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DLN: 93493092006486

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

 \blacktriangleright Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

2014

Open to Public Inspection

A F	or the	2014 cal	endar year, or tax year beginni	ng 06-01-2014 ,and ending (05-31-2015				
B Ch	eck if a	applicable	C Name of organization THE GERMAN MARSHALL FUND OF	THE UNITED STATES			D Emplo	yer iden	tification number
☐ Ad	dress c	hange					52-0	954751	
☐ Na	ıme cha	ange	Doing business as						
┌ Ini	tıal retu	urn					F Telenh	one numb	ner
⊢ Fir			Number and street (or P O box if 1744 R STREET NW	mail is not delivered to street address	s) Room/suite				
		rmınated					(202) 683-2	650
_		return n pending	City or town, state or province, co WASHINGTON, DC 20009	untry, and ZIP or foreign postal code			G Gross	receipts \$	64,846,691
			F Name and address of pr	ıncıpal officer		H(a) Is th	∎ Is a grou!	return	for
			KAREN DONFRIED 1744 R STREET NW				rdınates?		┌ Yes 🗸 No
			WASHINGTON, DC 2000	Э		H(b) Are a	all subord	inatec	┌ Yes ┌ No
						inclu		mates	1 1631 110
I Ta	ax-exer	mpt status	▼ 501(c)(3)	(insert no) 4947(a)(1) or	527	If"N	o," attacl	nalist ((see instructions)
J W	/ebsit	e:► HT	TP //WWW GMFUS ORG			H(c) Grou	ıp exemp	tion num	nber ►
K For	m of o	rganization	Corporation Trust Associat	on Other ►	<u> </u>	L Year of fo	rmation 1	972 M :	State of legal domicile DC
Pa	rt I	Sum	mary			1			
	1	Briefly de	escribe the organization's miss	ion or most significant activities	es				
			<u>TING GREATĒR COOPERATIO</u>			HE UNITED	STATES	ANDE	UROPE
ည									
Ē									
ě	2	Check th	nis box দ if the organization o	liscontinued its operations or o	disposed of i	more than 2	5% of its	net ass	sets
Governance								1 1	
2 6	1		of voting members of the gover					3	21
Activities &	1		of independent voting members					4	20
₹ ₹	1		mber of individuals employed in					5	67
ĕ			mber of volunteers (estimate if					6	20
			related business revenue from lated business taxable income					7a 7b	-763,484 763,734
	B	Net unie	Tateu pusifiess taxable filcoffie	110111 FOTHI 990-1, IIIIe 34 .			r Year	/	-763,734 Current Year
	g	Contri	butions and grants (Part VIII,	line 1 h)		FIIC	25,811,	577	17,533,741
ā	9		im service revenue (Part VIII,	·				224	38,536
Revenue	10		ment income (Part VIII, colum				11,043		9,839,811
æ	11		revenue (Part VIII, column (A					888	40,729
	12		revenue—add lines 8 through 1						
	<u> </u>						36,995		27,452,817
	13		s and similar amounts paid (Pai				6,671,	862	5,075,242
	14		ts paid to or for members (Part					0	0
82	15	5-10)	es, other compensation, employ	ree benefits (Part 1X, column (A), lines		13,374	415	12,024,969
Ě	16a	Profes	sional fundraising fees (Part I)	(, column (A), line 11e)				0	0
Expenses	ь	Total fu	ndraising expenses (Part IX, column (D), line 25) ▶ <u>804,168</u>					
ш	17		expenses (Part IX, column (A)				17,986	171	14,729,905
	18		expenses (Part 1x, column (A) expenses Add lines 13–17 (m				38,032		31,830,116
	19		ue less expenses Subtract line		-		-1,037		-4,377,299
<u>ም</u>			,			Beginnin			
Net Assets or Fund Balances							'ear		End of Year
25. B.25.	20		assets (Part X, line 16)				208,002,		200,122,229
2 E	21		iabilities (Part X, line 26) .				24,838,		21,679,316
	22		sets or fund balances Subtrac	t line 21 from line 20			183,164,	865	178,442,913
	rt II	_	ature Block						
my k	nowle		perjury, I declare that I have e belief, it is true, correct, and co nowledge						
		****	**			20	016-04-01		
Sigi	n	Signa	ature of officer				ate		
Her			DRAH R IWIG CHIEF FINANCIAL OFFIC	ER					
		17	or print name and title						
_	_		rint/Type preparer's name 'ONG ZHANG CPA	Preparer's signature YONG ZHANG CPA	Date	Cite	eck lif employed	PTIN P01249	
Pai		F	irm's name FRSM US LLP	1	I		-employed n's EIN 🟲 4	<u> </u>	
	pare		irm's address - 1001 INTERNATIONS	DDB/E CLITTE 400					
Use	e On	ıly ˈ	irm's address 🟲 1861 INTERNATIONAL	. DK1VE SUITE 400		Pho	ne no (70	o) 336-64	UU
		1	MCLEAN, VA 22102			1			

(Code

4b

) (Expenses \$

Forr	orm 990 (2014)													Рa	ige 2
Pai	rt III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III													<u>.</u> [
1	Brief	y describe the organization's mission													
NAT	IONAL	AN MARSHALL FUND OF THE UNITED STATES (GMF) STRENGTHENS TRA ., AND GLOBAL CHALLENGES AND OPPORTUNITIES IN THE SPIRIT OF T	НЕ	МΑ	RSH	ALL	PLA	N G	MF	DO	ES T	HIS	S BY		-,

MEMBERS OF THE POLICY AND BUSINESS COMMUNITIES, BY CONTRIBUTING RESEARCH AND ANALYSIS ON TRANSATLANTIC TOPICS, AND BY PROVIDING EXCHANGE OPPORTUNITIES TO FOSTER RENEWED COMMITMENT TO THE TRANSATLANTIC RELATIONSHIP IN ADDITION, GMF SUPPORTS A NUMBER OF INITIATIVES TO STRENGTHEN DEMOCRACIES FOUNDED IN 1972 AS A NON-PARTISAN, NON-PROFIT ORGANIZATION THROUGH A GIFT FROM GERMANY AS A PERMANENT MEMORIAL TO MARSHALL PLAN ASSISTANCE, GMF MAINTAINS A STRONG PRESENCE ON BOTH SIDES OF THE ATLANTIC IN ADDITION TO ITS HEADQUARTERS IN WASHINGTON, DC, GMF HAS OFFICES IN BERLIN, PARIS, BRUSSELS, BELGRADE, ANKARA, BUCHAREST, AND WARSAW GMF ALSO HAS SMALLER REPRESENTATIONS IN BRATISLAVA, TURIN, AN

2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

6,843,677 4,861,049) (Revenue \$ CIVIL SOCIETY TRUSTS BALKAN TRUST FOR DEMOCRACYTHE BALKAN TRUST FOR DEMOCRACY (BTD) IS GRANTMAKING INITIATIVE THAT SUPPORTS DEMOCRACY, GOOD GOVERNANCE, AND EUROATLANTIC INTEGRATION IN SOUTHEASTERN EUROPE BTD WAS CREATED IN 2003 BY THE GERMAN MARSHALL FUND OF THE UNITED STATES, THE UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID), AND THE CHARLES STEWART MOTT FOUNDATION BTD'S ORIGINAL TEN-YEAR MANDATE CAME TO AN END IN MAY 2013 BTD THEN ENTERED INTO ITS SECOND MANDATE (2013-2020) WITH STRUCTURAL CHANGES TO GEOGRAPHIC COVERAGE AND GRANTMAKING SCOPE BTD OPERATES WITH A SMALL, SKILLED STAFF WITH EXTENSIVE EXPERIENCE IN THE REGION THROUGH ITS GRANTMAKING, BTD SUPPORTS A WIDE RANGE OF INNOVATIVE AND CREATIVE FORMS OF PUBLIC OUTREACH, CROSS-BORDER AND REGIONAL EXCHANGES, AND INTER-COMMUNITY DIALOGUE THE BLACK SEA TRUST FOR REGIONAL COOPERATIONTHE BLACK SEA TRUST FOR REGIONAL COOPERATION (BST) PROMOTES GOOD GOVERNANCE, STABILITY AND SECURITY IN THE WIDER BLACK SEA REGION THE TRUST ENCOURAGES ACCOUNTABLE, TRANSPARENT, AND OPEN GOVERNMENTS, STRONG, EFFECTIVE CIVIC SECTORS, INDEPENDENT, OBJECTIVE AND PROFESSIONAL MEDIA, CONSTANT DIALOGUE BETWEEN GROUPS AND SOCIETIES IN CONFLICT AREAS, COHERENT AND EFFECTIVE EUROPEAN POLICIES IN AND ON THE REGION, STRONG TRANSATLANTIC COOPERATION IN PROMOTING STABILITY AND DEVELOPMENT OF THE REGION FUND FOR BELARUS DEMOCRACYTHE FUND FOR BELARUS DEMOCRACY MAKES SUPPORT AVAILABLE TO CITIZEN INITIATIVES, INDEPENDENT MEDIA, AND HUMAN RIGHTS GROUPS, ENABLING THEM TO RESIST THE PRESSURES OF A DICTATORIAL REGIME AND WORK TOWARDS ITS DEMOCRACY ONE OF THE LARGEST SUPPORT PROGRAMS AVAILABLE TO CIVIL SOCIETY IN BELARUS SUPPORT UNDER THIS PROGRAM WILL BE PROVIDED BELARUS DEMOCRACY ONE OF THE LARGEST SUPPORT PROGRAMS AVAILABLE TO CIVIL SOCIETY IN BELARUS SUPPORT UNDER THIS PROGRAM WILL BE PROVIDED FOR AS LONG AS REQUIRED FOR THE DEMOCRATIZATION AND EUROPEAN INTEGRATION OF BELARUS KEY ACTIVITIES OF THE FUND INCLUDE SMALL-GRANT SUPPORT, SHARING OF TRANSITION EXPERIENCES, CAPACITY-BUILDING AND INTERNATIONAL ADVOCACY

