	501(c)(3)	100,000				PROGRAM SERVICE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
RUTGERS UNIVERSITY 217 N 5TH STREET CAMDEN,NJ 08102	22-2914122	501(c)(3)	100,000				PROGRAM SERVICE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SUFFOLK UNIVERSITY 120 TREMONT STREET BOSTON,MA 02108	04-2133255	501(c)(3)	100,000				PROGRAM SERVICE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GEORGIA COLLEGE OF LAW PO BOX 4037 ATLANTA,GA 30302	58-1845423	501(c)(3)	25,000				PRO GRAM SERVICE		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF BALTIMORE 1420 N CHARLES STREET BALTIMORE,MD 21201	23-7036780	501(c)(3)	25,000				PROGRAM SERVICE			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF MISSOURI KC 5100 ROCKHILL ROAD KANSAS CITY,MO 64110	23-7069620	501(c)(3)	75,000				PROGRAM SERVICE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
STREET LAW 1010 WAYNE AVE SILVER SPRINGS, MD 20910	52-2015256	501(c)(3)	86,750				PROGRAM SERVICE		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ST JOHNS UNIVERSITY SCHOOL OF LAW 8000 UTOPIA PARKWAY QUEENS,NY 11439	11-1630830	501(C)(3)	50,000				PROGRAM SERVICE			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NJ LEEP SETON HALL LAW SCHOOL NEWARK,NJ 07102	51-0591204	501(C)(3)	75,000				PROGRAM SERVICE		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DISCOVERLAW GRANTS 662 PENN STREET NEWTOWN,PA 18940	-	501(C)(3)	54,731				PROGRAM SERVICE			

Form 990,Schedule 1, Par	t II, Grants and	d Otner Assistance	to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF VIRGINIA PO BOX 400195 CHARLOTTESVILLE,VA 22904	54-0838566	501(C)(3)	6,608				research

Form 990,Schedule 1, Pai	orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States						
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN BAR FOUNDATION 750 N LAKESHORE DRIVE CHICAGO,IL 60611	36-6110271	501(C)(3)	20,000				RESEARCH

<u> Form 990,Schedule I, Par</u>	rm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States						
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF ARKANSAS 1045 W MAPLE ST FAYETTEVILLE, AR 72701	71-6056774	501(C)(3)	75,000				PROGRAM SERVICE

Form 990,Schedule I, Pa	orm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
SUMMER WORK EXPERIENCE IN LAW 225 E6TH STREET CINCINATTI,OH 45202	26-2902937	501(C)(3)	29,000				PRO GRAM SERVICE	

Form 990,Schedule 1, Pa	orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States						
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MICHIGAN 3003 S STATE STREET ANN ARBOR, MI 48109	38-6006309	501(c)(3)	17,000				RESEARCH

Form 990,Schedule I, Pa	orm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States						
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGETOWN LAW CENTER 600 NJ AVE NW WASHINGTON, DC 20001	53-0196603	501(C)(3)	10,000				RESEARCH

Form 990,Schedule 1, Pa	rt II, Grants an	<u>a Otner Assistance</u>	e to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FORDHAM UNIVERSITY 441 E FORDHAM BRONX,NY 10458	13-1740451	501(c)(3)	5,000				

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DLN: 93493353000194

OMB No 1545-0047

Open to Public Inspection

### Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

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

Name of the organization Law School Admission Council Inc

**Employer identification number** 

13-2998164

Pa	rt 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			
	First-class or charter travel  Housing allowance or residence for personal use			
	▼ Travel for companions			
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
	and colors, tradecolo, cinecio, metalling the depo, executive birector, regulating the freme cinecited in line 14	2	res	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee     ▼ Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organizat or a related organization	ion		
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
ь	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$ , did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	( <b>E)</b> Total of columns (B)(1)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits		
See Addıtıonal Data Table							

Schedule J (Form 990) 2013

#### Part IIII Supplemental Information

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

Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 1A	TRAVEL FOR COMPANIONS LSAC WILL PAY FOR THE TRANSPORTATION COSTS OF A BOARD MEMBER AND CERTAIN SENIOR STAFF MEMBER'S GUEST TO TWO OF THE THREE BOARD MEETINGS EACH YEAR BENEFIT IS TREATED AS TAXABLE COMPENSATION IN ACCORDANCE WITH THE CURRENT TAX LAW
PART I, LINE 1A	HEALTH OR SOCIAL CLUB DUES LSAC WILL REIMBURSE ALL EMPLOYEES UP TO \$50 PER YEAR FOR MEMBERSHIP FEES IN A HEALTH CLUB, WITH PROOF OF ENROLLMENT
PART II, COLUMN D	NON-TAXABLE BENEFITS FOR INDIVIDUALS LISTED INCLUDE medical AND dental benefitS paid by LSAC

