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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the 2	2013 cal	endar year, or tax year beginning	g 10-01-2013 , 2013, and ending 09	-30-2014			
B Che	eck if ap	plicable	C Name of organization The Lupus Foundation of America In	С		D Emplo	yer ide	ntification number
☐ Add	ress cha	ange	Doing Business As			43-1	13143	6
☐ Nar	ne chan	nge	Doing Dusiness As					
☐ Init	ıal retur	n		nail is not delivered to street address) Room/	suite	E Teleph	one num	nber
☐ Ter	mınated	i	2000 L Street NW No 410			· ·		
┌ Am	ended n	eturn	City or town, state or province, cour	ntry, and ZIP or foreign postal code		(202	349-1	1122
ГАрр	lication	pending	Washington, DC 20036			G Gross	receipts	\$ 12,946,485
			F Name and address of prir	ncipal officer	H(a)	Is this a group		<u> </u>
			Sandra C Raymond 2000 L Street NW No 410			subordinates?		⊤Yes ▼ No
			Washington, DC 20036		Н(Р)	Are all subord	ınatac	┌ Yes ┌ No
						included?	mates	j řesj No
I Ta	k-exem	pt status	▽ 501(c)(3) ┌ 501(c)() ◄ (insert no) 4947(a)(1) or 527		If "No," attach	n a list	(see instructions)
J W	ebsite	: - ww	w lupus org		H(c)	Group exemp	tion nu	mber ►
K Forr	n of org	anızatıon	Corporation Trust Associatio	n Other ►	L Yea	ar of formation 19	977 M	State of legal domicile DC
	rt I		mary					
		Briefly d	escribe the organization's mission	on or most significant activities				
				lupus through research, education, a	nd advoca	асу		
စ္	_							
屋	_							
Governance	2 C	heck th	nis box দ if the organization di	scontinued its operations or disposed	l of more t	han 25% of its	net as	ssets
ဒီ							ı	ı
2 6				ing body (Part VI, line 1a)			3	19
Ĩĕ				of the governing body (Part VI, line 1			4	19
Activities &				calendar year 2013 (Part V, line 2a)			5	49
ă				ecessary)			6	319
				art VIII, column (C), line 12 rom Form 990-T, line 34			7a 7b	42,785
		vec unic	Tated business taxable medine in	1, me 34		Prior Year	1 /5	Current Year
	8	Contri	butions and grants (Part VIII, li	ne 1 h)		9,657,	896	11,338,917
₫	9		- · · · · · · · · · · · · · · · · · · ·	ne 2g)		1,301,		1,299,910
Revenue	10	_		(A), lines 3, 4, and 7d)			201	18,884
芒	11	Other	revenue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and 11e)		67,	292	35,835
	12		_	(must equal Part VIII, column (A), li	ne	11.000	242	12.602.546
	12			TV column (A) lines 1 2)		11,066,		12,693,546
	13 14			IX, column (A), lines 1-3)		929,	0	1,743,358
	15			ee benefits (Part IX, column (A), lines			\dashv	
\$	15	5-10)		te benefits (Fure IX, column (A), mics		3,976,	631	4,041,297
Expenses	16a	Profes	sional fundraising fees (Part IX,	column (A), line 11e)		60,	450	118,925
ੜੇ	b	Total fu	ndraising expenses (Part IX, column (D), line 25) • 2,570,632				
	17	Other	expenses (Part IX, column (A),	lines 11a-11d, 11f-24e)		8,253,	690	6,756,402
	18	Total	expenses Add lines 13-17 (mu	st equal Part IX, column (A), line 25)		13,220,	488	12,659,982
	19	Reven	ue less expenses Subtract line	18 from line 12	_	-2,154,		33,564
Net Assets or Fend Balances					Beg	inning of Curre Year	nt	End of Year
50 G	20	Total :	assets (Part X. line 16)			7,078,	484	7,495,167
5.5 5.0	21					2,867,		3,255,835
差置	22			line 21 from line 20		4,211,		4,239,332
Pai	t II		ature Block					<u> </u>
my kr	rowled	ge and i		amined this return, including accompanplete Declaration of preparer (other				
		****	**			2015-02-13		
Sign		I B i	ature of officer			Date		
Here		Sand	ra C Raymond President and CEO					
			or print name and title	<u> </u>				
——Paid		P	or print name and title rint/Type preparer's name Frank H Smith	Preparer's signature	Date 2015-02-13	Check f if self-employed	PTIN P0063	9053

Firm's address F 1899 L Street NW Suite 900

Washington, DC 20036

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

Preparer

Use Only

Phone no (202) 822-5000

✓ Yes ☐ No

orm 9	90 (2	2013)					Page 2
Part	Ш		of Program Servic			III	·
1	Briefl		organization's mission				
					cated to improving the	e quality of life for all peop	ole affected by lupus through
rogra	ms of	research, educ	ation, support, and adv	ocacy			
2	Dıd th	e organization u	ındertake any sıgnıfıca	nt program se	ervices during the yea	r which were not listed on	
	•	or Form 990 or					
			se new services on Sc ease conducting, or m		nt changes in how it co	anducts any program	
:	servic	es?	se changes on Schedu				
_					nents for each of its th	nree largest program servi	ices, as measured by
(expen	ses Section 50		organization	s are required to repo	rt the amount of grants an	
4a	(Code	<u> </u>) (Expenses \$	4,065,892	ıncludıng grants of \$) (Revenue	\$ 388,311)
	campa lupus follow interes genera percer import	aigns, media relatio org, exceeded six r ers on Twitter, the st in signature awai ating more than 15 nt compared to the	ons, online and social marke million visits, meeting a groo organization has the largest reness campaign activities d million television impressio previous year, and, over th	ting and aggress wing demand for t social media pr luring May-Lupus ns Story placem ie course of the	sive outreach efforts to cor r information about lupus resence dedicated exclusive s Awareness Month During nents included CNN, Huffin month, more than 23 milli	porate and community partners In addition, with more than 235 ely to lupus The Foundation con I that month alone, the Foundat gton Post Live and Costco Maga on Facebook impressions were	azine Visits to lupus org increased by !
46	(Code) (Expenses \$	2,301,770	including grants of \$	1,682,794) (Revenue	
4b	•					decades, have plagued the acce	•
	portal activit suppo contin Findin Owner Open diseas break including mechal mechal suppo to sup study which that lefor The	that trains health py in the clinic and int a new five-year ues work on a projugs were presented by the Foundation Access, online journes It is the first luging studies in lugus in expanding our uenism called LIFELII entum and loss of consight Prize in parted research throuport the National Lieun 2014 awarded to the developme Lugus Initiative, we work and the control of the cont	professionals on instruments in clinical trials. In 2014, the initiative that will accelerate ect to pool clinical trial data at major scientific meetings in and published by BM), a right hat provides a central pous-specific Open Access Journ 2014, the Foundation punderstanding of pediatric lunker. The LIFELINE grant was urrent and future lupus investmentship with two other lupugh its advocacy efforts. The upus Patient Registry conduits occated for the continued suheree lupus research grants tent of the first diagnostic tewhich launched in 2013 to trial.	used in clinical Lupus Foundation the ability to de (de-identified) is of medical organization of the work or the work of the	studies and has spearhead on of America partnered wievelop new medicines for I provided by participating by anizations and federal ager provider of evidence-base on of basic, clinical, transled and was developed in redding to award research grain the area of pediatric lupesponse to the current lupul coundation also awarded su and for the second year, I the following accomplishme centers for Disease Contribution To date, the DoD has cans determine a diagnosis significant of the signs.	ed an effort to create a new, suith the Foundation for the Nation upus and other diverse and components. This projectes in 2014, the Foundation led medical knowledge, Lupus Sciencial and epidemiological studies ponse to the need for a barrier into that address issues of critical using the search funding environments in the research funding environments are fellowships to students, led to the search funding environments. Secured an additional stollar of prevention (CDC), becoment of Defense (DoD) Per-Reprovided \$17.4 million for lupus of lupus. Secured an additional stollar of the secured and secured an additional stollar of the secured and se	t and the potential decline in scientific launched and awarded the second ent Award The Foundation also \$5 5 million, for a total of \$32 million, ming the largest-ever lupus research eviewed Medical Research Program, s research, including funds for a study nal \$2 million, for a total of \$6 million, facilitate earlier diagnosis
4 c	(Code) (Expenses \$	1,656,181	including grants of \$	60,564) (Revenue	• • •
	offices organi nation suppo capaci mater contin throug	s, support groups, a szational developme ial advocacy activiti it group facilitators ity to provide this in ials to aid the Foun ued to provide on- inout the search pro	and other interested partnersent support and training to Cles (as well as training for so A new program was developerations 21 chapters and moste and remote interim execuses Additionally, in 2014,	s to serve the non- Chapter CEOs, state advocacy in oped to train quan Network In 201 ore than 267 sup cutive leadership the Lupus Foun	eeds of lupus communities that and board members, in initiatives), leadership develoaled individuals to become 14, 19 new trainers were coport groups, serving hund to support for chapters that dation of America Walk to	across the United States In 20 including individualized capacity-topment through our Leadership are support group facilitator trainstrained through this program. The reds of thousands of people acrexperienced a CEO transition, in End Lupus Now events brought.	to its network of chapter affiliates, field 14, the Foundation provided on-going building services, leadership of o Institute and specialized trainings for ers, to increase the Foundation's he Foundation also provided tools and ross the United States. The Foundation including providing leadership together nearly 70,000 individuals in the cause in their local communities.
	(Code) (Expenses \$	701,422	ıncludıng grants of \$) (Revenue	\$ 181,942)
	recom was co The pr multid comm pharm to wor Found	mendations for phy onducted via live er orgram focused on isciplinary group of unity The Foundat lacy/pharmacy tech rk with its Medical/s ation also reached	visicians, other healthcare provents in 2013, was made as the latest research on lupus health care professionals. It is continued its relationshipmicians. The Foundation als Scientific Advisory Council to the medical community through the second of the s	ofessionals and vailable nationalls treatments and in addition, the Fp with RN com too is working with address issues ough the Health	their respective organization of the web in 2014 to the state of the succession of the web in 2014 to the succession of the web in 2014 to the succession of the web in 2014 to the web	ons A national continuing medic the community of providers who d cardiovascular disease, cancel sess partnerships for educating ccessful program, completed by one robust educational curriculun cal community that provides cal	the non-MD health care professional more than 3900 nurses and over 580 n on lupus The Foundation continues re to people with lupus The bw magazine, and works with its
	(Codo) (Expenses \$	667,544	ıncludıng grants of \$) (Revenue	\$ 73,520)
		t education and su	pport The Foundation prov	ides education, s	support and other assistance	ce to individuals with lupus, thei	ir families and caregivers. In 2014, the
	educa specifi	tor support service, ically to children an	held public education even d their parents Last year, t	ts across the cou he Foundation's	untry targeted to people liv Caregiver Task Force was		

