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Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

<u>A</u> .	For the	e 2014 calendar year, or tax year beginning and	ending					
В	Check if	C Name of organization		D Employer identific	ation number			
	applicabl	THE SURETY & FIDELITY ASSOCIATION						
	Addre	SS OF AMERICA						
F	Name			1 26-na	003391			
H	lchang lnitial							
늗	return Final	,	Room/suite	E Telephone number				
L	—Jreturn.	. (= = = = = = = = = = = = = = = = = =	800	202-463-0600				
_	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	4,231,223.			
	Amen	WASHINGTON, DC 20036-4347		H(a) Is this a group re	turn			
	Application	F Name and address of principal officer LYNN M. SCHUBERT		for subordinates?	Yes X No			
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No			
	Tav.ev	empt status: ☐ 501(c)(3)	or 527	-1	ist. (see instructions)			
_		te: NWW.SURETY.ORG	7 0	H(c) Group exemption	, ,			
		organization: X Corporation Trust Association Other	1 Vans		State of legal domicile: DC			
	art I		IL TEAT	OF IOTHIALION. I JUOI M	State of legal domicile. DC			
		Summary	D3.DE 3					
ρ	1	Briefly describe the organization's mission or most significant activities. \underline{SEE}	PART J	III, LINE 1.				
Activities & Governance								
Ĕ	2	Check this box 🕨 📖 if the organization discontinued its operations or dispe	osed of more	e than 25% of its net as:	sets.			
š	3	Number of voting members of the governing body (Part VI, line 1a)		. 3	18			
g	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	18			
Š	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	14			
iţie	6	Total number of volunteers (estimate if necessary)		6	495			
ફે	7.	•			0.			
Ą	/ a	Total unrelated business revenue from Part VIII, column (C), line 12	7	7a				
	<u>p</u>	Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
		RECEIVED	<i>y</i>	Prior Year	Current Year			
ē	8	Contributions and grants (Part VIII, line 1h)	NS OS	0.	0.			
Revenue	9	Program service revenue (Part VIII, line 2g) 09 2015	쑀 匚	4,082,939.	4,149,783.			
ě	10	Investment income (Part VIII, column (A), lines 3 2 and 70) N 0 9 2013	説 L	20,352.	79,441.			
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	*:-\	1,587.	1,844.			
		Total revenue - add lines 8 through 11 (must equal Part on Good Fire A). line 12)		4,104,878.	4,231,068.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		75,350.	250.			
	1	Benefits paid to or for members (Part IX, column (A), line 4)	-	0.	0.			
			, 	2,576,314.	2,621,813.			
Ses	10	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10,	' <u>-</u>	0.	0.			
Ë	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>					
Expenses	þ	Total fundraising expenses (Part IX, column (D), line 25)	_0. _	4 555 446	4 500 566			
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	}	1,573,410.	1,522,566.			
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		4,225,074.	<u>4,144,629.</u>			
	19	Revenue less expenses. Subtract line 18 from line 12	<u> </u>	-120,196.	86,439.			
Net Assets or l	3		В	eginning of Current Year	End of Year			
Sets	20	Total assets (Part X, line 16)		4,111,438.	4,480,990.			
ASS.	21	Total liabilities (Part X, line 26)		1,309,436.	2,765,279.			
i e	22	Net assets or fund balances Subtract line 21 from line 20		2,802,002.	1,715,711.			
	art II	Signature Block		2,002,002	1,113,111.			
<u> </u>			loo and atoton	and to the best of	Lunguidad and halist it is			
		alties of perjury, I declare that I have examined this return, including accompanying schedu		-	knowledge and belief, it is			
true	e, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of	vnich prepare		/,			
				5/28/	73			
Sig	jn	Signature of officer		Date				
He	re	LYNN M. SCHUBERT, PRESIDENT						
		Type or print name and title						
		Print/Type preparer's name / Priparer's signature / /		Date Check	P00543022			
Pai	d	Tera McKnight VIM McDNA	//	5/26/15 self-employer	- PUU343UAA			
	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN	₹⊥	Firm's EIN	52-1392008			
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N		THE STATE	<u> </u>			
USC	Unity			Dh / 3 /	11 \ 051 0000			
_		BETHESDA, MD 20814-2930		Phone no. (3 (
Ma	u tha II	PS discuss this return with the preparer shown above? (see instructions)			X Ves No			

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2014)

