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CHANGE OF ACCOUNTING PERIOD

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

OMB No 1545-0047 2014
Open to Public Inspection

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

A	For tn	e 2014 calendar year, or tax year beginning 001 1, 2014 and ending	ם ו	C 31, 2014	
В	Check if applicab	C Name of organization		Employer identific	eation number
	chan	Doing business as		27-52	278038
	Initial returr	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite	E Telephone number	
	Final	155 Maggachiightte aveniir nw 2nd	FL	(202	747-2059
	termi			G Gross receipts \$	1,855,500.
Г	Amer		- F		
┌	Appli		─	= :	
AMERICAN BRIDGE 21ST CENTURY FOUNDATION Doing business as Number and street (of P.O. box if mail is not delivered to street address) Room/oute E Telephone number 455 MASSACHUSETTS AVENUE, NW 2ND FI (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059 (202) 747-2059					
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Common of organization Demployer identification number					
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김용	'a	·		 	
⊃	<u> </u>	Net unrelated business taxable income from Form 990-1, line 34	т—	· · · · · · · · · · · · · · · · · · ·	
Wenue Venue		October 1997 and county (Destate)	<u> </u>		
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e	108	Technical rundraising fees (Part IX, column (A) 179	-	377,373.	200,107.
ŭ				1 288 /10	512 163
		Other expenses (Part IX, Column (A), lines 11a-11d, 111-24e)			
		Total expenses. Add lines 13-17 (must equal Part IX, column (13) Prine 23)			
		Revenue less expenses. Subtract line 18 from line 42	Pos		
tso		Total assets (Dark V. limo 46)	Dea		
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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Page 3

	· • • • • • • • • • • • • • • • • • • •		Yes	NO_
	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
	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
	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	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		$\overline{}$	
	during the tax year? If "Yes," complete Schedule C, Part II	4		
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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			_
	Schedule D, Part III	8		<u>X</u>
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		<u>X</u>
0	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	Marie Service Acc	X
1	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.	. A		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		.,	
_	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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	444		х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	X	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
'	the organization's separate of consolidated infancial 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	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		 	
	Schedule D, Parts XI and XII	12a	x	
ь	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
14a	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		X
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	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		l	ŀ
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	<u> </u>
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	ļ	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			🔻
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	 ^-
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	<u> </u>

Form **990** (2014)

rai	Try Officerist of Required Schedules (Continued)			
	Did the serve is the server than 05 000 of server to prother positions at a server demands are server.		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			x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		
22	Part IX, column (A), line 2? 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	\ 		 -
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		X
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	ł		
	Schedule L, Part I	25b		X
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,"	1		l
	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			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			1
	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			İ
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
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			
	contributions? If "Yes," complete Schedule M	30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			3 -
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		٠,
	Schedule N, Part II	32_		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
25-	Part V, line 1	34	├	$\frac{\hat{x}}{x}$
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		 ^
O	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	OFF	١.	
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(a)(3) organizations. Did the organization make any transfers to an example an example and transfers to an example and transfe	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	00	1	1
37	• • • • • • • • • • • • • • • • • • • •	36_	-	+
31	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		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	\ ''	t —	+=
	Note. All Form 990 filers are required to complete Schedule O	38	Х	1
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Par	t 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	28		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		i
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	٦		
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	0		L;
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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		X
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).			j
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	1		
	any contributions that were not tax deductible as charitable contributions?	6a	Х	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		`	
	were not tax deductible?	6b	Х	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			نـــــــٰ
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	or? 7a		X
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	ļ	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0	??		<u> </u>
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.			
a b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b	 	
10	Section 501(c)(7) organizations. Enter:	35		
а	Initiation fees and capital contributions included on Part VIII, line 12			,
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	\dashv		1
11	Section 501(c)(12) organizations. Enter:	\dashv	ĺ	
a	Gross income from members or shareholders	Ì	1	;
b	Gross income from other sources (Do not net amounts due or paid to other sources against	-		
-	amounts due or received from them.)			;
12a	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 12b	1.20	 	\vdash
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	\dashv		1
	Is the organization licensed to issue qualified health plans in more than one state?	13a	—	
_	Note. See the instructions for additional information the organization must report on Schedule O.	1	†	
ь	Enter the amount of reserves the organization is required to maintain by the states in which the		1	;
_	organization is licensed to issue qualified health plans			:
c		\neg	1	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	1	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			n 990	(2014)