been working with the group to develop and launch key content and resources. The Foundation debuted new evidence-based, medically sound, and medically reviewed educational content, and developed audio podcasts, sponsored teleconferences, and produced and circulated Lupus Now, the only national magazine targeted to people affected by lupus. The Foundation also created an online resource to provide information about the Affordable Care Act for those constituents who needed accessible and understandable information applicable to people with lupus. The Foundation continued to produce its unique Ask the Experts series, a series of educational talks and presentations on a variety of topics deemed important by our constituents and designed to provide important information about living with lupus. This free program combines an expert Q and A with a recorded presentation and was offered in both English and Spanish. More than 13,000 people utilized this program in 2014.

4d Other program services (Describe in Schedule O)

4e

1,368,966 including grants of \$ (Expenses \$

9,392,809 Total program service expenses ►

) (Revenue \$

255,462)

Form **990** (2013)

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\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^{\bullet}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b	Yes	
С	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
	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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	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	Yes	
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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

- 11	Check of Cabadula Comptains a response or note to any line in this Part V			_
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	Yes	. J No
3	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 62			
)	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	Yes	
	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 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?			
	2. 105, to fine 50 of 55, and the organization metrorin 0000 for 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	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). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to		165	
	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?	7 f		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 Form 1098-C?	7h	Yes	
	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		
		90		
	Section 501(c)(7) organizations. Enter Instruction food and capital contributions included on Bart VIII. line 12			
	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			
	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.	1		
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
ı	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.

Check if Schedule O	contains a resi	nonce or note t	o any li	ing in this B	art VI						V
Check ii Schedule O	Contains a resi	י שנווטע שבווטע	o ally II	1116 III (1115 F	aitvi						., .

Se	ection A. Governing Body and Management									
			Yes	No						
1 a	Enter the number of voting members of the governing body at the end of the tax year									
	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									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No						
4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No						
6	Did the organization have members or stockholders?	6		No						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following									
а	The governing body?	8a	Yes							
b	Each committee with authority to act on behalf of the governing body?	8b	Yes							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No						
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)						
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod Yes	e.) No						
	ection B. Policies (This Section B requests information about policies not required by the Internal R Did the organization have local chapters, branches, or affiliates?	evenu 10a								
10a			Yes							
10a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes Yes							
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes							
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes							
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes							
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes Yes							
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes							
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes Yes							
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes							
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes							
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes							
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes							
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes							
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No						

- List the States with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OK, OR, PA, RI, SC, TN, UT, VA, WI, WV
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply own website. Another's website. Upon request. Other (explain in Schedule O)
- 1.9 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ▶Seung-Ae Chung 2000 L Street NW 410
 Washington, DC 20036 (202) 349-1155

Form 990	(2013	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	han o	one I both	oox, an	heck unless officer stee)		Repo compe from organiza	D) rtable nsation n the ation (W-	(E) Reportable compensation from related organizations (W-	_ c	(F) Estima mount o ompens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		ganizati relate organiza	ed
1b	Sub-Total			•	•		ı	F						
c d	Total from continuation sheet Total (add lines 1b and 1c).	s to Part VII, S	ection A	. .	•	٠.	•	•		1,345,973		0		134,092
2	Total number of individuals (in \$100,000 of reportable compe						d abov	/e) w	l ho receive					,
													Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>	•				key •	emplo	yee •	, or highes	st compen	sated employee	3	Yes	
4	For any individual listed on line organization and related organ individual											_	V	_
5	Did any person listed on line 1 services rendered to the organ			•					_	ganızatıon	or individual for	4	Yes	
			,		0,,00		, 0, 0 0	оп р			[5		No_
	ction B. Independent Co					- اد					+b +100 000	- F		
1	Complete this table for your five compensation from the organization												ax year	
	N	(A) ame and business	address							Des	(B) cription of services		(C Comper	
	O Box 1450 Minneapolis MN 55486	20007								+	d mailhouse services	Ŧ	2	,607,394
	3 Inc 3050 K Street NW Washington DC									relations	ttershop & mailhouse	+		570,167
	ction Solutions 1953 Gallows Road Vier erry Group 44 Soccer Park Road Fento									services	our management	+		357,216 239,911
McMu	rryTMG LLC 1129 20th St NW 700 Was	hington DC 20036								Production,	design of LFA magazir	ne		165,388
	Fotal number of independent co \$100,000 of compensation fron			not	lımıt	ed t	o thos	e list	ted above) who rece	ived more than			

Form 99		•					Page S
Part V	/++1	Statement of Revenue Check if Schedule O contains a respon	se or note to any lin	ne in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u> </u>	1a	Federated campaigns 1a	262,754				
Grants	ь	Membership dues 1b					
ē, ē	С	Fundraising events 1c	935,960				
Giffs, iilar A	d	Related organizations 1d					
B.E	е	Government grants (contributions) 1e	25,000				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	10,115,203				
ntrib d Oth	g	Noncash contributions included in lines 1a-1f \$	3,527,370				
Co	h	Total. Add lines 1a-1f	· · · · •	11,338,917			
<u> </u>			Business Code				
ven	2a	Training/consulting	900099	582,733	582,733		
22	b	Membership dues	900099	572,206	572,206		
¥ AC	C	Publications	900099	144,971	102,186	42,785	
Ş	d e						
ran L	f	All other program service revenue					
Program Serwce Revenue							
	g 3	Total. Add lines 2a-2f		1,299,910			
		and other similar amounts)		18,884			18,884
	4	Income from investment of tax-exempt bond p	roceeds	10.240			10.24
	5	Royalties	(u) Paranal	19,210			19,21
	6a	(1) Real Gross rents	(II) Personal				
	ь	Less rental					
	c	expenses Rental income					
	d	or (loss) Net rental income or (loss)			ı		
		(ı) Securities	(II) Other				
	7a b	Gross amount from sales of assets other than inventory Less cost or					
	6	other basis and sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)					
Other Revenue	8a	Gross income from fundraising events (not including \$935,960 of contributions reported on line 1c) See Part IV, line 18 a	452 500				
her	ь	Less direct expenses b	153,500 252,939				
ŏ	С	Net income or (loss) from fundraising e	· · · · · · · · · · · · · · · · · · ·	-99,439			-99,43
	9a	Gross income from gaming activities See Part IV, line 19					
	Ь	Less direct expenses b					
		Net income or (loss) from gaming activ	rities				
	10a	Gross sales of inventory, less returns and allowances .					
	.	a l					
		Less cost of goods sold b L Net income or (loss) from sales of inve	ntory L				
	Ť	Miscellaneous Revenue	Business Code				
	11a	Miscellaneous	900099	81,813			81,813
	ь	Sublease income	900099	30,581			30,58
	С	List rental income	900099	3,670			3,670
	d	All other revenue					
	е	Total. Add lines 11a-11d	🕨	116,064			
	12	Total revenue. See Instructions	· · · •	12,693,546	1,257,125	42,785	54,719
					. , -	,	, –