	990 (2014), OF AMERICA 26-000	<u> 3391</u>	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:	_	
	PERFORMS A LEADERSHIP ROLE IN PROMOTING AND PRESERVING THE USE		<u> </u>
	FIDELITY AND SURETY BONDS TO PROTECT PUBLIC AND PRIVATE INTERES	STS.	
2	Did the organization undertake any significant program services during the year which were not listed on		
_	the prior Form 990 or 990-EZ?	Vec	X No
	If "Yes," describe these new services on Schedule O	163	22 140
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Ves	X No
•	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	expenses	5
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the section 501(c)(4) organizations are required to report the section 501(c)(4) organizations are required to report the section 501(c)(4) organization of the section 501(c)(4) organization 501(c)(4) organization 501(c)(4) organization 501(c)(4) orga		
	revenue, if any, for each program service reported	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4a			
	STATISTICAL REPORTS AND ANALYSIS: DATA AND REPORTS REGARDING T	HE SU	RETY
	AND FIDELITY INDUSTRIES PROVIDED TO MEMBERS AND OTHER INTEREST		
	PARTIES.		
	·		
4b	(Code) (Expenses \$		
	EDUCATION AND PROMOTION: PUBLIC SERVICE INFORMATION TO EDUCATE		
	CONSUMERS AND GOVERNMENT OFFICIALS ABOUT SURETY AND FIDELITY BO	ONDS.	
	· · · · · · · · · · · · · · · · · · ·		
			
40			
4c	(Code) (Expenses \$\text{ including grants of \$\frac{\text{ grants of \$\text{ grants of \$\	птог	
	ATTORNEYS TO PROVIDE LEGAL ADVICE ON MATTERS RELATED TO SURETY		1
	FIDELITY BONDS.	MIND	
	FIDENTII BONDS.		
			
	· · · · · · · · · · · · · · · · · · ·		
			
4d	Other program services (Describe in Schedule O)		
Tu	(Expenses \$ including grants of \$) (Revenue \$))	
4e	Total program service expenses		
70	Total program del vide expenses p	Form C	990 (2014
43200: 11-07-		Form 9	990 (2

Form 990 (2014)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		_X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	_X_	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4_	N/	A
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_	_X_	
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_		_X
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		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Χ_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	:		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable		i	
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	X_{\perp}	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b_		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			ı
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	1 <u>1d</u>		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		_X_
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15_		X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	<u>16</u>		<u>X</u>
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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19_		<u>X</u> _
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	\vdash	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	
		Form	990	(2014)

Form 990 (2014),

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Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21_		X_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
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? If "Yes," complete			
	Schedule J	23_	X	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			1
	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	L	X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	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		ļ
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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit]		ļ
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	_N/	<u>A</u>
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	l	,	L
	Schedule L, Part I	25b	_N/	<u>A</u>
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 "Yes,"			ĺ
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	l		ļ
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	_27_		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		l	1
	instructions for applicable filing thresholds, conditions, and exceptions).			٠,,
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			.,
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			, .
04	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		X
31	If "Yes," complete Schedule N, Part I	24		x
20	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31_		
32	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		11
5 4	Part V, line 1	34	X	1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	334		-
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		 -
	If "Yes," complete Schedule R, Part V, line 2	36	N/	A
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		/_	<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	ļ <u>. </u>	-	
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
				(2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u>X</u>
b	If "Yes," enter the name of the foreign country:			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	_		77
_		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_5b_		Α.
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c		
6a	any contributions that were not tax deductible as charitable contributions?	6a		_X_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ou		
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c). N/A			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	_7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	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 N/A 12b	}		
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? N/A	120		
a	Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2014

THE SURETY & FIDELITY ASSOCIATION 26-0003391 Form 990 (2014) OF AMERICA Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Х Section A. Governing Body and Management No 18 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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. 18 b Enter the number of voting members included in line 1a, above, who are independent 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 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? Х 14 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 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website 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. State the name, address, and telephone number of the person who possesses the organization's books and records. LYNN M. SCHUBERT - 202-463-0600

432006 11-07-14

Form **990** (2014)

20036-4347

1101 CONNECTICUT AVENUE, NW, SUITE 800, WASHINGTON

Form 990 (2014) 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

X

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			(0	2)			(D)	(E)	(F)
Name and Title	Average	(do		Posi heck i		i than	one	Reportable	Reportable	Estimated
	hours per	box	, unle:	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of
	week		Jei aii		i ecte	771143		from	from related	other
	(list any hours for	Irect						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	eord	tee			sated		(W-2/1099-MISC)	(88-2/1099-181130)	organization
	organizations	ruste	l is		yee	mpeu		(** 27 1033 141100)		and related
	below	duali	Itoma	_	mplo	stco	 		,	organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			3
(1) STEPHEN HANEY	1.00									
CHAIR		X		X				0.	0.	0 .
(2) ROSS FISHER	0.50									
VICE CHAIR		X		X				0.	0.	0
(3) MICHAEL FAY	0.50									
DIRECTOR		X	ļ				L	0.	0.	0.
(4) WILLIAM CAMERON	0.50	ļ								
DIRECTOR		X				_		0.	0.	0
(5) RICK CIULLO	0.50									
DIRECTOR		X				-		0.	0.	0
(6) JOHN WELCH	0.50									•
DIRECTOR		X				_		0.	0.	0 .
(7) GARY DUNBAR	0.50									•
DIRECTOR	0.50	X	_			 		0.	0.	0
(8) ROBERT THOMAS	0.50	٠,,								•
DIRECTOR	0.50	X						0.	0.	0
(9) HARRY CROWELL	0.50	X						0.	0.	0
DIRECTOR	0.50	^						0.	0.	0
(10) TIM MIKOLAJEWSKI	1.00	x						0.	0.	0
DIRECTOR	0.50	Δ.						0.	<u></u>	<u>_</u>
(11) BRIAN BEGGS DIRECTOR	0.30	x						0.	0.	0
(12) LARRY TAYLOR	0.50	1				<u> </u>				0
DIRECTOR	0,00	x				ļ		0.	0.	0
(13) ALAN PAVLIC	0.50					İ	\vdash			<u>_</u>
DIRECTOR		x						0.	0.	0
(14) JOHN KNOX	0.50									
DIRECTOR		x						0.	0.	0
(15) THOMAS KUNKEL	0.50									
DIRECTOR	1.00	Х						0.	0.	0
(16) ANDREW TUMA	0.50									
DIRECTOR		X				<u> </u>		0.	0.	0
(17) DENNIS BAUS	0.50									
DIRECTOR		X					l	0.	0.	0

