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SCANNED MAR 0 2 2016

Extended to February 16, 2016

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

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

<u>A (</u>	For the	e 2014 calendar year, or tax year beginning $JUL 1, 2014$ and end	iding J	UN 30, 2015				
В	Check if applicab	C Name of organization		D Employer identific	cation number			
	Addre	The Veritas Forum Inc.						
	Name			20-5	616941			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Roo	om/suite	E Telephone number				
	Final	One Presdiver 14th Floor		617-491-2055				
	termir ated			G Gross receipts \$	2,268,269.			
	Amen return	ded Combridge MA 02142 1107		H(a) Is this a group re				
	Application	F Name and address of principal officer David Hobbet	·	for subordinates				
	pendi	One Broadway 14th Floor, Cambridge, MA	0214	H(b) Are all subordinates in				
<u> </u>	Гах-ех	empt status X 501(c)(3)	527		list (see instructions)			
J	Ve bsi	te:▶ www.veritas.org		H(c) Group exemption				
<u>K</u>	orm o	forganization; X Corporation Trust Association Other	L Year	of formation: 2006 N	State of legal domicile: MA			
Pa	art I	Summary						
Ф	1	Briefly describe the organization's mission or most significant activities. To cre	eate	and encoura	ge forums,			
Governance		primarily on university campuses, to conne	ect t	oday's hard	est			
Ĕ	2	Check this box if the organization discontinued its operations or disposed	d of more	than 25% of its net as	ssets			
8	3	Number of voting members of the governing body (Part VI, line 1a)		3	9			
නේ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	7			
es	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	11			
Ĭ	6	Total number of volunteers (estimate if necessary)		6	0			
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	<u> </u>			
				Prior Year	Current Year			
ē	8	Contributions and grants (Part VIII, line 1h)		1,724,037.	2,226,128.			
Ğ		Program service revenue (Part VIII, line 2g)		14,958.	5,318.			
Revenue	I	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 7 2015		23.	<u> 178.</u>			
_		Other revenue (Part VIII, column (A), lines 5 6d; 8c; 9c; 40c; and 11e)		0.	<u>36,645.</u>			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,739,018.	2,268,269.			
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	1	Benefits paid to or for members (Part IX, column (A), Inné 4)		0.	0.			
Expenses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	888,802.			
ě	1	Professional fundraising fees (Part IX, column (A), line 11e)	、	0.	0.			
ᄍ	1	Total fundraising expenses (Part IX, column (D), line 25) 506, 433	3 •		1 054 505			
_	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	0.	1,354,726.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		0.	2,243,528.			
<u>- 8</u>	19	Revenue less expenses. Subtract line 18 from line 12		1,739,018.	24,741.			
ance		Total accests (Dark V. Lov. 40)	Rei	ginning of Current Year	End of Year			
Balls	20	Total assets (Part X, line 16)		807,695.	1,443,065.			
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)		280,430.	169,156.			
P	art II	Net assets or fund balances Subtract line 21 from line 20 Signature Block		527,265.	1,273,909.			
		lities of perjury, I declare that I have examined this return, including accompanying schedules an	nd etatem	ante and to the heet of m	u knowledge and heliaf it is			
		et, and complete. Declaration of preparer (other than officer) is based on all information of which			y Knowledge and Dellet, it is			
., .,	, 001100	The state of the s	preparer	11 1/	,			
Sig	n	Signature of officer		Date	<u> </u>			
Her		<u>David</u> Hobbet, Excutive Director						
	•	Type or print name and title						
		Print/Type preparer's name Preparer's signature		ate , Check	PTIN			
Paid	l	Michael J Cree, CPA, MST July GAM		il self-employe	一L			
	arer	Firm's name SCAS, CPAs, P.C.	<u> </u>	Firm's EIN	04-2745810			
	Only	Firm's address 20 Walnut Street		THIN S LIN				
	•	Wellesley Hills, MA 02481		Phone no 78	1-237-4620			
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		179 111	X Yes No			
	01 11-0		- 1	21-91	Form 990 (2014)			
		ee Schedule O for Organization Mission Sta	,	nt Continua	, .			