including grants of \$

) (Expenses \$ 4,373,753 including grants of \$) (Revenue \$ MAJOR CONFERENCEBRUSSELS FORUM BRUSSELS FORUM IS AN ANNUAL HIGH-LEVEL MEETING OF THE MOST INFLUENTIAL NORTH AMERICAN AND EUROPEAN MAJOR CONFERENCEBRUSSELS FORUM BRUSSELS FORUM IS AN ANNOLAL HIGH-LEVEL MEETING OF THE MOST INFLUENTIAL NORTH AMERICAN AND EOROPEAN POLITICAL, CORPORATE, AND INTELLECTUAL LEADERS TO ADDRESS PRESSING CHALLENGES CURRENTLY FACING BOTH SIDES OF THE ATLANTIC PARTICIPANTS INCLUDE HEADS OF STATE, SENIOR OFFICIALS FROM THE EUROPEAN UNION INSTITUTIONS AND THE MEMBER STATES, U.S. CABINET OFFICIALS, CONGRESSIONAL REPRESENTATIVES, PARLIAMENTARIANS, ACADEMICS, AND MEDIA BY BRINGING TOGETHER LEADING POLITICIANS, THINKERS, JOURNALISTS, AND BUSINESS REPRESENTATIVES, BRUSSELS FORUM HELPS SHAPE A NEW TRANSATLANTIC AGENDA THAT CAN ADAPT TO CHANGING GLOBAL REALITIES AND NEW THREATS ATLANTIC DIALOGUES IS AN ANNUAL HIGH-LEVEL GATHERING OF THE MOST INFLUENTIAL PUBLIC- AND PRIVATE-SECTOR LEADERS FROM ADDITIONAL THE ATLANTIC DIALOGUES IS AN ANNUAL HIGH-LEVEL GATHERING OF THE MOST INFLUENTIAL PUBLIC- AND PRIVATE-SECTOR LEADERS FROM AROUND THE ALLANTIC DIALOGUES IS AN ANNUAL HIGH-LEVEL GATHERING OF THE MOST INFLORM TALL PUBLIC- AND PRIVATE-SECTOR LEADERS FROM AROUND THE ALLANTIC BASIN FOR THREE DAYS OF OPEN, INFORMAL DISCUSSION ON CROSS-REGIONAL ISSUES RANGING FROM SECURITY TO ECONOMICS, MIGRATION TO ENERGY PARTICIPANTS FROM NORTH AND SOUTH AMERICA, AFRICA, EUROPE, AND ASIA INCLUDE SENIOR OFFICIALS, BUSINESS LEADERS, OPINION SHAPERS AND THE MEDIA AT THE ATLANTIC DIALOGUES PARTICIPANTS ANALYZE THE SHARED POLICY CHALLENGES SHAPING THE FUTURE OF FOUR CONTINENTS AROUND THE ATLANTIC BASIN AND EXPLORE POLICY RESPONSES THROUGH INTERACTIVE PANELS AND SMALLER BREAK-OUT SESSIONS, THE ATLANTIC DIALOGUES AIMS TO CREATE A UNIQUE ATMOSPHERE FOR INTELLECTUAL EXCHANGE AND NETWORKING, AND ENABLE ALL PARTICIPANTS TO BE FULLY

ENGAGED IN THE DEBATES 3.773.157

including grants of \$

FOREIGN AND SECURITY POLICY PROGRAMTHE FOREIGN AND SECURITY PROGRAM (FSP) AT GMF COMPRISES A STREAM OF ACTIVITIES FURTHERING OBJECTIVE ANALYSIS AND DEBATE ON GEOPOLITICAL QUESTIONS OF TRANSATLANTIC CONCERN THE PROGRAM SPANS REGIONAL AND FUNCTIONAL ISSUES, FROM NATO AFFAIRS TO ENERGY SECURITY, INCLUDING CHALLENGES AND OPPORTUNITIES IN EUROPE'S EAST, THE STRATEGIC ENVIRONMENT IN THE MEDITERRANEAN, AND THE ROLE OF TURKEY AS A TRANSATLANTIC PARTNER FSP ALSO HOUSES GMF'S SUBSTANTIAL PROGRAM OF WORK ON ASIA, EMERGING POWERS, AND THE "WIDER ATLANTIC" A HALLMARK OF THIS WORK IS PLACING GLOBAL ISSUES IN A TRANSATLANTIC PERSPECTIVE, WITH AN EMPHASIS ON TRILATERAL PROJECTS MEDITERRANEAN THE MEDITERRANEAN POLICY PROGRAM ENCOURAGES OPEN, OBJECTIVE DEBATE AND ANALYSIS ON MEDITERRANEAN POLICY QUESTIONS, WITH AN EMPHASIS ON TRANSATLANTIC STAKES AND STRATEGIES OUR WORK SPANS SOUTHERN EUROPE, TURKEY, NORTH AFRICA AND THE LEVANT, AND UNDERSCORES THE GROWING INTERDEPENDENCE BETWEEN THE MEDITERRANEAN AND ADJACENT REGIONS, AND THE CONNECTIONS BETWEEN MEDITERRANEAN, TRANSATLANTIC, AND GLOBAL DYNAMICS IN ADDITION TO SENIOR POLICYMAKERS AND ESTABLISHED EXPERTS, GMF ENDEAVORS TO BRING NEW AND YOUNGER VOICES TO THESE DEBATES THE MEDITERRANEAN POLICY PROGRAM IS CONDUCTED IN PARTNERSHIP WITH THE COMPAGNIA DI SAN PAOLO, THE OCP FOUNDATION AND NOBLE ENERGY IT IS A FOCAL POINT FOR GMF'S COOPERATION WITH SOUTHERN EUROPEAN AND SOUTHERN MEDITERRANEAN INSTITUTIONS, INCLUDING IAI (ISTITUTO AFFARI INTERNAZIONALI) IN ROME THE MEDITERRANEAN STRATEGY GROUP, THE CORE CONVENING ACTIVITY OF THE PROGRAM, ADDRESSES TOPICS OF CONCERN TO GOVERNMENTS AND THE PRIVATE SECTOR, INCLUDING FOREIGN AND DEFENSE POLICY, ECONOMICS AND FINANCE, MARITIME COMMERCE, AND ENERGY SECURITY THE EASTERN MEDITERRANEAN ENERGY PROJECT FOCUSES ON THE POLITICAL AND ECONOMIC PROGRAM, ADDRESSES TOPICS OF CONCERN TO GOVERNMENTS AND THE PRIVATE SECTOR, INCLUDING FOREIGN AND DEFENSE POLICY, ECONOMICS AND FINANCE, MARITIME COMMERCE, AND ENERGY SECURITY THE EASTERN MEDITERRANEAN ENERGY PROJECT FOCUSES ON THE POLITICAL AND ECONOMIC IMPLICATIONS, RISKS, AND OPPORTUNITIES FLOWING FROM THE RECENT ENERGY DISCOVERIES IN THE EASTERN MEDITERRANEAN REGION WIDER ATLANTICTHE WIDER ATLANTIC PROGRAM PROMOTES AN UPDATED STRATEGIC UNDERSTANDING OF THE INTERESTS, THREATS, AND OPPORTUNITIES PARTICULAR TO THE ATLANTIC COMMUNITY, NORTH AND SOUTH, EAST AND WEST THIS UNDERSTANDING, AND THE COLLABORATION IT CAN LEVERAGE, INCREASINGLY WILL BE CRUCIAL TO ACHIEVING THE GOALS OF PROSPERITY AND SECURITY AT THE CORE OF THE TRADITIONAL TRANSATLANTIC RELATIONSHIP AND THE INTERESTS OF A MORE EXPANSIVE BASIN-WIDE COMMUNITY THE ATLANTIC BASIN HAS RENEWED IMPORTANCE TO GLOBAL ORDER, AND THIS IS AN IMPORTANT MOMENT TO FOCUS ATTENTION ON THE WIDE SPECTRUM OF VALUES AND INTERESTS COMMON TO ATLANTIC SOCIETIES-AND TO EXPLORE HOW THOSE AFFINITIES CAN STRENGTHEN COOPERATION THAT PROTECTS THOSE INTERESTS AND ADVANCES SECURITY AND PROSPERITY BROADLY TRILATERAL STRATEGY GROUPTHE TRILATERAL STRATEGY GROUP IS A MULTI-YEAR PROJECT UNDERTAKEN BY GMF IN PARTNERSHIP WITH TURKISH INDUSTRY AND BUSINESS ASSOCIATION (TUSIAD), KO HOLDING, AND THE MINISTRY OF FOREIGN AFFAIRS OF SWEDEN THE GROUP MEETS ROUGHLY TWICE EACH YEAR TO DISCUSS CRITICAL ISSUES (TOSIAD), KO HOLDING, AND THE MINISTRY OF FOREIGN AFFAIRS OF SWEDEN. THE GROUP MEETS ROUGHLY TWICE EACH YEAR TO DISCUSS CRITICAL ISSUES AFFECTING TURKEY, THE EUROPEAN UNION, AND THE UNITED STATES AND ALTERNATES AMONG THOSE THREE LOCATIONS. TRILATERAL STRATEGY GROUP MEETINGS BRING TOGETHER A CORE GROUP OF AROUND 40 GOVERNMENT AND BUSINESS LEADERS AND OPINION SHAPERS, FOR A DAY AND A HALF OF INFORMAL, OFF-THE-RECORD DIALOGUE WITH THE OBJECTIVE OF IDENTIFYING EMERGING ISSUES AND THEIR POSSIBLE POLICY IMPLICATIONS ASIAGMF'S ASIA PROGRAM ADDRESSES THE IMPLICATIONS OF ASIA'S RISE FOR THE WEST THROUGH RESEARCH, COMMENTARY, CONFERENCES, AND PUBLICATIONS COVERING AN EXPANSIVE AREA - FROM THE HINDU KUSH TO THE PACIFIC - THE PROGRAM HAS REGION-WIDE PROJECTS AS WELL AS SPECIFIC INITIATIVES RELATED TO CHINA, INDIA, JAPAN, AND PAKISTAN THE ASIA PROGRAM'S FELLOWS AND STAFF MANAGE AN ACTIVE SET OF POLICY PROGRAMS, CONDUCT IN-DEPTH RESEARCH, AND FREQUENTLY CONTRIBUTE ARTICLES AND COMMENTARY TO A WIDE RANGE OF PUBLICATIONS AND NEWS OUTLETS BOTH IN THE UNITED STATES AND INTERNATIONALLY

See Additional Data

4d Other program services (Describe in Schedule O)

8,028,756 including grants of \$ 189,349) (Revenue \$

23,019,343 4e Total program service expenses ►

24,844) (Revenue \$

33,536)

art IV	Checklist of	Required	Schedules
	CHCCKHSCOL	IXC G G II C G	Juli Caale

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

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

FGL	Check if Schedule O contains a response or note to any line in this Part V				.[~
				Yes	No
	· · · · · · · · · · · · · · · · · · ·	1			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	:	Yes	
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	5 7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	21	,	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	38	.	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	31	,	Yes	
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)?	48		Yes	
b	If "Yes," enter the name of the foreign country ▶GM , FR , BE , RO , TU , PL , TS , RI See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	,		Νo
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	51	$, \dagger$		Νo
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		+		
_		50	:		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	68	<u>'</u>		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gif were not tax deductible?	6 l	,		
	Organizations that may receive deductible contributions under section 170(c).				NI -
	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?	78			N o
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	_	<u>'</u>		
٠	file Form 8282?	. 70	:		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	76			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? \cdot \cdot	71	-		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a required?	7 <u>9</u>	,		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	71	۱		
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			
9a	Did the sponsoring organization make any taxable distributions under section 4966?	98	\dashv		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	91	+		
10	Section 501(c)(7) organizations. Enter		+		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders				
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?	12	a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12	+		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13	a		
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				
c	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14	a	j	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14	ь		
	<u> </u>				