12460521 745960 33323

Form 990 (2014) OF AMERIC		,,,,,			231	,,,	, ,	INITON	26-0003	391	Pa	age 8
Part VII Section A. Officers, Directors, Trus		 volc	ees	and	d Hi	ahe	st C	ompensated Employe				
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(do	not c , unle	Pos heck ss pe	ition more rson i		one h an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	com fr org	(F) stimate nount of other pensa om the anizate d relate	of tion e on ed
(18) MICHAEL BOND	0.50							_	_			4
DIRECTOR		X				_		0.	0.			0.
(19) LYNN M SCHUBERT	60.00			37				637 006	0	_	<i>-</i> 0	0.0
PRESIDENT	1.00	\vdash	_	X	-	_		637,006.	0.		6,0	06.
(20) LENORE MAREMA	45.00			х				215 200	0.	2	n 2	07
VICE-PRESIDENT GOV'T AFFAIRS	50.00		-	Λ	├—			215,200.	0.		0,3	0/.
(21) BARBARA FINNEGAN-REIFF	30.00			X				140 500	0.	2	<i>1 1</i>	20
DIRECTOR OF OPERATIONS/TREASURER	50.00	\vdash	-	Λ	-		_	149,589.	<u> </u>		4,4	<u> </u>
(22) ROBERT DUKE	30.00			x				211,951.	0.	1	9,8	ດາ
CORPORATE COUNSEL/SECRETARY	45.00			Δ		_		211,331.			9,0	04.
(23) JOANNE BROOKS	45.00			х				226,800.	0.	1	4,4	5 <i>1</i>
VICE-PRESIDENT/COUNSEL	45.00	\vdash	_	4	_			220,000.			4,4	<u> </u>
(24) JOSEPH ORGOVAN	43.00					x		158,571.	0.		8,4	ΩЗ
DIRECTOR OF IT (25) ALAN CLARK	40.00			-	_	Δ		130,371.		-	0,4	0.5.
ACTUARY	40.00					х		105,995.	0.	1	8,4	15
(26) EDWARD GALLAGHER (SEE SCHED. 0)	40.00	-				Δ	<u> </u>	100,000	·		0,4	1 J •
FORMER SECRETARY/TREASURER	=0.00						x	116,525.	0.		1,1	4 R
1b Sub-total	l				!		<u> </u>	1,821,637.	0.		$\frac{1}{3}, \frac{1}{2}$	
c Total from continuation sheets to Part V	I Section A							0.	0.		<u>, , , , , , , , , , , , , , , , , , , </u>	0.
d Total (add lines 1b and 1c)	ii, Section A							1,821,637.	0.	13	3,2	
Total number of individuals (including but n	ot limited to th	OSE	liste	d at	2016	a) w/t	oo re				<u> </u>	<u> </u>
compensation from the organization						-,	_					8
											Yes	No
3 Did the organization list any former officer, line 1a? If "Yes " complete Schedule I for s			e, ke	y en	nplo	yee,	or h	nighest compensated ei	mployee on	3	x	

	compensation from the organization			
			Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3	_X	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
EDWARD GALLAGHER (SEE SCHEDULE O) 4924 SENTINEL DR, #305, BETHESDA, MD 20816	LEGAL SERVICES	103,025.
2 Total number of independent contractors (including but not limited to those lister \$100,000 of compensation from the organization.	d above) who received more than	

Form 990 (2014)

OF AMERICA

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded (B) (C) Related or Unrelated Total revenue from tax under exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b Fundraising events 1c d Related organizations 1d Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f **Business Code** 2 a MEMBERS' ASSESSMENTS 900099 <u>,672,835.</u>3,672,835 Program Service Revenue 900999 244,221. 244,221 **b STATISTICAL FILERS** c SUBSCRIBER FEES 900099 60,000. 60,000. 50,032. d CASE SUMMARIES SUBS. 900099 50,032. e COMP. COMMITTEE 900099 49,500. 49,500 900099 73,195. 73,195 f All other program service revenue g Total, Add lines 2a-2f 149,783. Investment income (including dividends, interest, and 79,441. 79,441 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (II) Personal (i) Real 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) ▶ 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 а b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 а b Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 999. and allowances а 155. b Less: cost of goods sold b 1,844 1,844 Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a All other revenue Total, Add lines 11a-11d 231 068.4,151, 627 0. 79,441. Total revenue See instructions.