Form 990 (2014)

AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27-5278038 Page
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

sect	tion A. Governing Body and Management			
		فسد م	Yes	No_
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 4			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		200	
Ь	Enter the number of voting members included in line 1a, above, who are independent 1b			
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_		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			7.5
	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5_		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		Ì	32
	more members of the governing body?	7a		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	l		v
_	persons other than the governing body?	7b	2.4	<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	11-35	X	لــــــــــــــــــــــــــــــــــــــ
a	The governing body?	8a_		<u>x</u>
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		х
202	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9	L	
<u> </u>	tion b. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
U	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?	11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	. 24.	- "	
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	Х	_
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	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent		3.07	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		7 4 5 g	1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		# 4#	
	taxable entity during the year?	16a	<u> </u>	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	Star		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	***	H35 r	E #450
	exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA , NY , FL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaıla	ble	
	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)	.1.2		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	id finai	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ► THE ORGANIZATION - (202) 747-2059			
	THE ORGANIZATION - (202) 747-2059 455 MASSACHUSETTS AVENUE, NW , NO. 2ND FL, WASHINGTON, DC 200	11		
	433 EMPONETION AVENUE, MM , MO. 2MD LE, MASUINGION, DC 200	-	- 000	

Partivili 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, 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)			(()			(D)	(E)	(F)
Name and Title	Average	(do	not c	Posi heck	more	than o	one	Reportable	Reportable .	Estimated
	hours per week	offic	, unle ceran	ss pe d a d	rson i ırecto	s both r/trus	n an (ee)	compensation from	compensation from related	amount of other
	(list any	Ē						the	organizations	compensation
	hours for	ale d				g g		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensat		(W-2/1099-MISC)		organization
	organizations	al frus	naltr		loyee	dwo:				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DAVID BROCK	12.00							_	_	
CHAIRMAN	ļ	X		Х				0.	0.	52,145
(2) DAVID BENNAHUM	1.00							_	_	_
SECRETARY		X						0.	0.	0
(3) TED TRIMPA	1.00]			l			_	_	_
DIRECTOR		X	<u> </u>					0.	0.	0
(4) MICHAEL KEMPNER	1.00	1							_	
DIRECTOR	46.00	X	乚	<u> </u>	ļ	_		0.	0.	0
(5) BRAD WOODHOUSE	16.00	1	ļ	l						00 450
PRESIDENT		<u> </u>		X	$ldsymbol{f eta}$			0.	0.	88,173
(6) PILAR MARTINEZ	9.50	4								00 014
CHIEF FINANCIAL OFFICER	1 04 00	↓_	ļ	X	_			0.	0.	22,014
(7) EDWARD VALE	24.00				ļ			_	١	co 000
VICE PRESIDENT	16 00	╁		Х	<u> </u>			0.	0.	69,989
(8) JESSICA MACKLER	16.00	4						_		67 005
CHIEF OPERATING OFFICER		╀	⊢	X	H	1		0.	0.	67,805
		-		ļ						
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42007 44 07 44		<u> </u>		<u> </u>		1	<u> </u>	<u> </u>	<u> </u>	Form 990 (201)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hi	ghes	t C	ompensated Employe	es (continued)				
(A)	(B) (C) (D) (E)								(F)				
Name and title	Average	Position (do not check more than one					ากล	Reportable Reportable			Estimated		
	hours per	box.	, unles	ss pe	rsoni	ls botl	an	compensation	compensation	า		ount	
	week	-	er an	dad	irecto	r/trus	(99	from	from related	İ	0	ther	
	(list any	Individual trustee or director	1			1		the	organizations		comp		
	hours for related	or di	၂ ဗူ			ate		organization	(W-2/1099-MIS	C)		m th	
	organizations	ustee	Tust		45	bens		(W-2/1099-MISC)			orga		
	below	ual fr	lonal		ploye	2 a				- 1	and orgar	relat	
	line)	pwb	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orgai	nzau	UIIS
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	L		<u> </u>		<u>L</u>		L		.=				~~
1b Sub-total								0.		0.	300),1	26.
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.
d Total (add lines 1b and 1c)	<u> </u>						▶_	0.	<u> </u>	0.	300),1	26.
2 Total number of individuals (including but r	not limited to th	nose	liste	ed a	bov	e) wl	no r	eceived more than \$100	0,000 of reportabl	е			_
compensation from the organization			_										<u> </u>
												Yes	No
3 Did the organization list any former officer	, director, or tri	uste	e, ke	ey er	mple	oyee	or	highest compensated e	mployee on		·		
line 1a? If "Yes," complete Schedule J for	such individual									. [3	_	X
4 For any individual listed on line 1a, is the s	um of reportab	le c	omp	ensa	atio	n and	d ot	her compensation from	the organization		es 2	1	
and related organizations greater than \$15	0,000? If "Yes,	" cc	mpl	ete :	Sch	edul	e J 1	for such individual		ĺ	4		X
5 Did any person listed on line 1a receive or	accrue compe	nsat	tion '	from	n an	y uni	elat	ted organization or indiv	idual for services	Ī			
rendered to the organization? If "Yes," con	nplete Schedu	le J	for s	uch	per	son					5		X
Section B. Independent Contractors													
Complete this table for your five highest co	ompensated in	dep	ende	ent c	cont	ract	ors 1	that received more than	\$100,000 of com	npens	ation f	rom	
the organization. Report compensation for										•			
(A)								(B)	T		(C	1	
Name and business	s address							Description of s	services	С	omper		on
BONNER GROUP, INC., 455	MASSAC	HU	SE	rr:	Ŝ		_	· -				_	
AVE, #640, WASHINGTON, D				'				FUNDRAISING	SERVICES		209	9 . 5	74.
TRILOGY INTERACTIVE													
PO BOX 4177, MOUNTAIN VI	EW. CA	94	04	0				CONSULTING			1.4	0.0	062.
GASLIGHT, INC.	,						-						