Form 990 (2014) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax 1a 21 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are 20 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο Νo 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Νo Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 7b Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Each committee with authority to act on behalf of the governing body? Yes 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 Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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	Yes	
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	Yes	

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed ► AK , AL , AR , CA , CO , CT , DC , FL , GA , HI , IL , KS , KY ,

 MA , MD , ME , MI , MN , MS , NC , ND , NH , NJ , NM , NV ,

 NY , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WI ,

 WV
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►DEBORAH R IWIG

1744 R STREET NW WASHINGTON, DC 20009 (202) 683-2650

Form 990 (2014)	
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)	a	g	e	7
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t	han d n is l	ne l both	box, an d	officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	Ŧ			
c	Total from continuation sheets to Part VII, Section A	۲			
d	Total (add lines 1b and 1c)	۲	2,393,603	0	247,457

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►28

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		,	
	on line 14. 17 res, complete senegales for such marviadar.	3	Yes	
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			
	ındıvıdual	4	Yes	
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 I for such person	5		No

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CAPITAL EVENTS 280 BOULEVARD BIR ANZARANE CASABLANCA 20100 MO	ATLANTIC DIALOGUE 2014 SERVICE	1,066,556
TNS OPINION S A 8-10 RUE JULES COCKX BRUSSELS 1160 BE	TRANSATLANTIC TRENDS 2014 SURVEY	539,408
LAW OFFICES OF PAIGE E REFFE 3300 LOWELL STREET NW WASHINGTON, DC 20008	CONSULTING FOR EVENTS	490,000
ASSET COMMUNICATIONS ALLEE DES FREESIAS 20 B6 BRUSSELS 1030 BE	CONSULTING FOR EVENTS	323,158
CLEVELAND STATE UNIVERSITY 2121 EUCLID AVENUE GRANDSACONNEX, OH 44115	HUD FELLOWS SALARIES AND BENEFITS	183,929
2 Total number of independent contractors (including but not limited to those listed above)) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶6

Part V	#	Statement of Check if Sched	of Revenue ule O contains a re	spo	ns		
w 22	1a	Federated cam	paigns	1a			
Grants nount	ь	Membership di	ies	1b			
9 6	С	Fundraising ev	ents	1 c			
ifts, ar ∆	d	Related organi	zations	1d			
9 ∺	e	Government grant	s (contributions)	1e			
ons Sil	l f	All other contributi	ons, gifts, grants, and	1f			
buti the		similar amounts n					
Contributions, Giffs, (and Other Similar An	g	1a-1f \$	ions included in lines				
<u>5 #</u>	h	Total. Add line	s 1a-1f	•			
a E	2a	REGISTRATION			F		
evel	b	REGISTRATION		•	H		
Program Serwoe Revenue	c			•	H		
er vi	d			•	H		
رة د	e			•	r		
Š Ta	f	All other progr	am service revenue	•			
š	g	Total. Add line	s 2a-2f		<u>.</u>		
	3		come (including div	den	ds		
	4	and other simil	ar amounts) stment of tax-exempt b	• ond	pro		
	5	Royalties .			pic		
		,	(ı) Real				
	6a	Gross rents					
	b	Less rental expenses					
	С	Rental income or (loss)					
	d	Net rental inco		٠			
	(i) Securiti				-		
	7a Gross amount from sales of 46,053,82 assets other						
	_	than inventory Less cost or			L		
	b	other basis and sales expenses	37,393,874	1			
	С	Gain or (loss)	8,659,954	4	T		
	d	Net gain or (lo	ss)		_		
άu	8a	Gross income events (not inc	from fundraising :ludina				
Other Revenue		\$					
ě		of contribution: See Part IV, lii	s reported on line 1 ne 18	c)			
<u>*</u>				а			
Ě	b			b			
•	c 9a		(loss) from fundrais from gaming activit	_	ev [
		See Part IV, lii		163			
				a	_		
	b c	Less direct ex	(loss) from gaming	b acti	L		
	10a		inventory, less	400	Γ		
		returns and all	owances .	_			
	Ь	Less costofg	ands sold	a h	H		
	c	_	(loss) from sales of	b ∶ın∨	L en		
		Mıscellaneou			Γ		
	11a	OTHER INCO	ME				
	ь			-	Ĺ		
	C						
	d	All other reven					
	e	Total. Add line		•	•		
	12	Total revenue.	See Instructions	•	•		

•	Statement o		spon	se or note to any lin	e in this Part VIII			
			37011	30 of note to dry in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns	1a					
b	Membership du	es	1b					
С	Fundraising eve	ents	1 c					
d	Related organiz	rations	1 d					
е	Government grants	s (contributions)	1e	3,789,501				
f	All other contribution	ons, gifts, grants, and ot included above	1f	13,744,240				
g	Noncash contribute 1a-1f \$	ons included in lines						
h	Total. Add lines	s 1a-1f			17,533,741			
				Business Code				
2a	REGISTRATION		l	900099	38,536	38,536		
b								
С								
d			. [
e			. [
f	All other progra	am service revenue						
g	Total. Add lines	s 2a-2f	<u>. </u>		38,536			
3	and other simils	ome (including divi ar amounts) tment of tax-exempt b		• [1,179,857		-763,484	1,943,341
5				· · · ·				
	•	(ı) Real		(II) Personal				
6a	Gross rents							
b	Less rental expenses							
c	Rental income or (loss)							
d		me or (loss)	•					
		(ı) Securities		(II) Other				
7a	Gross amount from sales of assets other	46,053,828	3					
b	than inventory Less cost or other basis and sales expenses	37,393,874	1					
С	Gain or (loss)	8,659,954	1					
d	Net gain or (los	s)			8,659,954			8,659,954
8a	events (not inc	luding s reported on line 1	c)					
b	Less direct ex	penses	ь					
c		(loss) from fundrais	L	events 🛌				
9a	Gross income f See Part IV, lin	rom gaming activit ie 19	es a					
		penses (loss) from gaming	ь	vities				
	Gross sales of returns and allo	inventory, less		-				
	Less cost of go		a b	ntony				
С	Miscellaneous	(loss) from sales of s Revenue	inve	Business Code				
11a	OTHER INCOM		\dashv	900099	40,729			40,729
b	22.(11400)		• }					
С			•					
d	All other reven	ue	·					
e	Total. Add lines	s 11a-11d		🕨	40,729			
L2	Total revenue.	See Instructions						
					27,452,817	38,536	-763,484	10,644,024 Form 990 (2014

		Statement of Functional Expenses				
Section		1(c)(3) and 501(c)(4) organizations must complete all columns All				
		Check if Schedule O contains a response or note to any line in this	Part IX			<u></u>
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1		estic governments See Part IV, line 21	110,000	110,000		
2		its and other assistance to domestic	,	,		
3	gove	ots and other assistance to foreign organizations, foreign ernments, and foreign individuals See Part IV, lines 15	4,965,242	4,965,242		
4		efits paid to or for members	.,,	.,,.		
5	Com	pensation of current officers, directors, trustees, and employees	1,121,978	597,247	524,731	
6	Com (as c	pensation not included above, to disqualified persons defined under section 4958(f)(1)) and persons tribed in section 4958(c)(3)(B)	-,,-:		02.1,1.02	
7		er salaries and wages	8,779,590	5,597,755	2,681,255	500,580
8	Pens	sion plan accruals and contributions (include section 401(k) 403(b) employer contributions)	375,824	241,861	112,619	21,344
9		er employee benefits	517,560	252,053	236,871	28,636
10		roll taxes	1,230,017	908,585	280,070	41,362
11		for services (non-employees)	1,230,017	300,303	200,070	11,302
а		agement				
b		ıl	67,455	28,899	28,028	10,528
c		ounting	146,544	49,234	97,310	10,320
d		bying	140,544	49,234	97,310	
e		essional fundraising services See Part IV, line 17				
			FF0 100		FF0 100	
f		stment management fees	558,199		558,199	
g	amo	er (If line 11g amount exceeds 10% of line 25, column (A) unt, list line 11g expenses on Schedule O)	4,774,263	4,320,806	400,603	52,854
12		ertising and promotion				
13		e expenses	1,099,568	454,898	605,213	39,457
14		rmation technology	212,031	10,106	185,968	15,957
15		alties				
16	Occi	upancy	1,168,254	251,120	917,134	
17		el	4,721,797	4,565,688	115,415	40,694
18		ments of travel or entertainment expenses for any federal, e, or local public officials	204,196	204,196		
19	Conf	ferences, conventions, and meetings	48,893	14,430	23,674	10,789
20	Inte	rest	103,392		103,392	
21		ments to affiliates				
22	Depr	reciation, depletion, and amortization	872,310	11,190	851,672	9,448
23	Insu	rance	171,829	1,840	169,989	
24	misc	er expenses Itemize expenses not covered above (List cellaneous expenses in line 24e If line 24e amount exceeds 10% de 25, column (A) amount, list line 24e expenses on Schedule O)				
а		SCRIPTIONS/PUBLICATI	336,903	319,322	15,888	1,693
Ь	ОТН	ER EXPENSES	244,271	114,871	98,574	30,826
c			· ·			<u> </u>
d						
e	Allo	ther expenses				
25		I functional expenses. Add lines 1 through 24e	31,830,116	23,019,343	8,006,605	804,168
26	Joint repo educ	t costs. Complete this line only if the organization rted in column (B) joint costs from a combined rational campaign and fundraising solicitation. Check	22,730,220		2,230,000	

Part X Balance Sheet

Pai	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
		·	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	2,224	1	3,938
	2	Savings and temporary cash investments	11,047,276	2	9,933,324
	3	Pledges and grants receivable, net	12,840,871	3	11,354,565
	4	Accounts receivable, net	98,950	4	94,987
<u>8</u>	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		_	
Se	_			6	
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	296,366	9	79,738
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 29,249,571			
	Ь	Less accumulated depreciation 10b 7,974,132		10 c	21,275,439
	11	Investments—publicly traded securities	61,693,912	11	40,437,993
	12	Investments—other securities See Part IV, line 11	100,002,409	12	116,674,944
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets	212,831	14	197,647
	15	Other assets See Part IV, line 11	101,324	15	69,654
	16	Total assets. Add lines 1 through 15 (must equal line 34)	208,002,901	16	200,122,229
	17	Accounts payable and accrued expenses	2,254,599	17	2,393,883
	18	Grants payable	1,005,848	18	746,594
	19	Deferred revenue	9,577,589	19	6,538,839
	20	Tax-exempt bond liabilities	12,000,000	20	12,000,000
Ø.	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	_
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	0.4.000.000	25	24.272.242
	26	Total liabilities. Add lines 17 through 25	24,838,036	26	21,679,316
φ		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.			
ğ	27	Unrestricted net assets	168,011,299	27	166,565,399
<u> </u>	28	Temporarily restricted net assets	15,153,566	28	11,877,514
<u> </u>	29	Permanently restricted net assets		29	<u> </u>
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and			
ō	20	complete lines 30 through 34.		20	
ets S	30	Capital stock or trust principal, or current funds		30 31	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
4 4	32	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	183,164,865	33	178,442,913
Ŋet					
	34	Total liabilities and net assets/fund balances	208,002,901	34	200,122,229