Form 990 (2014)

Part IX Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)							
	Check if Schedule O contains a respor	ise or note to any line in						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to domestic organizations							
	and domestic governments. See Part IV, line 21	250.						
2	Grants and other assistance to domestic							
	individuals See Part IV, line 22							
3	Grants and other assistance to foreign							
	organizations, foreign governments, and foreign	ļ						
	ındıvıduals. See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors,							
	trustees, and key employees	1,560,351.						
6	Compensation not included above, to disqualified							
	persons (as defined under section 4958(f)(1)) and							
	persons described in section 4958(c)(3)(B)							
7	Other salaries and wages	672,696.						
8	Pension plan accruais and contributions (include							
	section 401(k) and 403(b) employer contributions)	203,125.						
9	Other employee benefits	78,090.						
10	Payroll taxes	107,551.						
11	Fees for services (non-employees).							
а	Management	101 554						
b	Legal	121,574. 72,925.						
C	Accounting	12,925.						
d	Lobbying							
e	Professional fundraising services. See Part IV, line 17	8,927.						
f	Investment management fees	0,941.						
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)	114,892.						
12	Advertising and promotion	114,092.						
13	Office expenses	41,940.		<u> </u>				
14	Information technology	31,793.						
15	Royalties	3277330						
16	Occupancy	390,171.						
17	Travel	87,514.						
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	106,364.						
20	Interest							
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	25,849.						
23	Insurance	31,427.						
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 0.)							
а	STATISTICAL REPORTS	220,208.	······································					
b	COMMITTEE ATTEND. FEES	60,200.						
С	GOVERNMENT AFFAIRS	42,307.			_ 			
d	AMICUS BRIEF	40,495.						
е	All other expenses	125,980.						
25	Total functional expenses Add lines 1 through 24e	4,144,629.						
26	Joint costs. Complete this line only if the organization							
	reported in column (B) joint costs from a combined							
	educational campaign and fundraising solicitation.							
	Check here If following SOP 98-2 (ASC 958-720)							

Form 990 (2014).

Part X | Balance She

Pa	rt X	Balance Sheet				
	`	Check if Schedule O contains a response or no	te to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		16,897.	1	332,102.
	2	Savings and temporary cash investments	607,598.	2	1,173,313.	
	3	Pledges and grants receivable, net		3_		
	4	Accounts receivable, net		11,505.	4	52,217.
	5	Loans and other receivables from current and for	ormer officers, directors,			
		trustees, key employees, and highest compensation	ated employees Complete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disquali	fied persons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 501(c)(9) voluntary			
sts		employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7	
⋖	8	Inventories for sale or use		15,791.	8	15,677.
	9	Prepaid expenses and deferred charges		122,057.	9	132,172.
	10a	Land, buildings, and equipment: cost or other				
	!	basis Complete Part VI of Schedule D	10a 374,065.			
	b	Less: accumulated depreciation	10b 307,759.	89,395.	10c	66,306. 2,578,061.
	11	Investments - publicly traded securities		3,022,788.	11	<u>2,578,061.</u>
	12	Investments - other securities. See Part IV, line	11		12	
	13	Investments - program-related See Part IV, line	11		13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11	225,407.	15	131,142.	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	4,111,438.	16	4,480,990.
	17	Accounts payable and accrued expenses		78,580.	17	<u> </u>
	18	Grants payable			18	
	19	Deferred revenue		9,895.	19	<u>296,669.</u>
	20	Tax-exempt bond liabilities			_20	
	21	Escrow or custodial account liability. Complete I			21	
Liabilities	22	Loans and other payables to current and former	, , , , , , , , , , , , , , , , , , , ,			
ÞIII		key employees, highest compensated employee	es, and disqualified persons.			
Lia		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	•		23	
	24	Unsecured notes and loans payable to unrelated	·		24	
	25	Other liabilities (including federal income tax, pa	=			
		parties, and other liabilities not included on lines Schedule D	17-24) Complete Part X of	1 220 061		2 264 042
	26	Total liabilities. Add lines 17 through 25		1,220,961. 1,309,436.	25	2,364,943. 2,765,279.
	20	Organizations that follow SFAS 117 (ASC 958) shock here Y and	1,309,430.	26	4,105,413.
s		complete lines 27 through 29, and lines 33 an				
)Ce	27	Unrestricted net assets	d 54.	2,802,002.	27	1,715,711.
alar	28	Temporarily restricted net assets		2,002,002.	28	1,113,111.
J B	29	Permanently restricted net assets			29	
ŭ		Organizations that do not follow SFAS 117 (A	SC 958) check here		29	
ᅩ		and complete lines 30 through 34.	30 330), check liefe			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	
SSe	31	Paid-in or capital surplus, or land, building, or eq	uunment fund		31	
ΙŢ	32	Retained earnings, endowment, accumulated in	•		32	
ž	33	Total net assets or fund balances	James or Garot fulled	2,802,002.	33	1,715,711.
	34	Total liabilities and net assets/fund balances		4,111,438.	34	4,480,990.
				2/222/2000		Form 990 (2014)