orm	990 (2014) The Veritas Forum Inc. 20-5616941 Page 2
Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	To create and encourage forums, primarily on university campuses, to
	connect today's hardest questions with the person and story of Jesus
	Christ.
	CIII 18C+
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?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
•	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.
4a	(Code) (Expenses \$1,526,836. including grants of \$) (Revenue \$)
	<u>Veritas Campus forums - The Veritas Forum helps create university</u>
	events that engage students and faculty in discussions about life's
	hardest questions and the relevance of Jesus Christ to all of life.
	The Forums are created by local university students, professors, and
	ministers while shaped and guided by the "Headquarter" Veritas forum
	team. The Veritas Forum catalyzed events at different campuses in
	North America and Europe.
	Veritas Print and on-line - The Veritas Forum also encourages
	exploration of true life through books and website.
4b	(Code) (Expenses \$
	/ (Code
_	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
_	
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 1,526,836.
	Form 990 (2014)

4.5

Form 990 (2014) The Veritas Forum Inc.

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	<u>_x</u> _	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u>X</u> _	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		7,7
	public office? If "Yes," complete Schedule C, Part I	_3_		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		X
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
٠	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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,		3.5	
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		v
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		X
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	(2014)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
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	1		
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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			1
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
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		X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	ł		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	ļ	X
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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		<u> </u>
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	 	X
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	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1.	,_	
	Note. All Form 990 filers are required to complete Schedule O	38	<u> X</u>	ļ

Form	990 (2014) The Veritas Forum Inc.	20-5616	941	P	age (
Par	t V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V	· · · <u>-</u>			
		1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 40			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0]		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?	1 1	1c	X	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				1
	filed for the calendar year ending with or within the year covered by this return	2a 11	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	ns?	2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	3)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a	ļ	X
b	If "Yes," enter the name of the foreign country.				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a_		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	iction?	5b_	ļ	X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c_	ļ	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit]		
	any contributions that were not tax deductible as charitable contributions?		<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	tions or gifts			
	were not tax deductible?		6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			ł	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?	1 1	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?	<u>7е</u>		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?	7f	ļ	
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	7h	1	<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	I by the			
	sponsoring organization have excess business holdings at any time during the year?		8		↓
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter	1 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	1	1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	4		
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a	1		1
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b	1	ľ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1	1	1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	<u> </u>	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1 1			
	organization is licensed to issue qualified health plans	13b	1	1	
С	Enter the amount of reserves on hand	13c	<u> </u>	1	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	•	14a	1	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O	14b	1	

Form 990 (2014) The Veritas Forum Inc. 20-5616941 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions										
	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{x}							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9										
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7										
2	2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2		_X_							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, or trustees, or key employees to a management company or other person?	3		_X_							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u> </u>							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u> </u>							
6	Did the organization have members or stockholders?	6		<u>X</u>							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a		<u> X</u>							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		<u> </u>							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
	The governing body?	8a	<u>X</u>								
	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			37							
200	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>							
3e C	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Vaa	Na							
100	Did the organization have local chapters, branches, or affiliates?	100	Yes	No X							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a									
b	and branches to ensure their operations are consistent with the organization's exempt purposes?										
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	X								
	 has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 										
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х								
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	12c	X								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14		X							
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а		15a		X							
b	Other officers or key employees of the organization	15b		X							
	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			77							
	taxable entity during the year?	16a		X							
þ	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	401									
200	exempt status with respect to such arrangements? tion C. Disclosure	16b									
17	List the states with which a copy of this Form 990 is required to be filed None	_									
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) is	availah	 le								
	for public inspection. Indicate how you made these available. Check all that apply	. r unau									
	Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial								
	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.										
	David Hobbet, Exec. Dir 617-491-2055										
	One Broadway, 14th Floor, Cambridge, MA 02142										