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				. ৮			
	<u> </u>				·			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		27,4	152,817			
2	Total expenses (must equal Part IX, column (A), line 25)	2		31,8	330,116			
3	Revenue less expenses Subtract line 2 from line 1	3	-4,377,2					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		183,1	.64,865			
5	Net unrealized gains (losses) on investments	5			318,545			
6	Donated services and use of facilities	6			,			
7	Investment expenses	7						
8	Prior period adjustments	8						
9								
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))			.63,198				
Par	rt XIII Financial Statements and Reporting			· · ·	· ·			
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔽			
				Yes	No			
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo			
	If Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	ewed on						
	Separate basis Consolidated basis Both consolidated and separate basis				1			
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separasis, consolidated basis, or both	arate						
	Separate basis Consolidated basis Both consolidated and separate basis				1			
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes				
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	3a	Yes				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes				

Additional Data

Software ID: Software Version:

EIN: 52-0954751

Name: THE GERMAN MARSHALL FUND OF THE UNITED STATES

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	1,842,394	including grants of \$) (Revenue \$	22,148)
TRANSATLANTIC LE	ADERSHIP INITIATIV	ESGMF OFFEI	RS A PORTFOLIO OF INITIATI	VES FOR ESTABLISHED, MID-	-CAREER, AND
NEXT GENERATION	LEADERS WHO ARE CO	MMITTED TO	O STRENGTHENING TRANSATL	ANTIC RELATIONS THESE I	NITIATIVES
			WORK, YOUNG TRANSATLANT:	C NETWORK, MARSHALL MEN	10 RIAL
FELLO WSHIP, MANF	RED W RNER SEMINAR	AND ALUMN	I ENGAGEMENT		
(Code) (Expenses \$	1,659,134	including grants of \$) (Revenue \$	11,388)
URBAN AND REGION	NAL POLICY PROGRAM	GMF'S URBAI	N AND REGIONAL POLICY PRO	GRAM (URP) SUPPORTS LEAD	DERS,
POLICYMAKERS, AN	D PRACTITIONERS IN	THE UNITED	STATES AND EUROPE BY FAC	ILITATING THE TRANSATLAI	NTIC
			, SUSTAINABLE, AND GLOBAL		
CONNECT LOCAL LE	ADERS IN A TRANSAT	LANTIC NET	WORK THAT EXCHANGES KNO	WLEDGE AND INNOVATIVE S	OLUTIONS,-
COACH THE NETWO	RK IN TRANSLATING N	IEW IDEAS TO	O THEIR CITY'S UNIQUE CON ⁻	FEXT, AND- CHAMPION THE S	SUCCESSES
OF THE NETWORK B	Y LIFTING UP INDIVID	UALINNOVA	ATIONS AND NEW MODELS URI	WORKS IN SELECTED CITIE	S IN THE
UNITED STATES AN	D EUROPE THAT SHAR	E A SET OF C	COMMON CHALLENGES AND D	ESIRE TO EXPLORE SOLUTIO	NS THROUGH
TRANSATLANTIC EX	CHANGE URPACTIVE	LY STEWARD	S TRANSATLANTIC INITIATIV	/ES THAT EXPLORE KEY ISSU	JES THROUGH
HIGH-IMPACT GATH	HERINGS, PEER EXCHA	NGES, AND A	PPLIED RESEARCH URP HAS	AN EXTENSIVE AND SUCCES	SFUL HISTORY
OF WORKING COOP	ERATIVELY WITH PUBI	IC, PRIVATE	, AND NGO LEADERS TO APPL	Y THESE INSIGHTS TO IMPRO	OVELOCAL
AND REGIONAL POL	ICIES AND PROGRAM:	S IN ADDITI	ON TO SUPPORTING POLICY I	NNOVATION, URP ACTIVITI	ES ALSO
SUPPORT INDIVIDU	ALPARTICIPANTS IN	EXPANDING	THEIR TRANSATLANTIC NETV	ORK, GROWING THEIR POLIC	CY EXPERTISE,
AND DEVELOPING T	HEIR LEADERSHIP SK.	1115			•

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions) (Code) (Expenses \$ 965,384 | Including grants of \$ 10,000) (Revenue \$

CONGRESSIONAL THE CONGRESSIONAL AFFAIRS PROGRAM INFORMS AND EDUCATES MEMBERS OF THE U.S. CONGRESS ON TRANSATLANTIC AFFAIRS. GMF DOES THIS THROUGH ITS GRANTMAKING, CONVENING, NETWORKING, AND RESEARCH ACTIVITIES. GMF PROVIDES A NONPARTISAN PLATFORM FOR TRANSATLANTIC LEARNING AMONG POLICYMAKERS ON ISSUES OF MUTUAL CONCERN

(Code) (Expenses \$ 855,708 including grants of \$ 54,348) (Revenue \$)

EUROPEGMF'S EUROPE PROGRAM ENGAGES IN THE DISCUSSION ON THE DRIVERS OF DISINTEGRATION AND INTEGRATION IN THE EU AND EXPLORES THE IMPLICATIONS OF THESE DEVELOPMENTS FOR THE TRANSATLANTIC PARTNERSHIP GMF FURTHER CONTRIBUTES TO THE POLICY DEBATE ON THE FUTURE OF THE EU THROUGH ITS RESEARCH, CONVENING, AND NETWORKING ACTIVITIES

(Code) (Expenses \$	1,026,953	including grants of \$) (Revenue \$)
APPROACHES TO T YEAR BRINGING TO DIFFERENT DISCIP INTEREST WORKIN BRIDGE THE ATLAN	HE LONG-TERM CHALL GETHER SCHOLARS, POLINARY PERSPECTIVES IG TOGETHER FROM A CONTIL AND P	ENGES FACIN OLICY EXPER 5 TO RESEAR COLLABORAT OLICY COMM	IG EUROPE AND NORTH AM TS, AND AUTHORS FROM BO CH AND ANALYZE A DISTIN IVE AND INTERDISCIPLINA	ITUTION DEVOTED TO CREATING ERICA THE ACADEMY DOES THI DTH SIDES OF THE ATLANTIC AN CT POLICY THEME OF TRANSATLARY PERSPECTIVE, ACADEMY FELSCH, PUBLICATIONS, AND SEMING AMERICA AND EUROPE	S BY EACH ID FROM .ANTIC .LOWS
(Code OTHER PROGRAMS) (Expenses \$	1,679,183	including grants of \$	125,001) (Revenue \$)

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
(1) ROBERT BENNETT	1 00	х						0	0	0
TRUSTEE (1) MARGARET CARLSON	1 00	X						0	0	0
TRUSTEE (2) GREGORY CRAIG	1 00									
TRUSTEE		х						0	0	0
(3) GUIDO GOLDMAN	1 00	x						0	0	0
TRUSTEE (4) MARC GROSSMAN	1 00									
TRUSTEE		х						0	0	0
(5) JOHN HARRIS	1 00							_	_	_
TRUSTEE		X						0	0	0
(6) DAVID IGNATIUS TRUSTEE	1 00	х						0	0	0
(7) MARC LELAND	1 00	х						0	0	0
TRUSTEE (8) ROBERT LIBERATORE	1 00									
TRUSTEE (9) ROMAN MARTINEZ IV	1 00	X						0	0	0
TRUSTEE		x						0	0	0
(10) MEGHAN L O'SULLIVAN	1 00	х						0	0	0
TRUSTEE (11) RICHARD POWERS	1 00	X						0	0	0
TRUSTEE (12) JIM QUIGLEY	1 00									
TRUSTEE (13) SHYAM REDDY	1 00	X						0	0	0
TRUSTEE		Х						0	0	0
(14) ANN RONDEAU TRUSTEE	1 00	×						0	0	0
(15) CHRISTOPHER SCHROEDER TRUSTEE	1 00	х						0	0	0
(16) DAVID M SMICK	1 00	х						0	0	0
TRUSTEE (17) PAUL STAFFORD	1 00	X						0	0	0
TRUSTEE (18) J ROBINSON WEST	1 00									
TRUSTEE (19) ROBERT WEXLER	1 00	X						0	0	0
TRUSTEE		Х						0	0	0
(20) KAREN DONFRIED PRESIDENT	40 00	x		х				248,894	0	19,168
(21) BARRY LOWENKRON	40 00			х				35,072	0	0
EXEC VP & COO (22) DEBBI IWIG	40 00			X				201,981	0	19,616
VICE PRESIDENT AND CFO	40.00							201,901		19,010
(23) IVAN VEJVODA VICE PRESIDENT	40 00				х			257,964	0	34,955
(24) IAN LESSER	40 00				х			267,940	0	36,388
DIRECTOR, FOREIGN SECURITY	1	<u> </u>	<u> </u>	<u> </u>	1	<u> </u>	<u> </u>	I	<u> </u>	<u> </u>

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Pose the person and Individual trustee or director	ion (ian o n is b	ne booth a	ox, u an of trus: 下 en	nless ficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(26) STEPHEN SZABO EXEC DIR, TRANSATLANTIC AC	40 00					х		203,338	0	26,820
(1) DAVID ROMLEY VICE PRESIDENT, PARTNERSHI	40 00					х		180,007	0	13,999
(2) HEIKE MACKERRON DIRECTOR, BERLIN OFFICE	40 00					x		169,425	0	32,335
(3) MARK FISCHER DIRECTOR OF EUROPEAN OFFIC	40 00					х		159,519	0	7,129
(4) NEIL SUNILAS VICE PRESIDENT	40 00					х		157,594	0	21,220
(5) R CRAIG KENNEDY FORMER PRESIDENT	40 00						Х	511,869	0	35,827

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As Filed Data -

DLN: 93493092006486

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

I HE GE	:KMAN	MARSHALL FUND OF THE UI	MILED STATES				52-0954751			
Par	tΙ	Reason for Publi	c Charity S	Status (All organiza	tions must co	mnlete this r		nns		
		zation is not a private fo						71131		
1	Г	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2	_	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3	_	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	<u></u>			_). Enter the		
-	'	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state								
5	Γ	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by	a governmental unit d	escribed in		
		section 170(b)(1)(A)	(iv). (Complete	e Part II)						
6	Γ	A federal, state, or loc	al government	t or governmental unit	described in se	ection 170(b)(L)(A)(v).			
7	<u>~</u>	An organization that n	ormally receiv	es a substantial part	of its support fr	om a governme	ental unit or from the g	jeneral public		
	_	described in section 1								
8	_	A community trust de						_		
9	ı	An organization that n								
		receipts from activitie								
		its support from gross						businesses		
	_	acquired by the organ		•			•			
10	_	An organization organ	•		•	•				
11	ı	An organization organ								
		one or more publicly s the box in lines 11a th								
а	Γ	Type I. A supporting of								
		supported organizatio				ty of the direct	ors or trustees of the	supporting		
_	_	organization You mus	-							
b	ı	Type II. A supporting management of the su	=	•			• • • • • • • • • • • • • • • • • • • •	•		
		must complete Part I			same persons t	nac control of f	nanage the supported	organization(s) Tou		
c	Γ	Type III functionally	•		n operated in c	onnection with	, and functionally inte	grated with, its		
	_	supported organizatio								
d	ı	Type III non-function								
		not functionally integr (see instructions) Yo					ement and an attentiv	eness requirement		
e	\sqcap	Check this box if the o					s a Type I, Type II, T	ype III functionally		
		integrated, or Type II	I non-function	ally integrated suppor	tıng organızatıo	n				
f		Enter the number of s								
g		Provide the following i	nformation abo	out the supported orga	ınızatıon(s)					
			/··>	/···>						
		ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the org	•	(v) A mount of monetary support	(vi) A mount of other support (see		
		organización		(described on lines	docume		(see instructions)	instructions)		
				1-9 above or IRC			(000),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	section (see									
				ınstructions))						
					Yes	No				
Total										