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

Form **990** (2014)

112,220.

314 QUEEN ST, ALEXANDRIA, VA 22314

CONSULTING

Form **990** (2014)

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com			mplete column (A).	
	Check if Schedule O contains a respon		this Part IX		
	ot include amounts reported on lines 6b, 3b, 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				
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				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			···	
5	Compensation of current officers, directors,	200 106	0.47 601	46 400	c 000
	trustees, and key employees	300,126.	247,621.	46,483.	6,022.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	1,100,432.	1,064,052.	36,380.	
7	Other salaries and wages	1,100,432.	1,004,052.	30,380.	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	69,029.	64,702.	4,327.	
9	Other employee benefits	80,199.	76,788.	3,283.	128.
10	Payroll taxes	00,199.	70,700.	3,203.	120.
11	Fees for services (non-employees):				
a	Management Legal	45,000.	42,168.	2,832.	
0	Accounting	11,994.	11,239.	755.	
d	Lobbying		11,233.	7331	
ے م	Professional fundraising services. See Part IV, line 17	206,187.		·········	206,187.
f	Investment management fees				
a a					
9	column (A) amount, list line 11g expenses on Sch O.)	175,257.	175,052.	205.	
12	Advertising and promotion	419.	419.		
13	Office expenses	16,421.	15,420.	1,001.	
14	Information technology	4,550.	4,550.		
15	Royalties		<u> </u>		
16	Occupancy	70,945.	67,395.	3,550.	<u> </u>
17	Travel	63,894.	297.		63,597.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization	31,061.	29,106.	1,955.	
23	Insurance				
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)				
а	amount, list line 24e expenses on Schedule 0.)	78,155.	78,155.		
a	DUES AND SUBSCRIPTIONS	4,781.	4,781.		
O -	DOLD MID BODDCKIFIIOND	7,701.	4,/01•	-	
c d					
a e		9,686.	4,348.	293.	5,045.
е 25_	Total functional expenses. Add lines 1 through 24e	2,268,136.	1,886,093.	101,064.	280,979.
<u>25</u> _	Joint costs. Complete this line only if the organization				20013.31
	reported in column (B) joint costs from a combined			\ 	
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or not	e to any line in this Part X			<u> </u>
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		652,984.	1	409,267.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net	7,500.	4		
ŀ	5	Loans and other receivables from current and fo				
		trustees, key employees, and highest compensa				
I		Part II of Schedule L			5	
- 1	6	Loans and other receivables from other disqualit				
		section 4958(f)(1)), persons described in section				
		employers and sponsoring organizations of sect			ŀ	
2		employees' beneficiary organizations (see instr).			6	
133013	7	Notes and loans receivable, net			7	
£	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
		Land, buildings, and equipment: cost or other	l I .			
		basis. Complete Part VI of Schedule D	10a 320,419	,		1
- 1	h	Less: accumulated depreciation	10b 167,846	183,634.	10c	152,573
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line 1	1		12	
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	25,529.	15	6,660	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	869,647.	16	568,500
	17	Accounts payable and accrued expenses	ar iirie 04)	297,101.	17	369,705
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
		Escrow or custodial account liability. Complete	Part IV of Schodula D		21	