Form 990 (2014)

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

432012 11-07-14

Act and OMB Circular A-133?

X

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Form 990 (2014)

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

OMB No 1545-0047

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Tax) (see separate instructions), then			·	
● Section 501(c)(4), (5), or (6) organization Name of organization THE SUR		CCOCTABLON		loyer identification number
OF AMER	ETY & FIDELITY A	SSOCIATION	Emp	_26-0003391
Part I-A Complete if the org	ganization is exempt und	ler section 501(c) o	r is a section 527 o	rganization.
 Provide a description of the organiz Political expenditures Volunteer hours 	zation's direct and indirect politic	cal campaign activities in		250.
Part I-B Complete if the org	ganization is exempt und	der section 501(c)(3).	
1 Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶ \$	S
2 Enter the amount of any excise tax	incurred by organization manag	ers under section 4955		·
3 If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV		lan acation CO4(a)		(-)(o)
	ganization is exempt und			````
 Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form 	s. Add lines 1 and 2. Enter here a	ther organizations for sec	tion 527 ► \$	
5 Enter the names, addresses and er made payments For each organiza contributions received that were pr political action committee (PAC) If	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to	d from the filing organiza a separate political organ	tion's funds. Also enter the nization, such as a separa	ne amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
CITIZENS FOR SENATOR	ANNAPOLIS, MD		 	
DELORES G. KEL	21401	52-1746809	250	0.

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

Schedule C (Form 990 or 990-EZ) 2014

LHA 432041 10-21-14 SEE PART IV FOR CONTINUATION

THE SURETY & FIDELITY ASSOCIATION

Schedule C (Form 990 or 990-EZ) 2014	OF AMERICA		E04/a)/2)d fil	26-	0003391 Page 2
Part II-A Complete if the org	janization is exe	mpt under sectio	on 501(c)(3) and till	ea Form 5/68 (election under
. —	tion belongs to an aff	ılıated group (and list i	n Part IV each affiliated	group member's nar	me, address, EIN,
expenses, and sha	re of excess lobbying	expenditures)			
B Check 🕨 🔃 if the filing organiza	tion checked box A a	nd "limited control" pr	ovisions apply.		
	ts on Lobbying Expe ditures" means amoi	nditures unts paıd or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	uence public opinion ((grass roots lobbying)			
b Total lobbying expenditures to infli					
c Total lobbying expenditures (add li	ines 1a and 1b)				
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	s (add lines 1c and 1c	d)			
f Lobbying nontaxable amount Ent-	er the amount from th	e following table in bo	th columns		
If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable an	nount is:		
Not over \$500,000	20% of	the amount on line 1e) .		
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,5	\$175,00	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17.	,000,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000	\$1,000,	000			
g Grassroots nontaxable amount (er	iter 25% of line 1f)				
h Subtract line 1g from line 1a. If zer	o or less, enter -0-				
i Subtract line 1f from line 1c. If zero	o or less, enter -0-		Į		
j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
(Some organizations t	hat made a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all c	of the five columns	below.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))	**		ļ		
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount				· - · · · · · · · · · · · · · · · · · · ·	
(150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2014

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2014 OF AMERICA

Part II-B	Complete if the organiz	ation is exempt under	section	501(c)(3) a	ind has NOT	filed Form	i 5768
	(election under section	501(h)).					

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(8	1)	(b)
of the lobbying activity.	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of.				
a Volunteers?	<u> </u>			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?	}			
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?				
 g Direct contact with legislators, their starts, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 	<u> </u>			
i Other activities?	-			
i Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				·
Part III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)	(5), or se	ction	· · · · · ·
501(c)(6).	` '	• • •		
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		Х
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	X	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." 1 Dues, assessments and similar amounts from members		1		2,976.
 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol 	itical	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>	<u>. , , , , , , , , , , , , , , , , , , ,</u>
expenses for which the section 527(f) tax was paid).				
a Current year		2a	5:	L,037.
b Carryover from last year		2b		3,345.
c Total		2c		2,308.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		3,911.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e	excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
expenditure next year?		4_		
5 Taxable amount of lobbying and political expenditures (see instructions)		5	-226	<u>5,219.</u>
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated gro	up list), Part I	I-A, lines 1 a	and 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART I-A, LINE 1:				
THE ORGANIZATION CONTRIBUTED TO THE CAMPAIGN FOR A C	'ANDIDA'	re for		
ELECTIVE OFFICE.				
PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS IN	IFORMAT:	ION:		
CITIZENS FOR SENATOR DELORES G. KELLEY				