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Total expenses Program service Program	3000	on solicity and solicity organizations must complete an columns Al	r other organizati	ons mast comp	nece column (A)	
Total expenses Program service Program Total expenses Program Pr		Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
In the United States See Part IV, line 21			(A) Total expenses	Program service	Management and	(D) Fundraising expenses
United States See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees	1		1,743,358	1,743,358		
States See Part IV, Inten 15 and 16	2					
Compensation of current officers, directors, trustees, and key employees	3	organizations, and individuals outside the United				
Rey employees 903,033 648,044 220,244	4	Benefits paid to or for members				_
(as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	5		903,033	648,044	220,244	34,745
Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 3,607 Other expenses 333,490 293,613 14,971 Payroll taxes 236,950 196,186 20,573 Pess for services (non-employees) 2,705 2,705 Accounting 31,403 31,403 31,403 Lobbying 2,705 2,705 2,705 Investment management fees 31,403 31,403 31,403 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, 1st line 11g expenses on Schedule O) 1,078,408 880,297 30,923 Advertising and promotion 66,721 39,689 2,717 Royalites 5,804 2472,592 24,128 Travel 1,078,408 1,078,408 1,078,408 1,078,408 Onferences, conventions, and meetings 2,071,404 2,071,404 2,071,404 Payments of travel or entertaniment expenses for any federal, state, or local public officials 3,089 2,627 1,459,406 1,078,408 Payments of affiliates 2,078,404 2,079,404 2,0	6	(as defined under section 4958(f)(1)) and persons				
and 403(b) employer contributions)	7	Other salaries and wages	2,460,192	2,108,649	118,484	233,059
10 Payroll taxes 236,950 196,186 20,573	8		107,632	91,151	5,607	10,874
## Amagement	9	Other employee benefits	333,490	293,613	14,971	24,906
Management	10	Payroll taxes	236,950	196,186	20,573	20,191
b Legal	11	Fees for services (non-employees)				
C Accounting 31,403 31,403 31,403	а	Management				
Lobbying Professional fundraising services See Part IV, line 17 118,925	ь	Legal	128,906	125,932	2,705	269
Professional fundraising services See Part IV, line 17	С	Accounting	31,403		31,403	
Total Functional Research	d	Lobbying				
Total Functional Research	е	Professional fundraising services See Part IV, line 17	118,925			118,925
Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	f					· · · · · · · · · · · · · · · · · · ·
12 Advertising and promotion	g	column (A) amount, list line 11g expenses on	4.070.400			457.400
13 Office expenses 135,522 117,871 5,203 14 Information technology 60,381 51,203 2,717 15 Royalties 560,381 51,203 2,717 16 Occupancy 554,042 472,542 24,128 17 Travel 314,523 217,045 4,020 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 582,282 377,645 5,349 20 Interest 3,098 2,627 139 21 Payments to affiliates 13,519 13,519 22 Depreciation, depletion, and amortization 274,880 252,332 6,675 23 Insurance 47,043 32,219 10,759 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) 2,952,637 1,458,566 17,717 1 b Printing & publications 332,203 264,785 1,516 c Miscellaneous 180,834 5,536 173,408 d All other expenses				,	30,923	167,188
14			<u> </u>	,		27,032
15 Royalties		·			· · ·	12,448
16 Occupancy 554,042 472,542 24,128 17 Travel 314,523 217,045 4,020 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 314,523 217,045 4,020 19 Conferences, conventions, and meetings 582,282 377,645 5,349 20 Interest 3,098 2,627 139 21 Payments to affiliates 13,519 13,519 22 Depreciation, depletion, and amortization 274,880 252,332 6,675 23 Insurance 47,043 32,219 10,759 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) 2,952,637 1,458,566 17,717 1 b Printing & publications 332,203 264,785 1,516 c Miscellaneous 180,834 5,536 173,408 d 4 4 4 4 4 4 4 4 4 4 4 4 4 4			60,381	51,203	2,717	6,461
17 Travel		•				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials			554,042	472,542	24,128	57,372
State, or local public officials State, or loca	17		314,523	217,045	4,020	93,458
20 Interest	18	state, or local public officials				
21 Payments to affiliates	19	Conferences, conventions, and meetings	582,282	377,645	5,349	199,288
22 Depreciation, depletion, and amortization	20	Interest	3,098	2,627	139	332
23 Insurance	21	Payments to affiliates	13,519	13,519		
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a Postage and mailhouse	22	Depreciation, depletion, and amortization	274,880	252,332	6,675	15,873
miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a Postage and mailhouse	23	Insurance	47,043	32,219	10,759	4,065
a Postage and mailhouse 2,952,637 1,458,566 17,717 1 b Printing & publications 332,203 264,785 1,516 c Miscellaneous 180,834 5,536 173,408 d e All other expenses 4 4 Total functional expenses. Add lines 1 through 24e 12,659,982 9,392,809 696,541 2	24	miscellaneous expenses in line 24e If line 24e amount exceeds 10%				
b Printing & publications 332,203 264,785 1,516 c Miscellaneous 180,834 5,536 173,408 d All other expenses All other expenses 9,392,809 696,541 2 25 Total functional expenses. Add lines 1 through 24e 12,659,982 9,392,809 696,541 2	а		2,952,637	1,458,566	17,717	1,476,354
c Miscellaneous 180,834 5,536 173,408 d All other expenses 25 Total functional expenses. Add lines 1 through 24e 12,659,982 9,392,809 696,541 2	ь	-	<u> </u>		 	65,902
d e All other expenses Total functional expenses. Add lines 1 through 24e 12,659,982 9,392,809 696,541 2			<u>'</u>			1,890
e All other expenses 25 Total functional expenses. Add lines 1 through 24e 12,659,982 9,392,809 696,541 2	d		1		 	·
25 Total functional expenses. Add lines 1 through 24e 12,659,982 9,392,809 696,541 2	e	All other expenses				
			12.659.982	9.392.809	696.541	2,570,632
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here F 7 if following SOP 98-2 (ASC 958-720)	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	22,000,000	3,032,003	330,311	2,3.0,032
3,717,876 1,769,062 11,085 1			3,717,876	1,769,062	11,085	1,937,729

Part X Balance Sheet

FG	T X	Check if Schedule O contains a response or note to any line in t	his Par	tx			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			216,129	1	1,338,996
	2	Savings and temporary cash investments			2,905,199	2	2,635,708
	3	Pledges and grants receivable, net			875,758	3	1,547,946
	4	Accounts receivable, net			334,865	4	271,097
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	art II of			5	
Assets	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary erorganizations (see instructions) Complete Part II of Schedule II	contribi mploye	uting employers		6	
Š.	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			38,888	9	52,316
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1	1,773,233	,	_	
	ь	Less accumulated depreciation	10b	789,056	1,235,983	10c	984,177
	11	Investments—publicly traded securities			11		
	12	Investments—other securities See Part IV, line 11	1,283,998	12	507,317		
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			187,664	15	157,610
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			7,078,484	16	7,495,167
	17	Accounts payable and accrued expenses			1,059,016	17	885,511
	18	Grants payable			760,149	18	1,360,150
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Sche				21	
Ilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqualif					
Liabiliti		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s.			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Pa	rt X of S	Schedule	4.040.000		1.040.474
		D			1,048,269	25	1,010,174
	26	Total liabilities. Add lines 17 through 25			2,867,434	26	3,255,835
on dh		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	⊽ and	complete			
ĕ	27	Unrestricted net assets			2,800,516	27	2,285,706
Fund Balance	28	Temporarily restricted net assets			1,303,234	28	1,622,009
<u> </u>	29	Permanently restricted net assets			107,300	29	331,617
Ĭ	23	Organizations that do not follow SFAS 117 (ASC 958), check he			107,500	25	331,017
		complete lines 30 through 34.	CIC F	anu			
s or	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
A S	32	Retained earnings, endowment, accumulated income, or other f				32	
Net /	33	Total net assets or fund balances			4,211,050	33	4,239,332
Z	34	Total liabilities and net assets/fund balances			7,078,484	34	7,495,167
	1	. 112ap andac appetbylana palanets	•	•	1,070,704	J-7	1,-100,107