	21	Loans and other payables to current and former				<u></u>
Liabilities	22	key employees, highest compensated employee				
▋			es, and disqualmed persons.		22	A - 1 - 10 - 10 - 10 - 10 - 10 - 10 - 10
<u>=</u>		Complete Part II of Schedule L	stad third parties	-	23	
	23	Secured mortgages and notes payable to unrela			24	
	24	Unsecured notes and loans payable to unrelate				
	25	Other liabilities (including federal income tax, pa parties, and other liabilities not included on lines	•			
		Schedule D	17-24). Complete Fait X of	0.	25	38,885
		Total liabilities. Add lines 17 through 25	·	297,101.	26	408,590
	26	Organizations that follow SFAS 117 (ASC 958	3), check here X and	23,72021	20	200,000
'		complete lines 27 through 29, and lines 33 ar	,,			
ĕ	0.7	Unrestricted net assets	iu 34.	572,546.	27	159,910
튵	27		• •	37273101	28	133/320
<u> </u>	28	Temporarily restricted net assets			29	<u>-</u>
	29	Permanently restricted net assets	SC 059) shock hore		25	
Ξ		Organizations that do not follow SFAS 117 (A	isc 956), check here			
လ ဝ		and complete lines 30 through 34.			30	
sel	30	Capital stock or trust principal, or current funds			_	
AS	31	Paid-in or capital surplus, or land, building, or e		-	31	-
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	icome, or other funds	572,546.	33	159,910
_	33	Total net assets or fund balances	•	869,647.		568,500
	34_	Total liabilities and net assets/fund balances	 	1 009,047.	34	Form 990 (201

review, or compilation of its financial statements and selection of an independent accountant?

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

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

Х

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Act and OMB Circular A-133?

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

2014

Openito Public list ection

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) organizat	ions: Complete Part III.		Te	
IVAII	ne of organization			1 '	loyer identification number
4		N BRIDGE 21ST CE			27-5278038
Ьć	Complete if the org	anization is exempt und	ter section 501(c)	or is a section 527 of	organization.
1	Provide a description of the organiz	ation's direct and indirect politic	cal campaign activities	ın Part IV.	
2	Political expenditures			▶ \$	800,194.
3	Volunteer hours				0.
	_				
Pā	Complete if the org	anization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955		S
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	5 ▶ 9	.
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	olf "Yes," describe in Part IV.			•	
ŀε	ાતા ક્લિ Complete if the org	anization is exempt und	der section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expended	by the filing organization for se	ection 527 exempt fund	ction activities	800,194.
2	Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for s		
	exempt function activities		3	▶ 9	0.
3	Total exempt function expenditures	Add lines 1 and 2 Enter here	and on Form 1120-POL		
•	U 476		und 0111 01111 11201 01	·"	800,194.
4	Did the filing organization file Form		• •		Yes X No
5	Enter the names, addresses and en made payments. For each organizar				
	contributions received that were pro	•	• •		•
	political action committee (PAC). If	• •		•	ate segregated fund of a
	·			 	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0-	
				Turido: Il riorio, cirici o	delivered to a separate
			ľ		political organization.
					If none, enter -0
			'		
_					
				1	I