432043 10-21-14

Schedule C (Form 990 or 990-EZ) 2014

THE SURETY & FIDELITY ASSOCIATION

Schedule C	(Form 990 o	990·EZ) 2014 ental Infor	OF AM	ERIC	CA					26	<u>-0003391</u>	Page 4
Part IV	Supplem	ental Infor	mation (co	ontinue	ed)							<u> </u>
JAMES	SENATE	OFFICE	BLDG.	RM	302,	11	BLADEN	ST.	ANNAPOLIS,	MD	21401	
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432044 10-21-14

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

THE SURETY & FIDELITY ASSOCIATION OF AMERICA

Employer identification number 26-0003391

Pa	rt I Organizations Maintaining Donor Advis	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lir		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor		e used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa	irt II Conservation Easements. Complete if the o	rganization answered "Yes" to Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organiza	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a hist	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qua	lified conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic st	tructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation e	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	ıt holds?	L Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting	g, and enforcing conservation easements o	during the year
7	Amount of expenses incurred in monitoring, inspecting, and	d enforcing conservation easements during	g the year 🕨 \$
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		L Yes L No
9	In Part XIII, describe how the organization reports conserva		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections		Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	xhibition, education, or research in furthera	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that desc	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	•	
	treasures, or other similar assets held for public exhibition,	education, or research in furtherance of pu	ublic service, provide the following amounts
	relating to these items.		
	(i) Revenue included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tr		al gain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenue included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		> \$

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

Schedule D (Form 990) 2014

4	Descr	ibe in Pa	rt XIII the	ıntended	uses of	the organ	nizatio <u>n'</u> s	s endow	ment f	unds
Pai	t VI	Land,	Buildin	ıgs, an	d Equi	oment.				

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

(i) unrelated organizations

(ii) related organizations

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a, See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings	· · · · · · · · · · · · · · · · · · ·			
c Leasehold improvements		61,028.	24,181.	36,847
d Equipment		298,840.	269,381.	29,459
e Other		14,197.	14,197.	0
otal. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Part X, colur	nn (B), line 10c)	>	66,306

Schedule D (Form 990) 2014

Yes

3a(i)

3a(ii)

3b

No

pA.

	& FIDELITY A	ASSOCIATION	26 0002201 page 5
Schedule D (Form 990) 2014 OF AMERICA Part VII Investments - Other Securities.			26-0003391 Page 3
	. F	- 445 C F 000 D-4 V I	- 10
Complete if the organization answered "Yes"	(b) Book value		Cost or end-of-year market value
(a) Description of security or category (including name of security)	(b) Book value	(c) Wethod of Valuation (Dost of end-or-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)	· 		
(B)			
(C)		<u> </u>	
(D)			
(E)			
<u>(F)</u>			
(G)			
(H)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of Valuation: (Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			1.5
Complete if the organization answered "Yes"		ie 11d. See Form 990, Part X, line	
	Description		(b) Book value
(2)	 		
(3)			
(4)			
(5)	·		
(6)			
(7)	<u> </u>		
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	to Form 990, Part IV, lin		t X, line 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DEFERRED RENT		178,932.	
(3) INS. DEPT. EXAM. RESERVE		105,000.	
(4) ACCRUED POST-RETIREMENT E	ENEFIT	1,030,325.	
(5)_DEFERRED COMPENSATION		131,142.	

2,364,943. Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII X Schedule D (Form 990) 2014

(7) (8) (9) ACCRUED PENSION COSTS

919,544

THE SURETY & FIDELITY ASSOCIATION 26-0003391 Page 4 Schedule D (Form 990) 2014 OF AMERICA Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 4,208,343. Total revenue, gains, and other support per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12 -13,953Net unrealized gains (losses) on investments 2a 2b Donated services and use of facilities 2c c Recoveries of prior year grants 155 2d d Other (Describe in Part XIII) -13,798. e Add lines 2a through 2d 2e 4,222,141. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 8,927 Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) 8,927. c Add lines 4a and 4b 4c .231,068. 4 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 4,135,857. Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a 2b Prior year adjustments c Other losses 2c 155 d Other (Describe in Part XIII) 2d 155. e Add lines 2a through 2d 2e 4,135, 702. Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: 8,927 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 8,927. c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART X, LINE 2: FOR THE YEAR ENDED DECEMBER 31, 2014, THE ASSOCIATION HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS. THE FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR

PART XI, LINE 2D - OTHER ADJUSTMENTS:

THREE YEARS AFTER IT IS FILED.