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		12,6	593,546
2	Total expenses (must equal Part IX, column (A), line 25)	2		126	59,982
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			33,564
7	Net assets of fund balances at beginning of year (must equal rate X, line 33, column (A))	4		4,2	211,050
5	Net unrealized gains (losses) on investments	5			-5,282
6	Donated services and use of facilities				<u> </u>
7	Investment expenses	6			
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
		9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		4,2	239,332
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved or	۱		
	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 separ basis, consolidated basis, or both	ate			
	▼ 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?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	!	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: Software Version:

EIN: 43-1131436

Name: The Lupus Foundation of America Inc

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

Form 990, Part VII - Compensation Compensated Employees, and Inde				ıru	ste	es, r	tey	employees, nigi	iest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	more than one box, unless t person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and				
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033-1413-1	2/1033-1413-0	related organizations
Peter M Schwab	5 00	х		х				0	0	0
Chair Carol Ann Petren	5 00	×		x				0	0	0
Vice Chair Keith Brunini	5 00	^							0	
First Vice Chair		Х		Х				0	0	0
Conrad Gehrmann Treasurer	5 00	×		х				0	0	О
Janine Allen	5 00	х		х				0	0	0
Secretary Joseph A Arnold	1 00	X						0	0	0
Director Tamara Atkins	1 00								0	
Director		X						0	0	0
Judy Barlin Director	1 00	×						0	0	О
J Reeve Bright	1 00	х						0	0	0
Corrector Karen B Evans	1 00	×						0	0	0
Director Toni Freeman	1 00									
Director - until 07/2013 Gary Gilkeson MD	1.00	×						0	0	0
Director	1 00	х						0	0	0
Brian Kaplan Director - until 07/2014	1 00	×						0	0	О
Merrillyn J Kosier	1 00	х						0	0	0
Director - until 07/2014 Marguerete A Luter	1 00	X						0	0	0
Director Susan Manzi MD MPH	1 00									
Director		Х						0	0	0
Stephen Rabinowitz Director	1 00	×						0	0	О
Katherine A Ruffatto Director	1 00	х						0	0	0
Kathleen Ruiz	1 00	×						0	0	0
Director Christine Smith	1 00									
Director Marjorie S Susman	1 00	X						0	0	0
Director		х						0	0	0
Fran Tsimoyianis Director	1 00	х						0	0	0
Randall Winston	1 00	х						0	0	0
Director - until 07/2014 Seung-Ae Chung	40 00	-		X				164,474	0	20,891
Chief Financial Officer Sandra C Raymond	40 00							104,474	0	20,691
President and CEO				Х				275,165	0	28,083

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

Mary T Crimmings VP, Marketing & Communications Leslie Hanrahan VP, Education & Research Duane Peters Organizations below dotted line) Or	099-MISC)	organization and related
VP, Marketing & Communications X 175,659 Leslie Hanrahan 40 00 X 162,212 VP, Education & Research X 136,435		organizations
Leslie Hanrahan 40 00 X 162,212 VP, Education & Research X 162,212 Duane Peters 40 00 X 136,435	0	13,370
VP, Education & Research X 162,212 Duane Peters 40 00 X 136,435		
Duane Peters 40 00 X 136,435	0	17,873
X 136,435		
	0	18,175
Sr Dir Marketing & Communications		
Kimberly A Cantor 40 00 X 124,884 VP, Pub Pol & Gov't Relations	0	11,532
Kristine M Hoagland 40 00 X 101,266	0	12,366
Sr Dir Network Development		
Christine A Naylor 40 00 X 104,027	0	9,652
National Dir - until 11/2013		
Mary C Schwarz 40 00 X 101,851	0	2,150
Former COO - until 05/2013		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493044013015

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.

Open to Public Inspection

Name of	the	organization
The Lunus	Four	dation of America I

Employer identification number

43-1131436

Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All org	ganızatıons	must comp	olete this p	art.) See ır	structions.	ı	
Γhe	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	gh 11, check	only one bo)×)			
1	Г	A chur	ch, convent	on of churches, or as	ssociation of	churches de	escribed in s e	ection 170(b)(1)(A)(i).			
2	\sqcap	A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Schedu	ıle E)					
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descri	bed in sectio	n 170(b)(1)	(A)(iii).			
4	Γ	A medi	cal researc	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in sec	tion 170(b)(1)(A)(iii). E	nter the	
_	_			ty, and state								
5	ı	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
_	_	section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
6	<u> </u>			-	=							
7	<u> </u>	_		at normally receives in 170(b)(1)(A)(vi).		•	support from	a governme	ntal unit or fr	om the gene	eral public	:
8	Г			described in sectior			nplete Part II)				
9	Ė		•	at normally receives			•	•	utions. meml	pership fees	. and aros	ss
	•			ities related to its ex								
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less :	section 511	tax) from bu	sınesses	
		acquire	ed by the org	janızatıon after June	30,1975 S	ee section 5	509(a)(2). (C	omplete Par	tIII)	•		
10	Γ	An org	anızatıon or	ganized and operated	d exclusively	to test for p	oublic safety	See section	509(a)(4).			
11	Γ	An org	anızatıon or	ganized and operated	d exclusively	for the bene	efit of, to perf	orm the fund	tions of, or t	o carry out t	he purpo:	ses of
				y supported organiz						ee section 5 0	09(a)(3).	Check
				bes the type of supp b Type II c					gh 11h Гуре III - No	n-functions	lly intogr	atad
e	_			ox, I certify that the								
_	,	•	-	on managers and otl	_		•		•	•	•	
			1509(a)(2)	_		•	,	-				•
f			-	received a written de	etermination	from the IRS	S that it is a	Type I, Type	e II, or Type	III supportı	ng organi	zation,
g			this box August 17-2	2006, has the organi	ization accer	ted any dift	or contribution	on from any	of the			,
9			ng persons?	. o o o , mao emo o i gam	izacion accep	rea any gne	or commission.	on nom un,	01 1110			
		(i) A p	erson who d	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons des	cribed in (ii)		Yes	No
		and (111) below, the	governing body of th	ie supported	organızatıor	1?			11g	(i)	
		(ii) A f	amıly memb	er of a person descri	ıbed ın (ı) abo	ove?				11g((ii)	
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g(iii)	<u> </u>
h		Provide	e the followi	ng information about	the supporte	ed organizati	ion(s)					
	->		(**) F.M.	(***) T	(:) 7 .	1			() ;		l	
_	i) Nam suppoi		(ii) EIN	(iii) Type of organization	(iv) Is t organızatı		(v) Did you the organiz	•	(vi) Is t organizati			nount of etary
	rganiz			(described on	col (i) list		ın col (i) o		col (i) orga		I	port
_			lines 1- 9 above	your gove	_	suppor	t?	ın the U	S?			
	or IRC section document?					nt?						
		(see instructions))										
				,,	Yes	No	Yes	No	Yes	No		
Tota	1		I		I	I	1	I	I	i	I	