Schedule A (Form 990 or 990-EZ) 2014 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support

	ection A. Public Support	ı					
Cale	endar year (or fiscal year beginning in) >	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	21,388,423	3 18,650,313	29,554,047	25,811,577	17,533,741	112,938,101
2	Tax revenues levied for the organization's benefit and either						_
	paid to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the organization without						
	charge						
4	Total. Add lines 1 through 3	21,388,423	18,650,313	29,554,047	25,811,577	17,533,741	112,938,101
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly supported organization) included						24,094,840
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						88,843,261
	ection B. Total Support						
Cale	endar year (or fiscal year beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	21,388,423	18,650,313	29,554,047	25,811,577	17,533,741	112,938,101
8	Gross income from interest,						_
	dividends, payments received on securities loans, rents, royalties and income from similar	4,051,516	8,615,394	3,817,820	4,187,611	1,943,341	22,615,682
9	Net income from unrelated business activities, whether or not the business is regularly carried on	34,016					34,016
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	58,819	29,225	54,750	66,374	40,729	249,897
11	Total support Add lines 7 through 10						135,837,696
12	Gross receipts from related activit	ies, etc (see inst	tructions)	<u> </u>	<u> </u>	12	159,054
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)						
	organization, check this box and stection C. Computation of Pu			<u> </u>		<u> </u>	<u>► </u>
14	Public support percentage for 201			11 column (f))		14	65 400 %
15	Public support percentage for 201	•		, (-,,		15	69 130 %
	33 1/3% support test—2014. If the	·	•	on line 13, and l	line 14 is 33 1/3%		
	and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this						
Ь	33 1/3% support test—2013. If the box and stop here. The organization				, and line 15 is 33	3 1/3% or more, ch	neck this ►
17a	10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me	— 2014. If the org	anızatıon dıd not c facts-and-cırcums	theck a box on lir tances" test, che	eck this box and s	top here. Explain	·
	organization	ers the lacts all	a circumstances	test The Organia	Lation qualifies as	, a publicly suppo	►F
b	10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza	nızatıon meets th	e "facts-and-cırcı	ımstances" test,	check this box ai	nd stop here.	v
	supported organization				-	•	' ▶□
18	Private foundation. If the organiza instructions	tion did not chec	k a box on line 13,	, 16a, 16b, 17a, o	or 17b, check this	s box and see	▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test	

Return Reference	Explanation
, , , , ,	OTHER INCOME FROM EXEMPT ACTIVITIES - 2010 AMOUNT \$ 58,819 2011 AMOUNT \$ 29,225 2012 AMOUNT \$ 54,750 2013 AMOUNT \$ 66,374 2014 AMOUNT \$ 40,729

Schedule A (Form 990 or 990-EZ) 2014

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DLN: 93493092006486

OMB No 1545-0047

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.

Open to Public Inspection

ame of the organization		Employer identification number
HE GERMAN MARSHALL FUND OF THE UNITED STATES		52-0954751
organizations Maintaining Donor Ad organization answered "Yes" to Form 990), Part IV, line 6.	unds or Accounts. Complete if the
	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate value of contributions to (during year)		
Aggregate value of grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		nor advised Yes No
Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit?		
art III Conservation Easements. Complete i	f the organization answered "Yes" t	to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education)	n historically important land area certified historic structure
easement on the last day of the tax year	a qualifica conservation contribution in	
Total number of conservation easements		Held at the End of the Year
Total number of conservation easements		2a
Total acreage restricted by conservation easements		2b
Number of conservation easements on a certified hist Number of conservation easements included in (c) ac	, ,	2c
historic structure listed in the National Register		2d
Number of conservation easements modified, transfer	red, released, extinguished, or terminate	ed by the organization during
the tax year ▶		
Number of states where property subject to conservat	tion easement is located ►	
Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of violations, and Yes No
Staff and volunteer hours devoted to monitoring, insper-	ecting, and enforcing conservation easei	ments during the year
A mount of expenses incurred in monitoring, inspecting \$ \(\) \$	g, and enforcing conservation easement	s during the year
Does each conservation easement reported on line 2(and section $170(h)(4)(B)(II)$?	(d) above satisfy the requirements of sec	ction 170(h)(4)(B)(i)
In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easem	ne footnote to the organization's financia ents	l statements that describes
rt III Organizations Maintaining Collection Complete if the organization answered "		or Other Similar Assets.
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assessivice, provide, in Part XIII, the text of the footnote	116 (ASC 958), not to report in its reve ets held for public exhibition, education,	or research in furtherance of public
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assesservice, provide the following amounts relating to the	116 (ASC 958), to report in its revenue ets held for public exhibition, education,	statement and balance sheet
(i) Revenue included in Form 990, Part VIII, line 1		► \$
(ii) Assets included in Form 990, Part X		► \$
If the organization received or held works of art, histo following amounts required to be reported under SFAS		
Revenue included in Form 990, Part VIII, line 1		► \$
Assets included in Form 990, Part X		▶ \$

Part 1	Organizations Maintaining Control	llections of Art,	Histo	<u>rical T</u>	reası	ures, or C	the	<u>r Similar As</u>	sets ((continued)
	Ising the organization's acquisition, access ollection items (check all that apply)	ion, and other record	ls, chec	•		_		_	e of its	
аГ	Public exhibition		d 「	Loan	orexc	hange prog	rams			
ьΓ	Scholarly research		е Г	Othe	r					
сΓ	Preservation for future generations									
	rovide a description of the organization's co	ollections and explai	n how th	ey furth	er the	organızatıor	ı's ex	empt purpose	ın	
	During the year, did the organization solicit							ıılar		-
Part	ssets to be sold to raise funds rather than to IV Escrow and Custodial Arrang	·						os" to Form (┌ Yes	☐ No
Part	Part IV, line 9, or reported an ar					ii aliswele	u i	es to rolling	990,	
	s the organization an agent, trustee, custoo ncluded on Form 990, Part X?					or other ass	ets r	not	┌ Yes	┌ No
b I	f "Yes," explain the arrangement in Part XI	II and complete the f	following	j table		_				
								Aı	nount	
C E	Beginning balance						1c			
d A	Additions during the year						1d			
e [Distributions during the year						1e			
f E	Ending balance						1f			
2a D	old the organization include an amount on Fo	orm 990, Part X, line	21, for	escrow	orcust	odial accou	nt lıa	ibility?	┌ Yes	┌ No
b I	f "Yes," explain the arrangement in Part XI:	II Check here if the	explana	tion has	been i	provided in I	Part :	XIII		Γ
Part										
		(a)Current year	(b) Prio				+	Three years back	(e)Four	years back
1a B	Beginning of year balance	11,457,881	1	1,935,788	3	12,548,369		13,333,808		14,024,574
	Contributions						_			
c N	let investment earnings, gains, and losses									
d G	Grants or scholarships									
e 0	ther expenditures for facilities	11 457 001		477.007	,	612 501		705 420		600.766
	nd programs	11,457,881		477,907		612,581	_	785,439		690,766
	dministrative expenses			1 457 001		11.025.700	<u> </u>	12 510 260		12 222 000
_	nd of year balance			1,457,881		11,935,788	3	12,548,369		13,333,808
2 P	rovide the estimated percentage of the cur	rent year end balanc	e (line 1	g, colun	nn (a))	held as				
a B	Board designated or quasi-endowment ►									
b P	ermanent endowment ►									
	emporarily restricted endowment Fricated endowent Endowe	uld equal 100%								
	are there endowment funds not in the posse	ssion of the organiza	tion tha	t are hel	ld and a	admınıstere	d for	the	_	
	rganization by i) unrelated organizations							3a	(i) Ye	s No No
-	ii) related organizations				• •		•	3a	` '	No
•	f "Yes" to 3a(II), are the related organization						٠.		b	
4 0	Describe in Part XIII the intended uses of th	ne organization's end	dowment	funds				<u> </u>	•	
Part			he orga	nızatıo	n ans	wered 'Yes	' to	Form 990, Pa	art IV,	line
	11a. See Form 990, Part X, line Description of property	10.	1,	a) Cost o	r other	(b)Cost or o	ther	(c) Accumulated	(4)	Book value
	Description of property			asis (inves		basis (othe		depreciation	' (u)	DOOK VAIUE
4- '									+	1 227 112
	nd		 			1,237		F 200 20	,,,	1,237,440
	illdings		. ⊢			24,756	,369	5,386,38	9/	19,369,982
	asehold improvements		· -						+	
	uipment		· -			3,255	763	2 507 7/	15	669.017
	ther		·	(B) line	10(c)			2,587,74	12	21,275,439
. J.ul. /		guar roith 550, rait A	, corainn	(2), 11110	(-)-,	<u>,</u>	•	Schedule		