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Forum Inc. Part VIII 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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

hours for related organizations below line Market M	(F) Estimated
Control check more than one officer and a director/trusteen of the organization from related organizations below line) David Hobbet Executive Director X	Estimated
week (list any hours for related organizations below line) (1) David Hobbet Executive Director (2) Kelly Monroe Kullberg Dir Project Development (3) Kurt Keilhacker Board Chairman (4) John Kingston Treasurer week (list any hours for related organizations below line) A 0.00 X X X 190,000 Treasurer from the organizations (W-2/1099-MISC) from the organizations (W-2/1099-MISC) 190,000 0. 190,000 0. 190,000 0. 0. 0. 0. 0. 0. 0. 0. 0	
(1) David Hobbet Executive Director (2) Kelly Monroe Kullberg Dir Project Development (3) Kurt Keilhacker Board Chairman (4) John Kingston Treasurer (Ist any hours for related organizations below line) (Ist any hours for related organizations below line) (W-2/1099-MISC) (W-2/1099-MISC) (W-2/1099-MISC) (W-2/1099-MISC) (W-2/1099-MISC) (W-2/1099-MISC) (W-2/1099-MISC) (A) John Kingston Treasurer (A) John Kingston Treasurer	amount of
(1) David Hobbet 40.00 X X 190,000. 0. Executive Director X X 190,000. 0. (2) Kelly Monroe Kullberg 2.00 X 0. 0. Dir Project Development X X 0. 0. (3) Kurt Keilhacker 2.00 X X 0. 0. Board Chairman X X X 0. 0. (4) John Kingston 2.00 X X 0. 0. Treasurer X X X 0. 0.	other compensation
(1) David Hobbet 40.00 X X 190,000. 0. Executive Director X X 190,000. 0. (2) Kelly Monroe Kullberg 2.00 X 0. 0. Dir Project Development X X 0. 0. (3) Kurt Keilhacker 2.00 X X 0. 0. Board Chairman X X X 0. 0. (4) John Kingston 2.00 X X 0. 0. Treasurer X X X 0. 0.	from the
(1) David Hobbet 40.00 X X 190,000. 0. Executive Director X X 190,000. 0. (2) Kelly Monroe Kullberg 2.00 X 0. 0. Dir Project Development X X 0. 0. (3) Kurt Keilhacker 2.00 X X 0. 0. Board Chairman X X X 0. 0. (4) John Kingston 2.00 X X 0. 0. Treasurer X X X 0. 0.	organization
(1) David Hobbet 40.00 X X 190,000. 0. Executive Director X X 190,000. 0. (2) Kelly Monroe Kullberg 2.00 X 0. 0. Dir Project Development X X 0. 0. (3) Kurt Keilhacker 2.00 X X 0. 0. Board Chairman X X X 0. 0. (4) John Kingston 2.00 X X 0. 0. Treasurer X X X 0. 0.	and related
(1) David Hobbet 40.00 X X 190,000. 0. Executive Director X X 190,000. 0. (2) Kelly Monroe Kullberg 2.00 X 0. 0. Dir Project Development X X 0. 0. (3) Kurt Keilhacker 2.00 X X 0. 0. Board Chairman X X X 0. 0. (4) John Kingston 2.00 X X 0. 0. Treasurer X X X 0. 0.	organizations
X X 190,000. 0.	
(2) Kelly Monroe Kullberg 2.00 Dir Project Development X (3) Kurt Keilhacker 2.00 Board Chairman X (4) John Kingston 2.00 Treasurer X	•
Dir Project Development X 0. 0. (3) Kurt Keilhacker 2.00 X X 0. 0. Board Chairman X X X 0. 0. (4) John Kingston 2.00 X X 0. 0. Treasurer X X X 0. 0.	0.
(3) Kurt Keilhacker 2.00 Board Chairman X X 0. 0. (4) John Kingston 2.00 X X 0. 0. Treasurer X X X 0. 0.	_
Board Chairman X X D. O. O.	0.
(4) John Kingston 2.00 Treasurer X X 0. 0.	_
Treasurer X X X 0. 0.	0.
	•
	0.
(5) Ted Callahan 2.00	•
Trustee X 0. 0.	0 .
(6) Mark Campisano 2.00	0
Secretary X X 0. 0.	0.
(7) Michael Lindsay	•
Trustee X X X 0. 0.	0.
(8) Ben Chelf	0
Trustee X 0. 0.	0 .
(9) Abbi Antablin Trustee X 0. 0.	0 .
Trustee X U. U. U.	
 	