Schedule J (Form 990) 2013

#### **Additional Data**

Software ID: Software Version:

**EIN:** 13-2998164

Name: Law School Admission Council Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
	) 560,419 ()		64,719	22,950	9,275	657,363	
	305,140		27,597	22,950	1,044	356,731	
	ı) 267,190 ı)		22,071	22,950	13,931	326,142	
	(i) 264,235 (i)		18,563	22,950	9,447	315,195	
	254,283		30,089	22,885	1,044	308,301	
	240,133		15,915	21,612	9,275	286,935	
	208,435		24,900	18,759	9,806	261,900	
TROY LOWRY DIR SOFTWARE SERVICES (I	205,500		12,438	18,495	17,807	254,240	
	178,396		23,688	16,056	9,275	227,415	
VIVIAN G BOWDEN DIR OF EDUC & PRELAW PROGRAMS	187,860		4,469	16,907	9,275	218,511	

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As Filed Data -

DLN: 93493353000194

OMB No 1545-0047

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

2013
Open to Public Inspection

Name of the organization
Law School Admission Council Inc

13-2998164

Return Reference	Explanation
FORM 990, PART III, LINE 4(D)	OTHER PROGRAM SERVICES (EXPENSES \$2,563,203 INCLUDING GRANTS \$0) (REVENUES \$1,763,522) SOLD 140,622 TEST PREPARATION PRODUCTS, 4,200 "WHOLE LAW SCHOOL PACKAGES", 3,294 "OFFICIAL LSAT HANDBOOKS"

FORM 990, PART VI, SELTON A, LINE 6  A SCHOOL OF LAW IS ELIGIBLE FOR MEMBERSHIP IN THE LAW SCHOOL ADMISSION COUNCIL (LSAC) IF IT REQUIRES THAT SUBSTANTIALLY ALL OF ITS APPLICANTS FOR ADMISSION TAKE THE LSAT, AND IS A LAW SCHOOL APPROVED BY THE AMERICAN BAR ASSOCIATION (ABA) OR A MEMBER OF THE ASSOCIATION OF AMERICAN LAW SCHOOLS (AALS), OR IT IS A CANADIAN LAW SCHOOL THAT GRANTS DEGREES THAT ARE RECOGNIZED BY A PROVINCIAL OR TERRITORIAL LAW SOCIETY OR GOVERNMENT AGENCY AS AN APPROVED ACADEMIC CREDENTIAL FOR PERSONS SEEKING ADMISSION TO THE BAR IN ONE OF THE PROVINCES OR TERRITORIES OF CANADA THE BOARD OF TRUSTEES OF THE COUNCIL MAY, AT ITS DISCRETION AND FOLLOWING A PERIOD FOR NOTICE AND COMMENT AMONG THE CURRENT MEMBERS, ADMIT INTO MEMBERSHIP A LAW SCHOOL OUTSIDE OF THE UNITED STATES AND CANADA IF IT REQUIRES THAT SUBSTANTIALLY ALL OF ITS APPLICANTS FOR ADMISSION TAKE THE LSAT, AND IS ACCREDITED BY A GOVERNMENTALLY RECOGNIZED, NATIONAL ACCREDITING AUTHORITY OR ITS DEGREES MEET THE LEGAL EDUCATION REQUIREMENT FOR BAR MEMBERSHIP THROUGHOUT ITS HOME COUNTRY THERE ARE CURRENTLY 201 US MEMBER LAW SCHOOLS, 17 CANADIAN MEMBER	Return Reference	Explanation
LAW SCHOOLS AND 1 AUSTRALIAN MEMBER LAW SCHOOL	PART VI, SECTION A,	SUBSTANTIALLY ALL OF ITS APPLICANTS FOR ADMISSION TAKE THE LSAT, AND IS A LAW SCHOOL APPROVED BY THE AMERICAN BAR ASSOCIATION (ABA) OR A MEMBER OF THE ASSOCIATION OF AMERICAN LAW SCHOOLS (AALS), OR IT IS A CANADIAN LAW SCHOOL THAT GRANTS DEGREES THAT ARE RECOGNIZED BY A PROVINCIAL OR TERRITORIAL LAW SOCIETY OR GOVERNMENT AGENCY AS AN APPROVED ACADEMIC CREDENTIAL FOR PERSONS SEEKING ADMISSION TO THE BAR IN ONE OF THE PROVINCES OR TERRITORIES OF CANADA THE BOARD OF TRUSTEES OF THE COUNCIL MAY, AT ITS DISCRETION AND FOLLOWING A PERIOD FOR NOTICE AND COMMENT AMONG THE CURRENT MEMBERS, ADMIT INTO MEMBERSHIP A LAW SCHOOL OUTSIDE OF THE UNITED STATES AND CANADA IF IT REQUIRES THAT SUBSTANTIALLY ALL OF ITS APPLICANTS FOR ADMISSION TAKE THE LSAT, AND IS ACCREDITED BY A GOVERNMENTALLY RECOGNIZED, NATIONAL ACCREDITING AUTHORITY OR ITS DEGREES MEET THE LEGAL EDUCATION REQUIREMENT FOR BAR MEMBERSHIP THROUGHOUT ITS HOME COUNTRY THERE ARE CURRENTLY 201 U.S. MEMBER LAW SCHOOLS, 17 CANADIAN MEMBER