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of va Cost or end-of-year	iluation market value
(1)Financial derivatives			
(2)Closely-held equity interests (3)Other (A) ALTERNATIVE INVESTMENTS - EQUITY FUNDS	28,541,403	F	
(B) ALTERNATIVE INVESTMENTS - HEDGE FUNDS	32,209,268	F	
(C) ALTERNATIVE INVESTMENTS - PRIVATE EQUITY	34,547,033	F	
(D) ALTERNATIVE INVESTMENTS - PUBLIC NATURAL	34,347,033	'	
RESOURCES	14,194,021	F	
(E) ALTERNATIVE INVESTMENTS - PRIVATE DEBT	3,898,093	F	
(F) ALTERNATIVE INVESTMENTS - PRIVATE REAL ESTATE	3,285,126	F	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Con	, ,		orm 990. Part IV. line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	
(a) Description of investment	(b) Book value	Cost or end-of-year	
Total (Column (h) must equal Form 990, Part X col (R) line 13.)			
Part IX Other Assets. Complete if the organization	answered 'Yes' to Form 990	, Part IV, line 11d See F	
(a) Descrip	tion		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.	.)		
Part X Other Liabilities. Complete if the organ Form 990, Part X, line 25.	nization answered 'Yes' to	o Form 990, Part IV, l	ıne 11e or 11f. See
1 (a) Description of liability	(b) Book value		
Federal income taxes			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			

	ule D (Form 990) 2014					Page 4
Par		Revenue per Audited Financial Sta wered 'Yes' to Form 990, Part IV, line			per R	eturn Complete if
1	<u>-</u>	er support per audited financial statements			1	27,933,089
2		ut not on Form 990, Part VIII, line 12				2.72.27.22
a		on investments	2a	818,545		
b		facilities	2b	<u> </u>	-	
c		ts	2c			
d)			1	
e	Add lines 2a through 2d				2e	1,038,471
3	J				3	26,894,618
4		90, Part VIII, line 12, but not on line 1	•		<u> </u>	20,034,010
-		luded on Form 990, Part VIII, line 7b	4a	558,199		
a b	· ·)	4a 4b	· ·	1	
_					4.	F F 9 100
C -					4c 5	558,199
5 Dart		d 4c. (This must equal Form 990, Part I, lin Expenses per Audited Financial St				27,452,817
rait		nswered 'Yes' to Form 990, Part IV, lir			s pei	Return. Complete
1		er audited financial statements			1	32,655,041
2		ut not on Form 990, Part IX, line 25				<u> </u>
а		facilities	. 2a	1,383,124		
b				· · ·	1	
c			20		1	
d)	20	_	┨	
					┧ ᢏ	1 202 1 24
e	_		•		2e	1,383,124
3			•		3	31,271,917
4		00, Part IX, line 25, but not on line 1:	ı	I		
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b .	. 4	558,199	4	
b	Other (Describe in Part XIII))	41	b	_	
С	Add lines 4a and 4b				4c	558,199
5		nd 4c. (This must equal Form 990, Part I, I	ne 18)	5	31,830,116
Part	Supplemental In	formation				
		r Part II, lines 3, 5, and 9, Part III, lines 1				
	V, line 4, Part X, line 2, Part XI mation	I, lines 2d and 4b, and Part XII, lines 2d ar	d4b A	Also complete this part to	provi	de any additional
	Return Reference	Explanation				
PART	V, LINE 4	THE GMF BOARD OF DIRECTORS HAS ASSETS TO BE UTILIZED FOR THE BA				
		TRUST FUNDING		TROST TOR BEHOCKAC		J THE BEACK SEA
		BUSINESS INCOME AS DEFINED BY TENDED MAY 31, 2015, GMF INCURRED INCOME ACTIVITIES 1700 18TH STENDED MAY FOR FEDERAL INCOME TAX GMF UNDER THIS ENTITY FORM ACCEBEEN MADE THE TRANSATLANTIC FOR INCORPORATED UNDER THE LAWS OF ACTIVITY UNDER TTF DURING THE YEAR ACCOUNTING STANDARD FOR UNCERTHE GMF'S INCEPTION TO MAY 31, 20 EXISTED DEFERRED INCOME TAXES. WHEREBY, DEFERRED TAX ASSETS AR DIFFERENCES AND OPERATING LOSS TAX LIABILITIES ARE RECOGNIZED FOR DIFFERENCES ARE THE DIFFERENCES ALLOWANCE WHEN, IN THE OPINION SOME PORTION OR ALL OF THE DEFE TAX ASSETS AND LIABILITIES ARE A LAWS AND RATES OF THE DATE OF ENHIGHLY CERTAIN THAT SOME POSITIVE EXAMINATION BY THE TAXING AUTH UNCERTAINTY ABOUT THE MERITS OF POSITION THAT WOULD BE ULTIMAT RECOGNIZED IN THE FINANCIAL STATE ALL AVAILABLE EVIDENCE, MANAGE THE POSITION WILL BE SUSTAINED UNCERTAINTY ABOUT THE RERITS OF POSITION THAT WOULD BE ULTIMAT RECOGNIZED IN THE FINANCIAL STATE ALL AVAILABLE EVIDENCE, MANAGE THAN NOT RECOGNITION THRESHOL BENEFIT THAT IS MORE THAN 50% LITHE APPLICABLE TAXING AUTHORIT TAX POSITIONS TAKEN THAT EXCEED WOULD BE REFLECTED AS A LIABILIT ACCOMPANYING BALANCE SHEET, ALL PENALTIES THAT WOULD BE PAYABLE MANAGEMENT BELIEVES THERE ARE TAX LIABILITY INTEREST AND PENALDENE SHEET, ALL BENEFITS ARE CLASSIFIED AS ADDITION BENEFITS ARE CLASSIFIED AS ADDITION.	NOT LEET LENGT TO THE CONTROL OF THE	AX EXPENSE RELATED LC (LLC) IS A SINGLE MOSES ALL TAX ATTRIE GLY, NO PROVISION FOR TION (TTF) IS A FOREI SELS, BELGIUM THERE NDED MAY 31, 2015 ACT TY IN INCOME TAXES, IOUNRECOGNIZED TAXE ROVIDED USING THE LE COGNIZED FOR DEDUCT TAX CREDIT CARRYFOR XABLE TEMPORARY DI VEEN THE REPORTED AN RED TAX ASSETS ARE OF ANAGEMENT, IT IS MORE TAX ASSETS WILL NOT ED FOR THE EFFECTS OF MENT WHEN TAX RETUR TAKEN WOULD BE SUST ES, WHILE OTHERS ARE POSITION TAKEN OR IN JSTAINED THE BENEFI NTS IN THE PERIOD DU BELIEVES IT IS MORE LE EXAMINATION, INCLUE X POSITIONS THAT ME E MEASURED AS THE LA OF BEING REALIZED UN E AMOUNT MEASURED UNRECOGNIZED TAXE WITH ANY ASSOCIATED WITH ONS THAT WOULD ASSOCIATED WITH UN	TO UNITED BY THE STATE OF THE S	RELATED BUSINESS R LIMITED LIABILITY FLOW THROUGH TO COME TAXES HAS DNPROFIT ENTITY IMMATERIAL DING TO THE HE PERIOD FROM VISION OR BENEFIT ITY METHOD, TEMPORARY DS AND DEFERRED NCES TEMPORARY TS OF ASSETS AND CED BY A VALUATION ELY THAN NOT THAT ALIZED DEFERRED E CHANGES IN TAX RE FILED, IT IS D UPON DECT TO MOUNT OF THE A TAX POSITION IS WHICH, BASED ON V THAN NOT THAT THE RESOLUTION OF ARE NOT OFFSET OR HE MORE LIKELY T AMOUNT OF TAX ETTLEMENT WITH ASSOCIATED WITH SCRIBED ABOVE ITS IN THE EREST AND PON EXAMINATION ULT IN ADDITIONAL GNIZED TAX
	XI, LINE 2D - OTHER STMENTS	ACTIVITIES GMF FILES INCOME TAX MAY 31, 2015, AND FOR THE YEAR TH UNRECOGNIZED TAX GENERALLY, GMF IS NO LONGER SUBTAX AUTHORITIES FOR YEARS BEFOR RETURNED GRANTS TO THIRD PARTINGRANTEE 44,629 LOSS FROM FOREIG	EN EN K BENE JECT T LE FISC ES -43	IDED, THERE WERE NO I EFITS OR TAX PENALTI O U S FEDERAL INCOM CAL YEAR ENDED MAY : 2,968 GRANTS RETURI	MATEI ES OR 1E TA 31, 20 NED T	RIAL . INTEREST X EXAMINATIONS BY 12 O GMF FROM

Concade 5 (Form 550) 2015			
Part XIII Supplemental Information	on (continued)		
Return Reference	Explanation		
l			
-			

Schedule D (Form 990) 2014

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SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

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

► Attach to Form 990.

Internal Revenue Service

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

Name of the organization

OMB No 1545-0047

2014

Open to Public Inspection

	e of the organization				Employer ident	ification number
THE	GERMAN MARSHALL FUND OF T	HE UNITED ST	ATES		52-0954751	
Pa	rt I General Information "Yes" to Form 990, Par			e United States. Co	omplete if the organiza	ation answered
1	For grantmakers. Does the o	rganızatıon m	aıntaın records	s to substantiate the a	mount of its grants	_
	and other assistance, the gra	ntees' eligibili	ty for the gran	ts or assistance, and	the selection criteria	
	used to award the grants or a	ıssıstance?				✓ Yes
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pr	ocedures for monitorii	ng the use of its grant	s and other
3	Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ce is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)) See Add'l Data					
(2)					
(3)					
(4))					
(5)					
3a	Sub-total	10	60			69,344,344
ŧ	Total from continuation sheets to Part I	0	0			181,226
	Totals (add lines 3a and 3b)	1 0	60	1		69.525.570

	•
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash	(g) A mount of non-cash	(h) Description of non-cash	(i) Method of valuation
organizacion	and EIN (if applicable)		grant	Cash grant	disbursement	assistance	assistance	(book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recogni	ızed	as
	tax-exempt by the IRS, or for which the grantee or counsel has provided a section $501(c)(3)$ equivalency letter	. •	-

219

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Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

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

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	V	Yes	Г	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Γ	Yes	∀	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	দ	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	্ব	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	্ব	Yes	Г	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713: do not file with Form 990)	Г	Yes	অ	No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	PRESCREENING OF POTENTIAL GRANTEES IS AN IMPORTANT PART OF THE MONITORING OF GRANT FUNDS THE RESPONSIBLE STAFF PERSON IS IN TOUCH WITH THE GRANTEE AND CONDUCTS ON-SITE MONITORING AND/OR RECEIVES INTERIM WRITTEN OR ORAL REPORTS ADDITIONALLY, ADVISORY BOARD MEMBERS HELP AND CONDUCT MONITORING UPON REQUEST OF THE GMF STAFF THE GRANTEE IS UNDER OBLIGATION TO FOLLOW THE GRANT BUDGET LINES ALLOCATED FOR SPECIFIC SPENDING AND STAFF ROUTINELY MONITOR SPENDING MANY OF GMF'S GRANTS ARE INDEPENDENTLY REVIEWED BY EXTERNAL EVALUATORS AS ANOTHE R DEGREE OF OVERSIGHT AT THE CLOSE OF THE GRANT PERIOD, THE GRANTEE IS REQUIRED TO PROVID E A DETAILED NARRATIVE AND FINANCIAL REPORT TO GMF

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3	THE ORGANIZATION USES GAAP TO REPORT EXPENDITURES IN A FOREIGN REGION

Additional Data

Software ID: Software Version:

EIN: 52-0954751

Name: THE GERMAN MARSHALL FUND OF THE UNITED STATES

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		52,283,850
EUROPE (INCLUDING ICELAND & GREENLAND)	6		GRANTS TO RECIPIENTS		2,512,088
RUSSIA AND NEIGHBORING STATES			GRANTS TO RECIPIENTS		2,453,154

Form 990 Schedule F P	art I - Activit	<u>ies Outside Tl</u>	ne United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	7	PROGRAM SERVICE	CONVENING	707,147
EUROPE (INCLUDING ICELAND & GREENLAND)	3	32	PROGRAM SERVICE	CONVENING	8,113,511
EUROPE (INCLUDING ICELAND & GREENLAND)	0	2		PUBLIC OPINION SURVEY	818,571