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 9,365,277 9,188,501 12,916,423 9,657,896 11,338,917 52,467,014 include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 9,365,277 9,188,501 12,916,423 9,657,896 11,338,917 52,467,014 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 3,615,070 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 48,851,944 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (d) 2012 (f) Total (c) 2011 (e) 2013 beginning in) 🟲 9,365,277 9,188,501 9,657,896 Amounts from line 4 12,916,423 11,338,917 52,467,014 Gross income from interest, dividends, payments received on securities loans, rents, royalties 72,437 68,194 73,816 75,462 69,016 358,925 and income from similar sources 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 42,198 57,897 137,806 73,274 81,813 392,988 capital assets (Explain in Part IV) 11 Total support (Add lines 7 53,218,927 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 91 790 % Public support percentage for 2012 Schedule A, Part II, line 14 15 91 370 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this ►□ box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received (Do not									
2	include any "unusual grants ") Gross receipts from admissions,									
_	merchandise sold or services									
	performed, or facilities furnished in									
	any activity that is related to the organization's tax-exempt									
	purpose									
3	Gross receipts from activities that									
	are not an unrelated trade or									
4	business under section 513 Tax revenues levied for the									
•	organization's benefit and either									
	paid to or expended on its									
_	behalf The value of services or facilities						<u> </u>			
5	furnished by a governmental unit to									
	the organization without charge									
6	Total. Add lines 1 through 5									
7a	A mounts included on lines 1, 2,									
	and 3 received from disqualified persons									
ь	Amounts included on lines 2 and 3									
	received from other than									
	disqualified persons that exceed the greater of \$5,000 or 1% of the									
	amount on line 13 for the year									
c	Add lines 7a and 7b									
8	Public support (Subtract line 7c									
	from line 6)									
	Section B. Total Support Calendar year (or fiscal year beginning (2) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total									
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total			
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,			
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)			
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232				
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322					
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322					
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012					
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322					
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322					
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012					
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012					
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322					
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322					
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011						
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011						
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011						
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011						
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)									
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second							
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,			
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,			
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,			
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,			
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,			
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,			

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

Facts And Circumstances Test					
Return Reference	Explanation				
Schedule A, Part II, Line 10, Explanation of Other Income	Miscellaneous income - 2009 Amount \$ 42,198 2010 Amount \$ 57,897 2011 Amount \$ 137,806 2012 Amount \$ 73,274 2013 Amount \$ 81,813				

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493044013015

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.

Inspection

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

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

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

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

◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** The Lupus Foundation of America Inc 43-1131436 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

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 an		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legisla	104,168		
C	Total lobbying expenditures (add lines 1a and 1b	p)	104,168	
d	Other exempt purpose expenditures		12,409,852	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	12,514,020	
f	Lobbying nontaxable amount Enter the amount f	775,701		
	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		
	Grassroots nontaxable amount (enter 25% of lin	e 1f)	193,925	
h	Subtract line 1g from line 1a If zero or less, ento	er -0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 47	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 Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) Total beginning in) 659,179 734,392 806,668 775,701 2,975,940 Lobbying nontaxable amount Lobbying ceiling amount 4,463,910 (150% of line 2a, column(e)) 62,527 Total lobbying expenditures 39,951 85,793 104,168 292,439 164,795 Grassroots nontaxable amount 183,598 201,667 193,925 743,985 Grassroots ceiling amount 1,115,978 (150% of line 2d, column (e)) Grassroots lobbying expenditures

	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	g Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	.	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 -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

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DLN: 93493044013015

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public Inspection

emal Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .			Inspect	tion	
Name of the organ			Emp	oloyer identifica	tion numbe	er	
The Lupus Foundation o	or whicher the		43-	1131436			
	izations Maintaining Donor Adv		unds	or Accounts	. Comple	te ıf	the
organiz	zation answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised funds		(b) Funds and	other accou	ıntc	
Total number a	t end of year	(a) Donor advised funds		(b) Fullus allu	other accor	1111.5	
	tributions to (during year)						
	nts from (during year)						
Aggregate valu	ie at end of year						
_	zation inform all donors and donor adviso organization's property, subject to the or	-	nor adv	ısed	┌ Yes	Г	No
used only for c	zation inform all grantees, donors, and do haritable purposes and not for the benef				Г Yes	Г	No
	ermissible private benefit? rvation Easements. Complete if	the organization answered "Ves"	to Forr	m 990 Part IV	,	'	_
Purpose(s) of o Preservation Protection Preservation	conservation easements held by the orgon of land for public use (e g , recreation of natural habitat	anization (check all that apply) or education)	n histor certifie	rically importaned historic struc	t land area		
	s 2a through 2d if the organization held a he last day of the tax year	i qualified conservation contribution in	the forr	m or a conserva	tion		
	•			Held at the	End of the	Yea	r
a Total number o	of conservation easements		2a				
b Total acreage	restricted by conservation easements		2b				
Number of con	servation easements on a certified histo	ric structure included in (a)	2c				
historic struct	servation easements included in (c) acq ure listed in the National Register		2d				
	servation easements modified, transferr 	ed, released, extinguished, or terminat	ed by ti	he organization	during		
Number of stat	es where property subject to conservati	on easement is located ►					
	nization have a written policy regarding t f the conservation easements it holds?	he periodic monitoring, inspection, hai	ndling of	f violations, and	☐ Yes	Г	No
Staff and volur	iteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments	during the year			
•	enses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durın	g the year			
	servation easement reported on line 2(o'0(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ction 1	70(h)(4)(B)(ı)	☐ Yes	Г	No
balance sheet,	escribe how the organization reports cor and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financia					
	izations Maintaining Collection ete if the organization answered "Y		or Ot	her Similar	Assets.		
works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in further			
works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le the following amounts relating to thes	ts held for public exhibition, education				ıc	
(i) Revenues i	ncluded in Form 990, Part VIII, line 1			► \$			
(ii) Assets inc	luded in Form 990, Part X						
If the organiza	tion received or held works of art, histor nts required to be reported under SFAS						
Revenues incli	uded in Form 990, Part VIII, line 1			▶ \$			
_	ed in Form 990, Part X				<u></u>		

	🚻 Organizations Maintaining Co	HECHOIIS OF ALL,	11136	. <u>UII</u>	cai ii	Cusu	ies, oi o	uici	Sillillai Ass	sets (c	ontinuea)
	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	 s, che	eck a	·		_		significant use	of its	
a j	Public exhibition		d	Γ	Loan	or exch	nange progr	ams			
ь	Scholarly research		e	Γ	Other	-					
c	Preservation for future generations										
	Provide a description of the organization's co Part XIII	ollections and explain	how	they	/ furthe	r the o	rganızatıon	's ex	empt purpose ır	า	
	During the year, did the organization solicit o									- .,	
Part	assets to be sold to raise funds rather than t Escrow and Custodial Arrang								<u>'</u>	Yes	│ No
Feire	Part IV, line 9, or reported an an						answere	u 10		JU,	
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermed	ıary f	for c	ontribu	tions o	r other ass	ets n		_ Yes	┌ No
b 1	If "Yes," explain the arrangement in Part XII	I and complete the fo	ollowi	ıng t	able		_				
								_	Am	ount	
_	Beginning balance							1c			
	Additions during the year						-	1d			
_	Distributions during the year						-	1e 1f			
	Ending balance	000 Deat V lane	242					TL		- ,,,	
_	Did the organization include an amount on Fo								·	Yes	□ No
	If "Yes," explain the arrangement in Part XII										<u>'</u>
Part	ENDOWMENT Funds. Complete	f the organization (a)Current year		nere nor y						(e)Four v	ears back
1a	Beginning of year balance	107,300	(2).		107,300	J (0)	107,300	 ` ´	107,300	(5). 54. 7	107,300
	Contributions	220,998									
c	Net investment earnings, gains, and losses	4,483			481		535		483		1,076
d	Grants or scholarships	4,403			401				403		1,070
	Other expenditures for facilities	0.10			404				402		1.076
	and programs	818			481		535	<u> </u>	483		1,076
	Administrative expenses	221.062			107.200		107.200		107 200		107.200
_	End of year balance	331,963			107,300		107,300	<u>'</u>	107,300		107,300
	Provide the estimated percentage of the curi		(line	e 1g,	colum	n (a)) h	ield as				
	Board designated or quasi-endowment	0 %									
b 1	Permanent endowment ► 99 900 %										
	remporarily restricted endowment	00 %									
	The percentages in lines 2a, 2b, and 2c sho	•									
	Are there endowment funds not in the posse: organization by	ssion of the organizati	ion ti	nat a	ire neic	and a	aministere	tor	ine	Yes	No
í	(i) unrelated organizations								3a(i	i)	No
	(ii) related organizations								3a(i		No
	If "Yes" to 3a(II), are the related organizatio	•						•	3b		<u> </u>
4 Part	Describe in Part XIII the intended uses of the VI Land, Buildings, and Equipme					2 2 2 2 4	arad 'Vac	' to	Form 990 Pa	rt T\/	ıno.
Part	11a. See Form 990, Part X, line		e or	yan	izatioi	i alisw	reieu ies	ιο	101111 990, Pa	1117,1	iiie
	Description of property				Cost o		(b)Cost or o basis (oth		(c) Accumulated depreciation	(d) E	Sook value
1a La	and										
	uildings										
b B				L			<u> </u>				
	easehold improvements						770	,463	224,71	.8	545,745
c Le	•							,463 5,996	224,71 482,81	_	545,745 253,178
c Le d Ee e O	easehold improvements						735 266	_	-	.8	