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	EACH MEMBER LAW SCHOOL HAS ONE VOTE. THE MEMBERS ELECT THE CHAIR OF THE BOARD OF TRUSTEES EVERY OTHER YEAR

Return Reference	Explanation
, , ,	LSAC'S FORM 990 IS INITIALLY PREPARED BY THE ORGANIZATION AND THEN SUBMITTED TO THE INDEPENDENT AUDITORS FOR THEIR REVIEW AND FURTHER ASSISTANCE PRIOR TO FILING, A COPY OF THE FORM IS PROVIDED TO BOTH THE LSAC AUDIT COMMITTEE AND THE BOARD OF TRUSTEES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS LSAC BOARD OF TRUSTEES MEMBERS, COMMITTEE MEMBERS AND VOLUNTEERS ARE PROVIDED A COPY OF THE COUNCIL'S "CONFLICT OF INTEREST POLICY FOR LSAC TRUSTEES AND OTHER VOLUNTEERS" AND ASKED TO REVIEW, DISCLOSE ANY POTENTIAL CONFLICTS AND SIGN AN ACKNOWLEDGEMENT FORM THAT IS MAINTAINED BY LSAC'S GENERAL COUNSEL IN JULY OF EACH YEAR, OFFICERS AND KEY LSAC STAFF MEMBERS ARE PROVIDED A COPY OF THE COUNCIL'S CONFLICT OF INTEREST POLICY AND OTHER KEY POLICIES AND ARE ASKED TO REVIEW, DISCLOSE ANY POTENTIAL CONFLICTS AND SIGN AN ACKNOWLEDGEMENT FORM THAT IS MAINTAINED BY HUMAN RESOURCES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION APPOINTS AN EXECUTIVE COMPENSATION COMMITTEE, NORMALLY 3-5 MEMBERS DRAWN FROM THE BOARD OF TRUSTEES AND NAMED BY THE LSAC CHAIR THE EXECUTIVE COMPENSATION COMMITTEE ENLISTS THE ASSISTANCE OF AN OUTSIDE FIRM OR SPECIALIST THAT IS ABLE TO PROVIDE COMPARATIVE INFORMATION ABOUT PROCESS AND COMPENSATION ITSELF AS PART OF THE ANNUAL BUDGET APPROVAL PROCESS, THE LSAC PRESIDENT PRESENTS TO THE BOARD A BUDGET ITEM REGARDING THE PROPOSED COMPENSATION OF STAFF INCREASES OR ADJUSTMENTS INCLUDE PROMOTIONS AS WELL AS INCREASES BASED ON MERIT AND MARKET CONDITIONS

	Return Reference	Explanation
I	FORM 990, PART VI, SECTION C, LINE 19	LSAC MAKES ITS GOVERNING DOCUMENTS AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

Return Reference	Explanation
Form 990, Part XI, Line 9	Other changes in net assets or fund balances Postretirement benefits - related changes other than net periodic postretirement benefit costs \$55,691