Form 990 Schedule F P	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region agents in region		(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	1	FUNDRAISING		126,804
MIDDLE EAST AND NORTH AFRICA	1		PROGRAM SERVICE	CONVENING	2,329,219
SOUTH ASIA			PROGRAM SERVICE	CONVENING	181,226

Form 990 Schedu	ale F Part II	- Grants or Entiti	es Outside The Uni	ted States				,
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraisal, other)
		(INCLUDING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
		(INCLUDING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		(INCLUDING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		(INCLUDING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			

Form 990 Schedu	ıle F Part II	, - Grants or Entiti [,]	ies Outside The Uni	ted States				,
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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Schedu	ıle F Part II	- Grants or Entiti	ies Outside The Uni	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	'	ELECTRONIC FUND TRANSFER			
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Schedu	ıle F Part II	- Grants or Entiti	ies Outside The Uni	ted States				
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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Schedu	le F Part IIیاد	- Grants or Entiti	es Outside The Uni	ted States				· /
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		(INCLUDING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	· ·	ELECTRONIC FUND TRANSFER			

Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER						
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER						
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Form 990 Schedu	ale F Part II	- Grants or Entiti	ies Outside The Unit	ted States				, , , , , , , , , , , , , , , , , , ,
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Form 990 Schedu	ale F Part II	- Grants or Entiti	ies Outside The Unit	ted States				, , , , , , , , , , , , , , , , , , ,
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Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
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Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	· ·	ELECTRONIC FUND TRANSFER						
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER						
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER						

Form 990 Schedu	ıle F Part II	- Grants or Entiti	ies Outside The Uni	ted States				
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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Schedu	ıle F Part II	- Grants or Entiti	ies Outside The Uni	ted States				, , , , , , , , , , , , , , , , , , ,
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER			
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Schedu	le F Part IIیاد	- Grants or Entiti [,]	ies Outside The Uni	ted States				·
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		(INCLUDING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		(INCLUDING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		(INCLUDING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		(INCLUDING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Schedu	ale F Part II	- Grants or Entiti	ies Outside The Unit	ted States				, , , , , , , , , , , , , , , , , , ,
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	TRANSATLANTIC DIALO GUE	1	ELECTRONIC FUND TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	TRANSATLANTIC DIALO GUE	51,847	ELECTRONIC FUND TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	TRANSATLANTIC DIALO GUE	27,345	ELECTRONIC FUND TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	= '	ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

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		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					

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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

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(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					

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			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

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		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
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		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
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		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	· · · · · ·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

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		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					

Form 990 Schedu	ıle F Part II	- Grants or Entiti	ies Outside The Unit	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	'	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	•	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	'	ELECTRONIC FUND TRANSFER			

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		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Sched	Jule F Part II	Grants or Enti	ities Outside The Unit	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Schedu	ıle F Part II	Grants or Entit	ies Outside The Unit	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	'	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

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		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	'	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Schedı	form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedi	form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
			DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Sched	Jule F Part II	Grants or Enti	ities Outside The Unit	ted States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER			

Form 990 Schedı	orm 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	, ,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedi	form 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		1	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	,	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	·	ELECTRONIC FUND TRANSFER					
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER					

Form 990 Schedu	orm 990 Schedule F Part II - Grants or Entities Outside The United States									
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		NEIGHBORING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	· '	ELECTRONIC FUND TRANSFER					
		NEIGHBORING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	· '	ELECTRONIC FUND TRANSFER					
		NEIGHBORING	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	· '	ELECTRONIC FUND TRANSFER					

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Schedule I (Form 990)

Department of the Treasury

CONGRESS

1401 K STREET NW WASHINGTON, DC 20005

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

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

► Attach to Form 990.

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

OMB No 1545-0047

2014

DLN: 93493092006486

Open to Public
Inspection

Internal Revenue Service	► Informa	ition about Schedule I ((Form 990) and its inst	tructions is at <u>www.i<i>rs</i></u>	<u>.gov/form990</u> .		Inspect ion
Name of the organization THE GERMAN MARSHALL FUN	D OF THE UNITED ST	ATES				Employer id 52-09547	entification number 51
Part I General Inform	nation on Grants a	and Assistance				I	
Does the organization mains the selection criteria used Describe in Part IV the or	I to award the grants or	rassistance?	. .				∀Yes 「N
		Domestic Organize ecipient that receive					
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description non-cash assista	1 ' '
(1) AMERICAN COUNCIL ON GERMANY 14 EAST 60TH STREET NEW YORK,NY 10022	13-1889074	501 (C)(3)	25,000				TRANSATLANTIC DIALOGUE
(2) AMERICAN INSTITUTE FOR CONTEMPORARY GERMAN STUDIES 1755 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	52-1309525	501 (C)(3)	25,000				TRANSATLANTIC DIALOGUE
(3) THE ASSOCIATION OF FORMER MEMBERS OF	54-0883744	501 (C)(3)	60,000				TRANSATLANTIC DIALOGUE

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	►	
2	Enter total number of other organizations listed in the line 1 table		

Schedule I	(Form 990) 2014
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.										
Return Reference	Explanation									
	GMF'S APPLICATION PROCESS OF POTENTIAL GRANTEES IS AN IMPORTANT PART OF THE MONITORING OF GRANT FUNDS ONCE APPROVED, THE RESPONSIBLE STAFF PERSON REVIEWS THE INTERIM WRITTEN REPORTS RECEIVED FROM THE GRANTEE THE GRANTEE IS REQUIRED TO FOLLOW THE GRANT BUDGET AS APPROVED STAFF ROUTINELY MONITORS SPENDING AT THE CLOSE OF THE GRANT PERIOD, THE GRANTEE IS REQUIRED TO PROVIDE A DETAILED NARRATIVE AND FINANCIAL REPORT TO GMF									

Schedule I (Form 990) 2014

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DLN: 93493092006486

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

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

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** THE GERMAN MARSHALL FUND OF THE UNITED STATES 52-0954751

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

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Also complete this part for any additional information

Return Reference	Explanation
	THE FOLLOWING EMPLOYEES RECEIVED HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE, WHICH IS TAXABLE TO THE EMPLOYEES IVAN VEJVODA \$5,274 IAN LESSER \$27,792 MARK FISCHER \$7,374
	THREE EMPLOYEES RECEIVED A SEVERANCE PAYMENT FROM THE ORGANIZATION IT IS INCLUDED IN COMPENSATION AS REPORTED IN PART VII AND SCHEDULE J, PART II THE TERMS AND CONDITIONS OF THE AGREEMENTS ARE CONFIDENTIAL AND CAN BE MADE AVAILABLE TO THE IRS UPON REQUEST ALL AMOUNTS PAID DURING THE PERIOD COVERED BY THIS RETURN ARE APPROPRIATELY INCLUDED IN FORM 990, PART VII, AND IN SCHEDULE J, PART II AS A PART OF REPORTABLE COMPENSATION REPORTED ON THEIR RESPECTIVE FORMS W-2

Schedule J (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 52-0954751

Name: THE GERMAN MARSHALL FUND OF THE UNITED STATES

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

(A) Name and Title		(B) Breakdown of (i) Base Compensation	f W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(1)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
KAREN DONFRIED, PRESIDENT	(I) (II)	248,259 0	0	635 0	11,375 0	7,793 0	268,062	0
DEBBI IWIG, VICE PRESIDENT AND CFO	(I) (II)	200,667 0	0	1,314 0	14,310 0	5,306 0	221,597	0
IVAN VEJVODA, VICE PRESIDENT	(ı) (ıı)	246,083 0	0	11,881 0	17,206 0	17,749 0	292,919	0
IAN LESSER, DIRECTOR, FOREIGN SECURITY	(ı) (ıı)	211,459 0	0	56,481 0	14,888 0	21,500 0	304,328 0	0
STEPHEN SZABO, EXEC DIR, TRANSATLANTIC AC	(I) (II)	201,861 0	0	1,477 0	6,900 0	19,920 0	230,158	0 0
DAVID ROMLEY, VICE PRESIDENT, PARTNERSHI	(I) (II)	179,754 0	0 0	253 0	12,634 0	1,365 0	194,006 0	0
HEIKE MACKERRON, DIRECTOR, BERLIN OFFICE	(ı) (ıı)	169,425 0	0	0	6,237 0	26,098 0	201,760	0 0
MARK FISCHER, DIRECTOR OF EUROPEAN OFFIC	(I) (II)	116,352 0	0	43,167 0	0	7,129 0	166,648 0	0 0
NEIL SUNILAS, VICE PRESIDENT	(ı) (ıı)	109,087 0	0	48,507 0	8,106 0	13,114 0	178,814	0
R CRAIG KENNEDY, FORMER PRESIDENT	(I)	185,945 0	225,000	100,924	17,033 0	18,794 0	547,696 0	0

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Schedule K

(Form 990)

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

DLN: 93493092006486OMB No 1545-0047

2014

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	artment of the Treasury rnal Revenue Service	► Information	on about Schedule	K (Form 990) and it	s instructions	s is at <u>w</u>	ww.irs.gov	//fori	<u>n 990</u> .				Inspe		ic
	ne of the organization									Em	ployer id	lentifica	ation nun	nber	
THE	E GERMAN MARSHALL FUND C	FTHE UNITED STA	TES							52	-09547	51			
P	art I Bond Issues			_											
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Des	criptio	on of purpose	(g) De	feased) On	• •) Pool
													alf of suer	Tina	ancing
										Yes	No	Yes	No	Yes	No
A	DISTRICT OF COLUMBIA	53-6001131	25483VDJ0	04-21-2011	12,00	00,000	SEE PART	V FO	R DETAILS		Х		X		Х
Pa	rt III Proceeds														
						Δ.		l	В		С			D	
1	A mount of bonds retired														
2	A mount of bonds legally defe	eased													
3	Total proceeds of issue					12,000,	000						1		
4	Gross proceeds in reserve fu	ınds													
5	Capitalized interest from pro	ceeds													
6	Proceeds in refunding escro	WS													
7	Issuance costs from procee	ds				261,	785								
8	Credit enhancement from pro	oceeds													
9	Working capital expenditures	s from proceeds													
10	Capital expenditures from pr	oceeds				7,925,	012								
11	Other spent proceeds					295,	117								
12	O ther unspent proceeds					3,518,	086								
13	Year of substantial completion	on			20	12			•						
					Yes	No	Y	es	No	Yes	N	lo	Yes		No
14	Were the bonds issued as pa	ırt of a current refundı	ng issue?			X							1		
15	Were the bonds issued as pa	irt of an advance refur	nding issue?			Х									
16	Has the final allocation of pro	oceeds been made?				Х									
17	Does the organization maintallocation of proceeds?	aın adequate books ar	nd records to supp	ort the final	х										
Pa	rt IIII Private Business	Use				•	'								
									В		Ç			D	
					Yes	No	Ye	es	No	Yes	<u> </u>	lo	Yes	\dashv	No
1	Was the organization a partn property financed by tax-exe		ra member of an L	LC, which owned		х									

financed property?