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests (3)Other		
(A) Private equity fund (bequeathed)	32,746	F
(B) Beneficial interest in perpetual trust	224,653	F
(C) Long term certificates of deposit	249,918	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 507,317	
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	Complete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
7 1.1 (0.4 (1) (5) (4) (1) (1) (1)	<u> </u>	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization		, Part IV , line 11d See Form 990 , Part X , line 15
(a) Desc	cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. Complete if the org Form 990, Part X, line 25.	janization answered 'Yes' to	Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes	10.044	
Capital lease obligations Deferred lease incentive	19,944	
Deferred rent	342,113	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1 ,010,174	

Part		evenue per Audited vered 'Yes' to Form 990			ts Witi	n Kevenue	per R	eturn Complete if
1	Total revenue, gains, and other						1	12,832,264
2	A mounts included on line 1 bi	it not on Form 990, Part V	III, line 12					
а	Net unrealized gains on inves	tments		2a		-5,282		
b	Donated services and use of f	acılıtıes	[2b		144,000		
c	Recoveries of prior year grant	s	[2c				
d	Other (Describe in Part XIII)		[2d				
e	Add lines 2a through 2d .						2e	138,718
3	Subtract line ${f 2e}$ from line ${f 1}$.						3	12,693,546
4	Amounts included on Form 99	0, Part VIII, line 12, but r	not on line 1					
а	Investment expenses not inc	uded on Form 990, Part V	III, line 7b .	4a				
b	Other (Describe in Part XIII)		[4b]	
С	Add lines 4a and 4b						4c	0
5	Total revenue Add lines 3 and	d 4c. (This must equal Forn	n 990, Part I, line 1	L2) .			5	12,693,546
Part		xpenses per Audited swered 'Yes' to Form 9			nts Wi	th Expense:	s per	Return. Complete
1	Total expenses and losses pe						1	12,803,982
2	A mounts included on line 1 bu	it not on Form 990, Part IX	(, line 25					
а	Donated services and use of f	acılıtıes		2a		144,000		
b	Prior year adjustments			2b				
c	Other losses			2c				
d	Other (Describe in Part XIII)			2d			1	
e	Add lines 2a through 2d						2e	144,000
3	Subtract line 2e from line 1 .						3	12,659,982
4	Amounts included on Form 99	0, Part IX, line 25, but not	on line 1:					
а	Investment expenses not incl	uded on Form 990, Part VI	III, line 7b	4a				
b	Other (Describe in Part XIII)			4b				
C	Add lines 4a and 4b						4c	0
5	Total expenses Add lines 3 a	nd 4c. (This must equal Foi	rm 990, Part I, line	18)			5	12,659,982
Part	XIII Supplemental In	formation						
Part	ide the descriptions required foi V , line 4 , Part X , line 2 , Part XI mation							de any additional
	Return Reference		Explanation					
Part V	, Line 4	The earnings on the donc Foundation's Board appro when it approves the ann	oves the spending (
Part X	, Line 2	The Foundation performe 2014 and 2013, and det accordingly, it has not re	ermined that it has	no ma	terial ur	certain incom	e tax p	

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

Schedule D (Form 990) 2013

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DLN: 93493044013015

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				Employer ident	ification number
I he L	upus Foundation of America Inc				43-1131436	
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 o other assistance, the grantee to award the grants or assista	s' eligibility fo	r the grants o	assistance, and the s	selection criteria used	nd Yes No
2	For grantmakers. Describe in assistance outside the United	l States.	•			s and other
3	Activites per Region (The follow	ing Part I, line 3	table can be di	iplicated if additional spa	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	Europe (Including Iceland & Greenland)	0	0	Program services	Consulting	49,000
(2)	North America	0	0	Program services	Consulting	1,000
(3)						
(4)						
(5)						
	Sub-total	0	0			50,000
b	Total from continuation sheets to Part I	0	0			C
<u>c</u>	Totals (add lines 3a and 3b)	0	0			50,000

Pa						ited States. Compl duplicated if additior			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(:	1)								
(:	2)								
(:	3)								
(4	4)								
2						ies by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganizations or ent	rities					

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 addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? 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

Additional Data

Software ID: Software Version:

EIN: 43-1131436

Name: The Lupus Foundation of America Inc

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).

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DLN: 93493044013015

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Supplemental Information Regarding

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

Open to Public Inspection

lame of th	e organizati	on
he Lupus	Foundation	of America Inc

Employer identification number

43-1131436

Part I	Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 1/.
	Form 990-EZ filers are not required to complete this part.

- Indicate whether the organization raised funds through any of the following activities Check all that apply
- Mail solicitations

to be compensated at least \$5,000 by the organization

- Internet and email solicitations
- Phone solicitations
- In-person solicitations

- e 🔽 Solicitation of non-government grants
- Solicitation of government grants
- ▼ Special fundraising events
- or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
		Yes	No				
1 The Pursuant Group 5151 Belt Line Road Suite 900	Event fundraising counsel		No	1,001,027	45,218	955,809	
Dallas, TX 75254							
2 John Mini Consulting Inc 707 Savannah Road Lewes, DE 199581521	Direct mail		No	793,442	73,707	719,735	
3	Gala management						
The Webster Group 5185 MacArthur Blvd NW 250 Washington, DC 20016	outa management		No	88,433	88,433	0	
4	Direct mail						
Public Interest Communications Inc 7700 Leesburg Pike Falls Church, VA 22043	telefundraising		No	9,782	9,782	0	
5							
						_	
6							
7							
8							
9							
10							
Total				1,892,684	217,140	1,675,544	

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

_		G (Form 990 or 990-EZ) 2013				Page 2				
Pai	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribut							
			(a) Event #1 NYC Butterfly Gala	(b) Event #2 The Hon. Tom Harkin	(c) O ther events	(d) Total events (add col (a) through col (c))				
			(event type)	Tribute Gala (event type)	(total number)					
E E	1	Gross receipts	376,291	. 713,169		1,089,460				
Revenue	2	Less Contributions	281,291	. 654,669		935,960				
	3	Gross income (line 1 minus line 2)	95,000	58,500		153,500				
	4	Cash prizes								
မာ	5	Noncash prizes								
Expenses	6	Rent/facility costs		19,956		19,956				
岛	7	Food and beverages .	84,003	63,230		147,233				
Drea	8	Entertainment	59,250	26,500		85,750				
ā	9	Other direct expenses .								
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(252,939)				
	11	Net income summary Subtract li	ne 10 from line 3, columr	n (d)	•	-99,439				
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than				
 ⊕n		\$13,000 CH (CHI) 530 EZ, III	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col				
Revenue		Gross revenue				(c))				
						+				
enses	2	Cash prizes								
<u>P</u> Kpe	3	Non-cash prizes								
Direct E	4	Rent/facility costs								
<u>ā</u>	5	Other direct expenses								
	6	Volunteer labor	✓ Yes	☐ Yes	│ Yes	_				
	7	7 Direct expense summary Add lines 2 through 5 in column (d)								
	8									
	•		<u> </u>							
9 a		Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states? Yes No If "No," explain								
b										
10a	Wei	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No								
b		Yes," explain								

							11		
Does	s the organization operate gaming activit	ies with nonmember	·s?			Tyes T No)		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity								
	formed to administer charitable gaming	12				· Fyes	Г _№		
13	Indicate the percentage of gaming acti	vity operated in							
а	The organization's facility				13a		%		
b	An outside facility				13b		%		
14	Enter the name and address of the pers	on who prepares the	e organızatıon's gam	ing/special events	books and rec	ords			
	Name •								
	Address ►								
15a	Does the organization have a contract	• •	=	_	_	_	_		
_	revenue?					· · Yes	l No		
b	If "Yes," enter the amount of gaming re				and the				
	amount of gaming revenue retained by			_					
С	If "Yes," enter name and address of the	e third party							
	Name 🟲								
	Address ▶								
16	Gaming manager information								
	Name ►								
Gaming manager compensation ► \$									
	Description of services provided F								
	Director/officer	- Employee	Γ Inc	lependent contract	or				
17	Mandatory distributions								
а	Is the organization required under stat	e law to make charıt	able distributions fro	om the gaming prod	ceeds to				
	retain the state gaming license?					Γ _{Yes}	Г _{No}		
ь	nter the amount of distributions required under state law distributed to other exempt organizations or spent								
	in the organization's own exempt activi	ties during the tax y	vear ► \$						
Pai	rt IV Supplemental Information Part III, lines 9, 9b, 10b, 15 additional information (see	b, 15c, 16, and 1					, and		
	Return Reference	,-		Explanation					
				,	61.11.6/5		F7\ 2042		

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the selection criteria used to award the grants or assistance?