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

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 A Part II-A Complete if the orga section 501(h)).	MERIC Inizatio	AN BR	IDGE 21ST C	ENTURY FOUNI n 501(c)(3) and file	OATION 27- ed Form 5768 (5278038 Page 2 election under
A Check I if the filing organization expenses, and share	of excess	s lobbying e		Part IV each affiliated	group member's na	me, address, EIN,
Limits	on Lobb	ying Exper			(a) Filing organization's totals	(b) Affiliated group totals
Total lobbying expenditures to influe Total lobbying expenditures to influe Total lobbying expenditures (add lin	ence a leg	islative boo	· ·			
 d Other exempt purpose expenditures e Total exempt purpose expenditures f Lobbying nontaxable amount. Enter 						
If the amount on line 1e, column (a) or Not over \$500,000 Over \$500,000 but not over \$1,000 Over \$1,000,000 but not over \$1,500 Over \$1,500,000 but not over \$17,000 Over \$17,000,000	(b) is: ,000 00,000	The lob 20% of \$100,00 \$175,00	bying nontaxable am the amount on line 1e 0 plus 15% of the exc 0 plus 10% of the exc 0 plus 5% of the exce	ess over \$500,000.		
 g Grassroots nontaxable amount (ent h Subtract line 1g from line 1a. If zero i Subtract line 1f from line 1c. If zero j If there is an amount other than zero reporting section 4911 tax for this year 	or less, e or less, er o on eithe	nter -0- nter -0-	line 1i, did the organiz	ation file Form 4720		Yes No
(Some organizations th	at made a	section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all o	of the five columns	below.
	Lobb	ying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27-5278038 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(:	a)	(b)
of the lobbying activity.	Yes	No	Amo	unt
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?				
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?		<u> </u>		
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j 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		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	ē	2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		. 3		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	itical			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		-
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an				
expenditure next year?	•	4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
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	oup list): Part	II-A. lines 1	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 ENGAGED IN RESEARCH AND TRACKING OF	CANDI	DATES	FOR	
PUBLIC OFFICE.				

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

Employer identification number

	AMERICAN BRIDGE 21			_	27-5278038
Par			or Other Similar Fur	nds or A	counts.Complete if the
	organization answered "Yes" to Form 990, Part IV, In				
		(a) D	onor 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 th	ne assets held in donor a	dvised fund	ls
	are the organization's property, subject to the organization's	s exclusive leg	jal control?	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in wr	iting that grant funds can	be used o	nly
	for charitable purposes and not for the benefit of the donor	or donor advi:	sor, or for any other purp	ose conferr	ing
	impermissible private benefit?	<u> </u>	<u>. </u>	<u> </u>	Yes No
Par	II Conservation Easements. Complete if the or	rganızation an	swered "Yes" to Form 99	0, Part IV, I	ine 7
1	Purpose(s) of conservation easements held by the organization	tion (check all	that apply).		
	Preservation of land for public use (e.g., recreation or	education)	Preservation of a	historically	important land area
	Protection of natural habitat		Preservation of a	certified his	toric structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qual	lified conserva	ation contribution in the fo	orm of a co	nservation easement on the last
	day of the tax year.				
].	Held at the End of the Tax Year
а	Total number of conservation easements			ì	2a
b	Total acreage restricted by conservation easements		•		2b
C	Number of conservation easements on a certified historic st	tructure includ	ded in (a)		2c
d	Number of conservation easements included in (c) acquired	d after 8/17/06	s, and not on a historic st	ructure	
	listed in the National Register			. [2d
3	Number of conservation easements modified, transferred, re	eleased, extin	guished, or terminated by	y the organ	zation during the tax
	year ▶				
4	Number of states where property subject to conservation ea			_	
5	Does the organization have a written policy regarding the pe		oring, inspection, handling) of	<u></u>
	violations, and enforcement of the conservation easements				└─ Yes └─ No
6	Staff and volunteer hours devoted to monitoring, inspecting		=	-	
7	Amount of expenses incurred in monitoring, inspecting, and	_			
8	Does each conservation easement reported on line 2(d) about	ove satisfy the	requirements of section	170(h)(4)(B	···
	and section 170(h)(4)(B)(ii)?		,		└─ Yes └─ No
9	In Part XIII, describe how the organization reports conserva				
	include, if applicable, the text of the footnote to the organization	ation's financ	ial statements that descri	bes the org	anization's accounting for
[Do	t III Organizations Maintaining Collections	of Art Hist	torical Tracquires	- Othor (Similar Accets
Га				r Other (ommar Assets.
	Complete if the organization answered "Yes" to Form				
па	If the organization elected, as permitted under SFAS 116 (A				
	historical treasures, or other similar assets held for public ex			nerance of	public service, provide, in Part XIII,
	the text of the footnote to its financial statements that desc				
Ь	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	it public sei	vice, provide the following amounts
	relating to these items:				. .
	(i) Revenue included in Form 990, Part VIII, line 1		•		5
_	(ii) Assets included in Form 990, Part X				5
2	If the organization received or held works of art, historical tr			_	provide
	the following amounts required to be reported under SFAS	116 (ASC 95)	B) relating to these items:		~ •
a	Revenue included in Form 990, Part VIII, line 1		•	-	S
b	Assets included in Form 990, Part X				▶ \$