10-01-14

SCHEDULE (Form 990)

Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

THE SURETY & FIDELITY ASSOCIATION Empl

Employer identification number 26-0003391

Schedule J (Form 990) 2014

OF AMERICA
Questions Regarding Compensation

Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, 2 trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director, Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Written employment contract X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? 42 X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. a The organization? 5a Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 6a 6b b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

432111

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

THE SURETY & FIDELITY ASSOCIATION OF AMERICA

26-0003391

Schedule J (Form 990) 2014 OF AMERICA

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

Page 2

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

		(B) Breakdown of W-2	V-2 and/or 1099-MIS	and/or 1099-MISC compensation	(C) Retirement and	ble	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)·(ı)(a)	in column (B) reported as deferred in prior Form 990
(1) LYNN M SCHUBERT	Ξ	449,806.	180,000.	7,200.	15,600.	10,406.	663,012.	0
SIDENT	(ii)	0	0.	0	0	0	0	0
(2) LENORE MAREMA	(i)	178,925.	36,275.	0	10,882.	9,505.	235,587.	0
V'T AFFAIRS	[m]	0			0	0		0
] (i)	123,852.	25,737.		7,721.	16,707.	174,017.	0
DIRECTOR OF OPERATIONS/TREASURER	<u> </u>	0.	0.		0	0	0.	0
	(i)	175,877.	36,074.	0.	3,607.	16,275.	231,833.	0
L/SECRETARY	(ii)	0	0.	0	0	0	0.	0
	(i)	189,000.	37,800.	0	11,340.	3,114.	241,254.	0
NSEL	(ii)	0	0	0.	0	0	0.	0
	(i)	134,382.	24,189.	.0	8,063.	420.	167,054.	0
DIRECTOR OF IT	(ii)	0	0.	0.	0.	0	0	0.
(7) EDWARD GALLAGHER (SEE SCHED. 0) (i)	(i)	103,025.	0.	13,500.	0	1,148.	117,673.	0
FORMER SECRETARY/TREASURER	<u> </u>	0.	0	0	0.	0	0	0.
	Ξ							
	(ii)							
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23

Schedule J (Form 990) 2014

432112 10-13-14 OF AMERICA

Schedule J (Form 990) 2014

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 Part III Supplemental Information

Page 3

26-0003391

				}						
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!										
						!	,	!		ii

Schedule J (Form 990) 2014

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

THE SURETY & FIDELITY ASSOCIATION Name of the organization OF AMERICA

Employer identification number 26-0003391

FORM 990, PART VI, SECTION A, LINE 6:
SFAA HAS ONE CLASS OF MEMBERS, EACH WITH THE SAME RIGHTS.
FORM 990, PART VI, SECTION A, LINE 7A:
THE NUMBER OF VOTES THAT EACH MEMBER IS ENTITLED TO IS BASED ON THE BALANCE
OF PREMIUMS WRITTEN OVER THEIR LATEST THREE-YEAR CALENDAR PERIOD. MEMBERS
HAVE THE RIGHT TO ELECT BOARD MEMBERS AT THE ANNUAL MEETING AND TO APPOINT
THE SFAA PRESIDENT.
FORM 990, PART VI, SECTION A, LINE 7B:
MEMBERS HAVE THE RIGHT TO ELECT BOARD MEMBERS AT THE ANNUAL MEETING AND TO
APPOINT THE SFAA PRESIDENT. IN ADDITION, MEMBERS VOTE TO RATIFY ANY CHANGES
TO SFAA'S BYLAWS.
FORM 990, PART VI, SECTION B, LINE 11:
THE TAX RETURN WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY
SENIOR MANAGEMENT. MANAGEMENT DISTRIBUTED THE DRAFT OF FORM 990 AND RELATED
SCHEDULES TO THE BOARD MEMBERS FOR COMMENTS AND APPROVAL. A COPY OF THE
FINAL 990 WAS SENT TO THE ENTIRE BOARD BEFORE IT WAS FILED WITH IRS.
FORM 990, PART VI, SECTION B, LINE 12C:
THE BOARD MEMBERS ARE REQUIRED TO REVIEW AND SIGN A NEW CONFLICT OF
INTEREST FORM AT THE FIRST BOARD MEETING EACH YEAR. THE CONFLICT OF
INTEREST POLICY IS THEN DISCUSSED AT EACH SUBSEQUENT BOARD MEETING.
INTEREST FOLICI IS THEN DISCUSSED AT EACH SUBSEQUENT BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 15:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