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

(b) EIN

(c) IRC Code

DLN: 93493044013015

OMB No 1545-0047

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

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

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

(a) Name and address of

Schedule I

(Form 990)

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

Inspection Employer identification number

(g) Description of (h) Purpose of grant

The Lupus Foundation of America Inc 43-1131436 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

2	Descr	be in Part IV the organization's procedures for monitoring the use of grant funds in the United States
Par	t II	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to
		Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(d) A mount of cash

organization or government		section if applicable	grant	cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
See Additional Data Table							
2 Enter total number of section 50	1(c)(3) and governm	ent organizations lists	ad in the line 1 table			•	1.8

(e) A mount of non-

(f) Method of

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Inform	nation. Provide the in	formation required in P	art I, line 2, Part III, co	lumn (b), and any other a	dditional information.

Return Reference

Explanation

Part I, Line 2

All grant recipients are required to sign the Foundation's grant award agreement and meet the following conditions - Meet all applicable and relevant guidelines regarding the use of animal and human subjects - Meet all institutional policies and local, state, and federal regulations governing the conduct of research - Submit Internal Review Board and Institutional Animal Care and Use Committee (if applicable) approval from the grant recipient's Institution - Complete and submit the "proposed budget" - Adhere to the Foundation's policy on Inventions and Discoveries - Notify the Foundation of any publication or professional presentation based on Foundation-funded research project and provide the Foundation with electronic copies of any publication or professional presentation made possible, facilitated, expedited, or supported in any way by the award, even if developed, initiated, or finalized after the award period has expired, within 30 days of final production - Acknowledge the Foundation in any and all publications or presentations based, partially or wholly, on or developed under the Award must, unless otherwise requested by the Foundation, with the following statement "This" research was supported by the Lupus Foundation of America, Inc " - All funds are used exclusively toward expenditures for the said research, and no amount of the research grant funds can be used to finance indirect costs - Keep complete and accurate records on the receipt and disbursement of all award funds, and may not co-mingle any funds from other sources Must retain all such records for a period of at least two years after the expiration date of the Agreement and the Foundation has the right to review such records upon request. In addition, all grant recipients are required to submit interim and final reports with a grant installment payment tied to report submission. The reviews the interim and final reports to confirm that the investigator achieved the original study objective - Agree that either party may terminate the agreement for convenience upon thirty (30) days prior written notice to the other party. The Foundation reserves the right to terminate the agreement effective immediately, upon written notice, if the grant recipient (i) is Junable to complete the study, (II) materially alter the study, (III) uses the award grant for prohibited expenses or, (IV) breaches of the agreement and fails to cure such breach within ten (10) days following recipient's or Institution's receipt of written notice thereof - Acknowledge that neither the Foundation, the Institution, nor Investigator shall be liable for any failure to perform any obligations under the agreement if such failure results from causes beyond its reasonable control - Acknowledge that the agreement shall be governed by the laws of the District of Columbia, without regard to its conflict of law rules - Acknowledge that the agreement may not be assigned or transferred without the Foundation's prior written consent

Additional Data

Software ID:

Software Version:

EIN: 43-1131436

Name: The Lupus Foundation of America Inc

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) 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
Albert Einstein College of Medicine 1300 Morris Park Avenue Bronx NY 10461	13-1624226	501(c)(3)	60,000				Research grant Collective Data Analysis Initiative

form 990,Schedule I, Part II, Grants and Other Assistance to 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			
Albert Einstein College of Medicine 1300 Morris Park Avenue Bronx,NY 10461	13-1624226	501(c)(3)	45,000				LFA REAL- Exploratory Study			

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	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Alliance for Lupus Research 28 West 44th Street New York, NY 10036	58-2492929	501(c)(3)	66,667				Lupus Insight Prize A ward			

Form 990,Schedule 1, Pa	form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Brigham and Women's Hospital Inc 4 Black Fan Circle Boston, MA 02115	04-2312909	501(c)(3)	70,000				Career Development A ward				

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	(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				
Columbia University 615 West 131st 3rd Floor New York, NY 10027	13-5598093	501(c)(3)	20,000				LFA REAL- Exploratory Study				

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Duke University Medical Center PO Box 104132 Durham, NC 27708	56-0532129	501(c)(3)	70,000				Career Development Award			

orm 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) 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			
Emory University 1599 Clifton Road NE 4th Floor MS 1599/001/1BH Atlanta, GA 30322	58-0566256	501(c)(3)	10,000				LFA REAL-Exploratory Study			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FNIH 9650 Rockville Park Bethesda, MD 20814	52-1986675	501(c)(3)	25,000				AMP-RA/SLE Research Project			

Form 990,Schedule I, Part II, Grants and Other Assistance to 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			
LFA DCMDVA Chapter 1319 F Street NW Suite 305 Washington,DC 20004	23-7448063	501(c)(3)	25,600				Program grant			

<u>Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States													
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance							
LFA New Jersey Chapter 150 Morris Avenue Springfield, NJ 07081	22-2107053	501(c)(3)	25,600				Supporting organization start-up grant							

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Lupus Therapeutics Inc 2000 L Street NW Washington,DC 20036	46-4170988	501(c)(3)	231,347				Supporting organization start-up grant					

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Medical University of SC 179 Ashley Avenue Charleston, SC 29425	57-6000722	501(c)(3)	135,000				Lifeline grant					

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States													
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance						
Medical University of SC 179 Ashley Avenue Charleston, SC 29425	57-6000722	501(c)(3)	10,000				LFA REAL-Exploratory Study						

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
NY University 545 First Avenue New York, NY 10016	13-5562308	501(c)(3)	135,000				Lıfeline Grant					

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Oklahoma Medical Research Found 825 NE 13th Street Oklahoma City,OK 73104	73-0580274	501(c)(3)	10,000				LFA REAL- Exploratory Study					

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) 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					
The Children Hospital of Philadelphia 34th Civic Center Boulevard Philadelphia, PA 19104	23-1352166	501(c)(3)	500,000				Pediatric Lupus Nephritis Biomarker Panel					

Form 990,Schedule I, Part II, Grants and Other Assistance to 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					
The Regent of the UCLA 11000 Kinross Avenue Suite 211 Los Angeles,CA 90095	95-6006143	501(c)(3)	135,000				Lıfeline Grant					

form 990,Schedule I, Part II, Grants and Other Assistance to 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					
Yale University 47 College Street Suite 203 New Haven, CT 06520	06-0646973	501(c)(3)	135,000				Lıfeline Grant					

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DLN: 93493044013015

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

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.