		N BRIDGE 21								Page 2
Par										
	Using the organization's acquisition, accession	on, and other records	s, check	any of the	following that	are a sigi	nificant	use of its	collection	items
	(check all that apply):									
а	Public exhibition	d			hange progra	ms				
b	Scholarly research	е	L (Other						
C	Preservation for future generations									
	Provide a description of the organization's co			-	_			ose in Par	XIII.	
	During the year, did the organization solicit or					er sımilar a	ssets	_	,	
	to be sold to raise funds rather than to be ma					· · · · · ·	<u> </u>		Yes_	No_
Par			te if the	organization	n answered "	Yes" to Fo	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Par				····					
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for	contribution	s or other as:	sets not in	cluded		7	
	on Form 990, Part X?	•						L	Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	lowing t	able:						
									Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on Fo						/?		Yes	∐_ No
	If "Yes," explain the arrangement in Part XIII.							÷		
Par	t V. Endowment Funds. Complete it		swered	"Yes" to Fo						····
		(a) Current year	(b) P	rior year	(c) Two year	s back (c) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions .									
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
9	End of year balance									
2	Provide the estimated percentage of the curr	rent year end balance	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment >	%								
C	Temporarily restricted endowment ▶	<u></u> %								
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.								
За	Are there endowment funds not in the posse	ession of the organiza	ation tha	at are held a	ind administe	red for the	e organi	zation	_	
	by:								`	Yes No
	(i) unrelated organizations	•							3a(i)	
	(ii) related organizations						-		3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sched	dule R?					3b	
4	Describe in Part XIII the intended uses of the		wment	funds.						
Pa	t VI Land, Buildings, and Equipm	nent.								
	Complete if the organization answere	d "Yes" to Form 990,	, Part IV	/, line 11a. S	ee Form 990	, Part X, III	ne 10.			
	Description of property	(a) Cost or of			or other		umulat		(d) Book	value
		basis (investr	nent)	basis	(other)	depr	eciation			
1a	Land									
b	Buildings .									
С	Leasehold improvements			<u> </u>						
d	Equipment	,			0,362.		18,2			2,128.
<u> </u>	Other				0,057.	1	<u>49,6</u>	12.),445.
T-4-	I Add lines to through to (Column (d) must s	and Form OOO Dort	V 1	mm (D) /mm 1	10-1			▶	152	573

1	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DUE TO AMERICAN BRIDGE 21ST	
(3)	CENTURY	38,885.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 38,885.