	THE SURETY & FIDELITY A OF AMERICA	ASSOCIATION	Employer identification number 26-0003391
COMPARABILITY	DATA IS USED IN DETERM	INING SALARIES FOR TH	E PRESIDENT AND
OTHER TOP MANAG	SEMENT POSITIONS. THE	ASSOCIATION PURCHASES	THE CEO
COMPENSATION S	JRVEY EACH YEAR. IN AD	DITION, THE COMPENSAT	ION COMMITTEE
(COMPRISED OF	BOARD MEMBERS) FREQUEN	TLY PERFORM INDEPENDE	NT RESEARCH ON
SALARIES. COM	PENSATION SURVEYS FOR	ASSOCIATIONS ALSO ARE	REVIEWED TO
DETERMINE KEY	POSITION SALARIES, AND	THE DECISION IS DOCU	MENTED. THIS
REVIEW PROCESS	WAS LAST DONE IN NOVE	MBER, 2013.	
FORM 990, PART	VI, SECTION C, LINE 1	9:	
THESE DOCUMENTS	S ARE NOT AVAILABLE TO	THE PUBLIC.	
FORM 990, PART	VII, SECTION A, FORME	R:	
EDWARD GALLAGH	ER RECEIVED COMPENSATION	ON FOR LEGAL SERVICES	PROVIDED IN
2014 AND A DIS	RIBUTION FROM A RETIR	EMENT FUND. HIS SERVI	CES WERE NOT
RELATED TO HIS	PREVIOUS DUTIES AS SE	CRETARY/TREASURER ON	THE BOARD. THE
LEGAL SERVICES	ARE ALSO REPORTED ON 1	PART VII, SECTION B.	
FORM 990, PART	XI, LINE 9, CHANGES II	N NET ASSETS:	
POST RETIREMENT	PENSION EXPENSE, PER	FASB ASC 715	-228,765.
PENSION PLAN EX	(PENSE		-930,012.
TOTAL TO FORM	90, PART XI, LINE 9		-1,158,777.
<u> </u>			
			· · · · · · · · · · · · · · · · · · ·

SCHEDULE R (Form 990)

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

▼ Attach to Form 990.

Open to Public Inspection 2014

OMB No 1545-0047

Employer identification number 26-0003391 Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33 THE SURETY & FIDELITY ASSOCIATION OF AMERICA Name of the organization Department of the Treasury Internal Revenue Service

(g) Section 512(bX13) controlled ž entity? Yes × Direct controlling ASSOCIATION OF entity THE SURETY PIDELITY status (if section Public charity 501(c)(3)) e LINE 7 Exempt Code section DISTRICT OF COLUMBIA 501(C)(3) ਉ Legal domicile (state or foreign country) Primary activity 9 SCHOLARSHIPS 1101 CONNECTICUT AVENUE, NW SUITE 800 THE SURETY FOUNDATION - 73-1728689 Name, address, and EIN of related organization DC 20036-4347 WASHINGTON

SEE PART VII FOR CONTINUATIONS For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule R (Form 990) 2014

THE SURETY & FIDELITY ASSOCIATION

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

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General or Percentage managing ownership Schedule R (Form 990) 2014 Yes No (i) Section 512(b)(13) controlled entity? Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Percentage ownership Yes No Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets <u>6</u> Disproportionate Yes No allocations? Ξ Share of total income ε Share of end-of-year assets Type of entity (C corp, S corp, or trust) <u>e</u> Share of total Income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** Legal domicile (state or foreign country) 28 ত্র (d)
I Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Primary activity <u>a</u> Name, address, and EIN of related organization Name, address, and EIN of related organization 432162 08-14-14 Part IV

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Ī	Yes	Ŷ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	lated organizations listed	In Parts II-IV?		i	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>			1a		×
b Gift, grant, or capital contribution to related organization(s)				1 b		×
c Gift, grant, or capital contribution from related organization(s)				5		×
d Loans or loan guarantees to or for related organization(s)	:			19		×
e Loans or loan guarantees by related organization(s)		٠		<u>-</u>		×
f Dividends from related organization(s)				÷	l	×
g Sale of assets to related organization(s)				19		×
h Purchase of assets from related organization(s)				4		×
i Exchange of assets with related organization(s)				÷		×
j Lease of facilities, equipment, or other assets to related organization(s)				ij		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
	anization(s)			F	×	
m Performance of services or membership or fundraising solicitations by related organization(s)	inization(s)			Ē		×
	(s)			두	×	
o Sharing of paid employees with related organization(s)				9	×	
p Reimbursement paid to related organization(s) for expenses	:			đ		×
q Reimbursement paid by related organization(s) for expenses				19	×	
r Other transfer of cash or property to related organization(s)				+	×	
		•	,	5		×
	who must complete the	is line, including covered	relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved	!	
(1) THE SURETY FOUNDATION	Я	72,433.	72,433.ACTUAL AMOUNTS			
(2) THE SURETY FOUNDATION	ij	20,870.	870. ALLOCATION			
(3) THE SURETY FOUNDATION	٥	80.	ACTUAL AMOUNTS			
(4)						
(5)					ļ	
(6)		i				
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Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) (b)	(a)	(9)	(c) (d) (e)	(c)	[5]	3	(8)	3	(3)
Name, address, and EIN of entity	ctivity	nıcıle oreign y)	Predominant income patiers second (related, unrelated, official) excluded from tax under orgs?	유 S T E	of /ear :s	늘 : 일 : 으	Code V-UBI mount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	Percentage ownership

Schedule R (Form 990) 2014