Open to Public

Internal Revenue Service Name of the organization

The Lupus Foundation of America Inc

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

Inspection

			43-1131436			
Pa	rtI Questions Regarding Compensatio	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d			1b		
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe			2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all tused by a related organization to establish compen	hat apply				
	Compensation committee	Γ	Written employment contract			
	Independent compensation consultant	굣	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, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	l paymen	t?	4a	Yes	
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b		No
С	Participate in, or receive payment from, an equity-b	pased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and p					
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
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 payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,	paid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in Part III $$	n Regula	tions section 53 4958-4(a)(3)? If "Yes," describe	8		No
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	ne rebutta	able presumption procedure described in Regulations	9		140

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

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	'' Incentive I renorranie I		other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)Seung-Ae Chung Chief Financial Officer	(i) (ii)	161,974 0	2,500 0	0	15,214 0	5,677 0	185,365	0
(2)Sandra C Raymond President and CEO	(i) (ii)	250,165 0	25,000 0	0	22,950 0	5,133 0	303,248	0
(3)Mary T Crimmings VP, Marketing & Communications	(i) (ii)	173,159 0	2,500 0	0	12,715 0	655 0	189,029	0
(4)Leslie Hanrahan VP, Education & Research	(i) (ii)	159,712 0	2,500 0	0	12,638 0	5,235 0	180,085	0
(5)Duane Peters Sr Dir Marketing & Communications	(i) (ii)	135,335 0	1,100 0	0	12,940 0	5,235 0	5 154,610 0	0
(6)Mary C Schwarz Former COO - until 05/2013	(i) (ii)	101,851 0	0	0	0	2,150 0	104,001	0

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Also complete this part for any additional information

Return Reference	Explanation
Part I, Line 4a	During the year ended September 30, 2014, Christine A Naylor, National Director, Development and Special Events until November 2013, received a
	severance payment of \$8,462

Schedule J (Form 990) 2013

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DLN: 93493044013015

OMB No 1545-0047

Noncash Contributions

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	e of the organization upus Foundation of America Inc				Employer identificat	ion nu	mber	
	<u> </u>				43-1131436			
Pa	rt I Types of Property							
		(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	etermı	_	ts
1	Art—Works of art							
2	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
5	Clothing and household	X		3,485,888	Fair market value			
6	goods	X	75	22.035	Fair market value			
	Boats and planes		, , ,	22,033	I all market value			
	Intellectual property							
	Securities—Publicly traded .	X	9	19.447	Fair market value			
	Securities—Closely held stock .			,				
	Securities—Partnership, LLC, or trust interests							
L 2	Securities—Miscellaneous							
L3	Qualified conservation contribution—Historic							
L 4	structures							
15	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	O ther ►()							
27	O ther ►()							
	O ther ► ()				<u> </u>			
29	Number of Forms 8283 received for which the organization comple				29		1	
20-	During the year did the erganize	tion receive	a by contribution any propo	rty reported in Dort I lines	1 through 20 that		Yes	No
ova	During the year, did the organiza							
	it must hold for at least three ye				irea to be usea			
	for exempt purposes for the enti					30a		Νo
	If "Yes," describe the arrangement				a a material control of the control	21	Yes	
31	Does the organization have a gif					31	1 65	
32a	Does the organization hire or us contributions?	e third part • • •	<u>-</u>	to solicit, process, or sell	noncash 	32a	Yes	
b	If "Yes," describe in Part II							

describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

	nether the organization is reporting in Part I, column (b), the number of contributions, the served, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
•	The Foundation's processing of donated securities is handled by our investment banking institution, Stifel, Nicolaus & Company, Inc

Schedule M (Form 990) (2013)

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DLN: 93493044013015

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.

► 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	Employer identification number
The Lupus Foundation of America Inc	
	43-1131436

990 Schedule O, Supplemental Information

Return Reference Explanation							
Form 990, Part VI, Section A, line 7b	The chapters have the authority to vote on any proposed changes by the Board of the Directors to the Foundation's bylaws						
Form 990, Part VI, Section B, line 11	The Foundation hires an independent accounting firm to prepare the Form 990. A draft of the Form 990 is first reviewed by the CFO and the final draft of the Form 990 is reviewed by both the CFO and the President & CEO. Before filing the form with the Internal Revenue Se rvice (IRS), a copy of the final draft is distributed to the Finance Committee and the form is reviewed and approved via a telephone conference. Once approved by the Finance Committee, a complete copy of the Form 990 is provided to all members of the Board of Directors before filing the Form with the IRS.						
Form 990, Part VI, Section B, line 12c	At the Foundation's board meeting in the fall, the conflict of interest statement and ques tionnaire are completed and signed by each officer, director, committee member and key emp loyee. All conflict of interest statements and questionnaires are reviewed by the Presiden t & CEO and CFO who note any actual or potential conflicts. There have been no conflicts noted during the year.						
Form 990, Part VI, Section B, line 15	The Executive Committee of the Board (EC) conducts an annual performance evaluation of the President & CEO and recommends salary level changes to the Board of Directors for approva I The recommended changes are based on the most currently available comparability data from the Management Compensation Survey Study published jointly by the National Health Council and the National Human Services Assembly Once approved, one of the members of the EC, generally the Chairman or the Treasurer, notifies the CFO of the new approved compensation arrangement for the President & CEO All other key employees receive an annual performance review by the President & CEO and approved salary increases are documented on each individual's annual performance evaluation form						
Form 990, Part VI, Section C, line 19	The Foundation makes its financial statements available to the public upon request and by posting its annual report and providing a weblink to Guidestar on its website. The federal Form 990 and all other governing documents are available upon request.						

DLN: 93493044013015

2013

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► See separate instructions.

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

Name of the organization The Lupus Foundation of America Inc **Employer identification number**

43-1131436

	(b)	(c)	(d)	(e)	(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income End	d-of-year assets	Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	nizations Complete if i the tax year.	the organization an	swered "Yes" on	Form 990, Pa	rt IV, line 34 because i	t had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity st (if section 501(c		Section (13) co	(g) n 512(ontroll itity?
						Yes	No
1) Lupus America Communities	Supporting organization	DC	501(c)(3)	Line 11c, III-FI			No
2000 L Street NW Suite 410						1	
2000 L Street NW Suite 410			1				
Washington, DC 20036							
Washington, DC 20036 90-0870868	Supporting organization	DC	501(c)(3)	Line 11c, III-FI			No
Washington, DC 20036 90-0870868 (2) Lupus Therapeutics Inc	Supporting organization	DC	501(c)(3)	Line 11c, III-FI			No
Washington, DC 20036 90-0870868 (2) Lupus Therapeutics Inc 2000 L Street NW Suite 410 Washington, DC 20036	Supporting organization	DC	501(c)(3)	Line 11c, III-FI			No
Washington, DC 20036 90-0870868 (2) Lupus Therapeutics Inc 2000 L Street NW Suite 410 Washington, DC 20036	Supporting organization	DC	501(c)(3)	Line 11c, III-FI			No
Washington, DC 20036 90-0870868 (2) Lupus Therapeutics Inc 2000 L Street NW Suite 410 Washington, DC 20036	Supporting organization	DC	501(c)(3)	Line 11c, III-FI			No
Washington, DC 20036 90-0870868 (2) Lupus Therapeutics Inc 2000 L Street NW Suite 410 Washington, DC 20036	Supporting organization	DC	501(c)(3)	Line 11c, III-FI			No
Washington, DC 20036 90-0870868 (2) Lupus Therapeutics Inc 2000 L Street NW Suite 410 Washington, DC 20036	Supporting organization	DC	501(c)(3)	Line 11c, III-FI			No
Washington, DC 20036 90-0870868 (2) Lupus Therapeutics Inc 2000 L Street NW Suite 410 Washington, DC 20036 46-4170988	Supporting organization	DC	501(c)(3)	Line 11c, III-FI			No

Part III	Identification of Related Org because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
	(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		are of Dispropof-year allocat		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin partner		(k) Percentage ownership
						,			Yes	No		Yes	No	
												igspace		
												\vdash		
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share	(g) e of end- -year ssets		(h) ercentage wnership	(i) Section 512 (b)(13) controlled entity?		No.
							1			-	ĺ	Yes	•	No
												l		

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related o	organizations lis	ted in Parts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No
b	Gift, grant, or capital contribution to related organization(s)				1b		No
C	Gift, grant, or capital contribution from related organization(s)				1c		No
d	Loans or loan guarantees to or for related organization(s)				1d		No
е	Loans or loan guarantees by related organization(s)				1e		No
f	Dividends from related organization(s)				1f		No
g	Sale of assets to related organization(s)				1 g		No
h	Purchase of assets from related organization(s)				1h		No
i	Exchange of assets with related organization(s)				1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
0	Sharing of paid employees with related organization(s)				10		No
р	Reimbursement paid to related organization(s) for expenses				1 p		No
q	Reimbursement paid by related organization(s) for expenses				1q		No
r	O ther transfer of cash or property to related organization(s)				1r		No
s	Other transfer of cash or property from related organization(s)				1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this lin (a)		(c)	(d)			
	Name of related organization	(b) Transaction type (a-s)	Amount involved	Method of determining amo	unt in	volved	
							

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

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

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

revenue) that was not a related organization. See instructions i													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013