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

Schedule D (Form 990) 2014

Sched	dule D (Form 990) 2014 AMERICAN BRIDGE 21ST CENT	URY FOUNDATION	27-5	278038 Page 4
Parl	XI Reconciliation of Revenue per Audited Financial Staten	nents With Revenue per	Return	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	a		
1	Total revenue, gains, and other support per audited financial statements		1	1,855,500.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		l i	
а	Net unrealized gains (losses) on investments	2a	ا ل	
b	Donated services and use of facilities	2b	-	
C	Recoveries of prior year grants	2c	-	
d	Other (Describe in Part XIII.)	2d		•
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	1,855,500.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	- 1	
b	Other (Describe in Part XIII.)	4b		0
	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	A MACAL F	5	1,855,500.
Par	t XII Reconciliation of Expenses per Audited Financial State		er Ketu	rn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	a	т т	2 260 126
1	Total expenses and losses per audited financial statements		1	2,268,136.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	1 1	
_	Donated services and use of facilities .	2a	-∤ l	
b	Prior year adjustments	2b		
С	Other losses	2c	⊣ ∣	
d	Other (Describe in Part XIII.)	2d		•
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	2,268,136.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	⊣ l	
ь	Other (Describe in Part XIII.)	4b		_
C	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	2,268,136.
	t XIII Supplemental Information.			··
lines	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Part and 4; Par		e 4; Part	X, line 2; Part XI,
	FOUNDATION REQUIRES THAT A TAX POSITION	BE RECOGNIZED C	R DE	RECOGNIZED
BAS	SED ON A "MORE LIKELY THAN NOT" THRESHOLD	. THIS APPLIES T	O PO	SITIONS
TAI	KEN OR EXPECTED TO BE TAKEN IN A TAX RETU	IRN. THE FOUNDATI	ON D	DES NOT
BEI	LIEVE ITS FINANCIAL STATEMENTS INCLUDE, C	OR REFLECT, ANY U	NCER	TAIN TAX
PO	SITIONS. THE FOUNDATION'S IRS FORM 990, F	RETURN OF ORGANIZ	ATIO	N EXEMPT
FRO	OM INCOME TAX, REMAINS OPEN FOR EXAMINATI	ON BY THE FEDERA	L TA	XING
AU'	THORITIES, GENERALLY FOR THREE YEARS AFTE	ER IT IS FILED.		
_				

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ 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/form 990.

OMB No. 1545-0047

ZU 14Open to Public

Internal Revenue Service

Name of the organization

Department of the Treasury

AMEDICAN DRINGS 21CM CENTRIDY POINTAMION

m 990 Inspection
Employer identification number

AMERICA	N BRIDGE 21ST CENT	URY	FO	UNDATION	27-5278	038	
Fundraising Activities required to complete this par	Complete if the organization answert.	ered "Y	es" to	Form 990, Part IV, li	ne 17. Form 990-EZ	filers are not	
 Indicate whether the organization rais a Mail solicitations Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations In-person solicitations Did the organization have a written of key employees listed in Form 990, F If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e X Solicita' f Solicita' g Special or oral agreement with any individual cart VII) or entity in connection with prividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-govern govern ising o ling o onal f	overnment grants nment grants events fficers, directors, trus undraising services?	stees or X Yes	□ No	
(i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Activity (iii) Did fundraiser have custody or control of contributions? (iv) Gross receipts from activity (v) Amount paid to (or retained by) fundraiser fundraiser listed in col. (i)							
BONNER GROUP, INC 455		Yes	No				
MASSACHUSETTS AVE #640	FUNDRAISER CONSULTANT		х	1,680,500.	206,187.	1,474,313.	
Fotal			>	1,680,500.	206,187.		
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	oution	s or has been notifie	d it is exempt from r	egistration	
							