Are there any lease arrangements that may result in private business use of bond-

Χ

Sche	dule K (Form 990) 2014									Page 2	
Par	Private Business Use (Continued)										
				A		B		<u>C</u>		D	
За	Are there any management or service contracts that may result in private	husiness use	Yes	No	Yes	No	Yes	No	Yes	No	
<u></u>	of bond-financed property?			Х							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?										
С	Are there any research agreements that may result in private business use financed property?	e of bond-		Х							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance										
4	Enter the percentage of financed property used in a private business use bother than a section 501(c)(3) organization or a state or local government							•		•	
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Does the bond issue meet the private security or payment test?			Х							
8a	Has there been a sale or disposition of any of the bond-financed property t nongovernmental person other than a 501(c)(3) organization since the bor issued?			х							
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		•		•		-		-	
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections									
9	Has the organization established written procedures to ensure that all non- bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		Х								
Pai	t IV Arbitrage										
		Α			В		С		D		
		Yes	No	Yes	No	,	res es	No	Yes	No	
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X								
2	If "No" to line 1, did the following apply?		•	•	•	•	•				
a	Rebate not due yet?		Х								
ь	Exception to rebate?	Х									
С	No rebate due?		Х								
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed			<u> </u>	'	<u>'</u>	<u> </u>				
3	Is the bond issue a variable rate issue?	Х									
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х								
ь	Name of provider										
С	Term of hedge										
d	Was the hedge superintegrated?										
e	Was the hedge terminated?										
			1								

		A B		С		D			
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		х						
7	Has the organization established written procedures to monitor the requirements of section 148?		Х						
Do	TV Procedures To Undertake Corrective Action								

Part V Procedures To Undertake Corrective Action

	Α		В		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	х							

Part VI Sup	hiementai mii	di mation. Provide additional information for	responses to t	questions on schedule K	(see ilistructions).	
Return Re	ference			Explanation		

Supplemental Information Drovide additional information for responses to questions on Schodule V (see instructions)

THE DISTRICT OF COLUMBIA ISSUED ITS \$12,000,000 AGGREGATE PRINCIPAL AMOUNT VARIABLE RATE DEMAND REVENUE BONDS (THE SCHEDULE K, PART I, COLUMN (F)

SCHEDULE K, PART I, COLUMN (F)

CERTAIN COSTS OF THE RENOVATION, IMPROVING, REMODELING AND EQUIPPING OF ITS OFFICE BUILDINGS LOCATED AT 1700 18TH STREET NW, AND 1744 R ST NW, WASHINGTON D C

DLN: 93493092006486

OMB No 1545-0047

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Inspection **Employer identification number**

THE GERMAN MARSHALL FUND OF THE UNITED STATES 52-0954751 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes

Enter the amount of tax incurred by organization managers or disqualified persons during the year under section	
Enter the amount of tax, if any, on line 2, above, reimbursed by the organization	

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of Interested person	(b) Relationship with organization	(d) Loan or from th organization	ie	(e)Original principal amount	(f) Balance due	(g) defau	ılt?	(h) Approv by boar commit	d or	(i)Writ agreem	
		То	From			Yes	No	Yes	No	Yes	No

Total	▶ \$					
	Assistance Benefiting In the organization answered		t IV. line 27	7.		
(a) Name of interested person		(c) A mount of assistance		of assistanc	e (e) Purpos	e of assistance

Complete if the organization			e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	: :ation's
				Yes	No
(1) CREATIVE ENGAGEMENT LLC	SEE PART V	231,250	SEE PART V		No

Part V Supplemental Information

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

Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	(A) NAME OF PERSON CREATIVE ENGAGEMENT LLC(B) RELATIONSHIP BETWEEN
TRANSACTIONS INVOLVING	INTERESTED PERSON AND ORGANIZATION CREATIVE ENGAGEMENT LLC IS AN ENTITY CO-
	OWNED BY FORMER PRESIDENT CRAIG KENNEDY(C) AMOUNT OF TRANSACTION \$231,250
	(D) DESCRIPTION OF TRANSACTION CREATIVE ENGAGEMENT LLC PROVIDEDCONSULTING
	SERVICE TO GMF DURING THE YEAR (E) SHARING OF ORGANIZATION'S REVENUE NO

Schedule L (Form 990 or 990-EZ) 2014

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DLN: 93493092006486

OMB No 1545-0047

2014

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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.

Name of the organization THE GERMAN MARSHALL FUND OF THE UNITED STATES	Employer identification number
	52-0954751

Return Reference	Explanation
SECTION B, LINE 11	PRIOR TO FILING THE 990 WITH THE IRS, THE GERMAN MARSHALL FUND'S REVIEW OF THE 990 IS CONDUCTED BY THE OFFICERS OF THE ORGANIZATION (PRESIDENT, MANAGING DIRECTOR OF EXECUTIVE OFFICE, AND CHIEF FINANCIAL OFFICER), AND BOARD OF TRUSTEES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	GERMAN MARSHALL FUND HAS A WRITTEN CONFLICT OF INTEREST POLICY AND ALL TRUSTEES, OFFICERS, AND EMPLOYEES ARE REQUIRED TO READ AND SIGN THE POLICY THIS POLICY IS INTENDED TO HELP IDENTIFY SITUATIONS THAT PRESENT POTENTIAL CONFLICT OF INTERESTS AND TO PROVIDE PROCEDURES TO ADDRESS ANY POTENTIAL CONFLICTS ADDITIONALLY, EACH TRUSTEE, OFFICER, AND EMPLOYEE IS REQUIRED TO ANNUALLY SIGN A STATEMENT AFFIRMING THE (1) RECEIPT OF THE CONFLICT OF INTEREST POLICY, (2) HAS READ AND UNDERSTANDS THE POLICY, AND (3) AGREES TO COMPLY WITH THE POLICY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	GERMAN MARSHALL FUND USES BOTH A COMPENSATION SYSTEM AND COMPARABILITY DATA TO DETERMINE COMPENSATION FOR OFFICERS AND EMPLOYEES THIS SYSTEM EVALUATES RELATIVE MARKETPLACE JOB WORTH OF THE POSITION COMPARABLE TO SIMILAR POSITIONS OF OTHER LOCAL ORGANIZATIONS THE SYSTEM ALSO EVALUATES THE RELATIVE WORTH OF EACH POSITION WHEN COMPARING THE REQUIRED LEVEL OF JOB COMPETENCIES AND FORMAL TRAINING AND EXPERIENCE SENIOR MANAGEMENT AND HUMAN RESOURCES PERFORMS AN ANNUAL REVIEW OF ALL COMPENSATION ADDITIONALLY, THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES, REVIEWS AND APPROVES COMPENSATION FOR THE OFFICERS OF THE ORGANIZATION

Return Reference	Explanation
FORM 990, PART VI,	GERMAN MARSHALL FUNDS MAKES AVAILABLE ITS GOVERNING DOCUMENTS, AUDITED FINANCIAL
SECTION C, LINE 19	STATEMENTS, AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST

Return Reference	Explanation
	OTHER PROFESSIONAL SERVICES PROGRAM SERVICE EXPENSES 4,320,806 MANAGEMENT AND GENERAL EXPENSES 400,603 FUNDRAISING EXPENSES 52,854 TOTAL EXPENSES 4,774,263

Return Reference	Explanation
FORM 990, PART XI, LINE 9	FOREIGN CURRENCY EXCHANGE LOSS -774,859 RETURNED GRANTS TO THIRD PARTIES -432,968 GRANTS RETURNED TO GMF FROM GRANTEE 44,629

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS

Return Reference	Explanation
FORM 990, PART IX, LINE 18	PAYMENTS OF TRAVEL OR ENTERTAINMENT EXPENSES FOR ANY FEDERAL, STATE, OR LOCAL PUBLIC OFFICIALS - TO CARRY OUT ITS STATED MISSION, GMF CONVENES MULTIPLE EVENTS ANNUALLY TO ALLOW DIALOGUE AMONG GLOBAL POLICY MAKERS ON TRANSATLANTIC ISSUES TRAVEL EXPENSES FOR US OFFICIALS MAY INCLUDE AIRFARE, HOTEL, MEALS AND GROUND TRANSPORTATION WHILE PARTICIPATING IN THESE EVENTS GOVERNMENT OFFICIALS DO NOT RECEIVE AN HONORARIUM OR OTHER COMPENSATIONS FOR ATTENDANCE REQUIRED FINANCIAL DISCLOSURES ARE MADE PROMPTLY IN ACCORDANCE WITH REGULATIONS

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THE GERMAN MARSHALL FUND OF THE UNITED STATES

DLN: 93493092006486

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

THE GERMAN MARSHALL FUND OF

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

52-0954751

Name of the organization

(2) THE TRANSATLANTIC FOUNDATION

Related Organizations and Unrelated Partnerships

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

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

52-0954751 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity THE GERMAN MARSHALL FUND OF (1) 1700 18TH STREET LLC - SINGLE MEMBER LLC **REAL ESTATE** DC 0 4,592,553 1744 R STREET NW UNITED STATES WASHINGTON, DC 20009

ΒE

25,832

COOPERATION AND **RUE DE LA LOI 155** UNITED STATES BRUSSELS 1040 UNDERSTANDING BETWEEN THE U.S. AND EUROPE 98-1154381

PROMOTE GREATER

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year.

	•				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(g) Section 512(b (13) controlle entity?
					Yes No

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	ation ansv	ered "Ye	s" on Form	990, Part 1	۷, line 3،	4		
	because it had one or more related organizations treated as a partnership during the tax year.												
											С		

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	Ü)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Dispropr	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	lend-of-year	allocati	ions?	amount in box	mana	iging	ownership
-		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from		1			Schedule K-1			
		country)		tax under		1			(Form 1065)			
				sections 512-		1						
		1 1		514)		1	L			L		
				,		1	Yes	No		Yes	No	

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

r more related organizations l	listed in Parts II-IV?]]]	la lb lc ld				
]]]	lb Lc ld				
		: :	Lc Ld				
		<u>1</u>	Ld				
		1	_				
			le				
		-	Lf				
		Ţ:	Lg				
 g Sale of assets to related organization(s) h Purchase of assets from related organization(s) 							
			1i				
j Lease of facilities, equipment, or other assets to related organization(s)							
		1	Lk	+			
 k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) 							
)		Ţ:	Lm				
		Ī	1n				
		1	Lo				
		1	Lp	_			
		1	Lq				
		<u> </u>	1r	+			
			ls				
omplete this line, including c	overed relationships	and transaction thresholds					
(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amou	nt invo	ved			
	complete this line, including o	complete this line, including covered relationships (b) (c) Transaction Amount involved	complete this line, including covered relationships and transaction thresholds (b) (c) (d) Transaction Amount involved Method of determining amou	1m 1n 1o 1p 1q 1q 1r 1s 1s 1s 1s 1s 1s 1s			

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

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
/		 .	<u> </u>							

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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