							
		_					

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2014

Pa	rt I		e organization answere	d "Yes" to Form 990, Part	IV, line 18, or reported	more than \$15,000
		of fundraising event contributions and gro				ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
an			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts				
	2	Less: Contributions				
	_					
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
S	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
rect E	7	Food and beverages				
₫	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through	n 9 ın column (d)		•	
	11	Net income summary. Subtract line 10 from li		···	<u> </u>	
Pa	irt		answered "Yes" to Forr	n 990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.		(L) Bull taba (instant		/-N-T-A-1
e			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Revenue	ŀ					ooi. (a) though ooi. (o)
æ	4	Gross revenue				
	ľ	Circoss revenue .				
Ses	2	Cash prizes				
ect Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
		Volunteer labor	Yes %	Yes% No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		•	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<u> </u>	
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming a 'No," explain:				Yes No
10,		ere any of the organization's gaming licenses re	woked suspended or	terminated during the tay		Yes No
		Yes," explain:	-	_		
	-					
40.00					Cab - dul - 0 / 5 -	000 or 000 EZ\ 004
4320	82 0	8-28-14			ocneaule G (F0	rm 990 or 990-EZ) 201

Schedule G (Form 990 or 990-EZ) 2014 AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27-5	<u> 278038</u>	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
to administer charitable gaming?	L Yes	∟ No
13 Indicate the percentage of gaming activity conducted in: a The organization's facility	اممدا	07
b An outside facility	13a	<u>%</u> %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:	<u> </u>	
Name	<u></u> _	
Address >		
Address		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount		
of gaming revenue retained by the third party > \$		
c If "Yes," enter name and address of the third party:		
Name >		
Address ▶		
16 Gaming manager information:		
Garning manager information.		
Name		
Gaming manager compensation ► \$		
Description of services provided		
		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	☐ Yes	☐ No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
organization's own exempt activities during the tax year > \$	0 . 0 4	0h 45h
Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, I 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	nes 9, 9b, 1	UD, 15b,
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISEF	₹S:	
		
(I) NAME OF FUNDRAISER: BONNER GROUP, INC.		
(I) ADDRESS OF FUNDRAISER:		
455 MASSACHUSETTS AVE #640, WASHINGTON, DC 20001		

Schedule G	(Form 990 or 990-EZ) Supplemental Infor	AMERICAN	BRIDGE	21ST	CENTURY	FOUNDATION	27-5278038	Page 4
Part IV.	Supplemental Infor	mation (continue	ed)					
	, .							
		-						
								
								
		-	•			·		
	·		<u> </u>					
						, ,		
							 	
								
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	<u> </u>							

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 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Name of the organization 2100 **Employer identification number**

AMERICAN BRIDGE 2	TOT CENTURY FOUN	IDATION 2	<u> </u>	
FORM 990, PART I, LINE 1, DESCRIE	TION OF ORGANIZA	TION MISSIC	ON:	
POLICY CONCERNS. FURTHER, THE FOL	NDATION RESEARCH	IES AND REFU	JTES	
CONSERVATIVE POLICIES THAT WE BEI	IEVE WOULD UNDER	MINE OUR NA	ATION'S	
FUTURE AND EDUCATES THE AMERICAN	PEOPLE ON THE RE	SULTS OF TH	IOSE	
FINDINGS.				
FORM 990, PART VI, SECTION A, LIN	IE 8B:			
THE ORGANIZATION HAS NO SEPERATE	COMMITTEES WITH	AUTHORITY T	O ACT ON	BEHALF
	-			

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

THE GOVERNING BODY.

THE ORGANIZATION'S MANAGEMENT AND LEGAL COUNSEL REVIEW THE FORM 990 PRIOR ITS SUBMISSION WITH THE IRS.

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

THE CONFLICT OF INTEREST POLICY IS REQUIRED TO BE DISTRIBUTED TO EACH OFFICER AND DIRECTOR. THE CONFLICT OF INTEREST POLICY REQUIRES DISCLOSURE OF ANY POTENTIAL CONFLICT OF INTEREST. IF SUCH DISCLOSURES IS MADE, BOARD OF DIRECTORS INVESTIGATES TO DETERMINE IF A CONFLICT OF INTEREST THE INDIVIDUAL HAVING THE POTENTIAL CONFLICT OF EXCLUDED FROM THESE PROCEEDINGS.

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

OFFICER COMPENSATION IS APPROVED BY THE BOARD OF DIRECTORS. A COMPARISON USED OF LEADERS OF OTHER ORGANIZATIONS WITH SIMILIAR QUALITIES.