 	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
(A)	(B)			(0	C)			(D)	(E)			(F)		
Name and title	Average Position (do not check more than one							Reportable	Reportable		Es	tımate	d	
	hours per box, unless person is both					h an	compensation	ion amount of			of			
	week		ceran	dad	irecto	or/trus	tee)	from	from related			other		
	(list any	rector	the organization									pensa		
	hours for E							SC)	from the organization					
	related organizations	ustee	trust		بو	bens		(W-2/1099-MISC)			_			
	below	ual tr	tonal		ploye	no ak	_					d relate		
(list any hours for related organizations below line)											organizations			
	-						-							
	-	1												
		 												
	-	1												
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		-												
	<u>L</u>							100 000						
1b Sub-total								190,000.		0.			0.	
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.	
d Total (add lines 1b and 1c)							<u> </u>	190,000.	_	0.			0.	
2 Total number of individuals (including but	not limited to th	ose	liste	ed a	bov	e) w	no re	eceived more than \$100	,000 of reportabl	е				
compensation from the organization													2	
												Yes	No	
3 Did the organization list any former officer	, director, or tru	uste	e, ke	y er	nplo	oyee	, or l	highest compensated e	mployee on					
line 1a? If "Yes," complete Schedule J for	such individual										3		X	
4 For any individual listed on line 1a, is the s	um of reportab	le co	omp	ensa	atior	n an	d oth	her compensation from	the organization					
and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sch	edul	e J f	for such individual			4	X		
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion f	from	any	y uni	elat	ed organization or indiv	dual for services					
rendered to the organization? If "Yes," con	nplete Schedul	e J i	for s	uch	per	son					5		<u>X</u>	
Section B. Independent Contractors			_											
Complete this table for your five highest co	ompensated in	dep	ende	ent c	ont	racto	ors t	hat received more than	\$100,000 of com	pens	ation f	rom		
the organization Report compensation for											_	_		
(A)								(B)				C)		
Name and business	address	N	INC	€				Description of s	ervices			nsatio	n	
					_									
							T	<u>-</u>						
<u> </u>														
							Ī				_			
				_			_ }	·						
2 Total number of independent contractors	(includina but r	not li	mite	d to	the	se li	sted	d above) who received n	nore than					
\$100,000 of compensation from the organ	· ·	J- "		•		0		,						
Troopoo or compensation nom the organ						-			1			000		

		Check if Schedule O cont	aine a reenonee	or note to any lir	ne in this Part VIII			
		Check ii Schedule O cont	ams a response	or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo	its, and	226,128.				
	g	Noncash contributions included in lines	s 1a-1f \$					
<u>8 0</u>	h	Total. Add lines 1a-1f		▶.	2,226,128.			
Service iue	2 a b			Business Code	5,318.	5,318.		
Program Service Revenue	c d e							
-	f	All other program service reve	enue					
					5,318.			
	3	Investment income (including other similar amounts) Income from investment of ta		>	178.			178.
	5	Royalties	(ı) Real	(II) Personal				
	6 a b c	Rental income or (loss)	(I) Neal					
	d 7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				
		Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)		>				
Other Revenue		Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	of					
Othe	С	Less direct expenses Net income or (loss) from fund Gross income from gaming an	b draising events	>				
	b	Part IV, line 19 Less: direct expenses	a b					
	10 a	Net income or (loss) from gan Gross sales of inventory, less and allowances Less cost of goods sold						
		Net income or (loss) from sale	es of inventory	•				
		Miscellaneous Revenu		Business Code				
	11 a	Other			36,645.	36,645.		
	b							
	C					-	_	
	d	All other revenue Total. Add lines 11a-11d			36,645.			
	е 12	Total revenue. See instructions.			2,268,269.	41,963.	0	. 178.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising (A) Total expenses (B) Program service (C) Management and Do not include amounts reported on lines 6b, 7b. 8b. 9b. and 10b of Part VIII. **expenses** general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 190,000. 142,000 16,000. 32,000. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 39,577. 199,348. 588,089 349,164 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 56,027. 36,349. 15,936. 3,742. Other employee benefits 45,492. 6,361 2,833. 54,686. 10 Payroll taxes Fees for services (non-employees) 11 a Management Legal Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, 6,616. 114. 6,826. 96 column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 7,704. 11,247 1,187. 20,138 Office expenses 13 14 Information technology Royalties 15 43,933. 41,484. 2,449. Occupancy 16 24,246 30,326. 183,662. 129,090. Travel 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 1,347 1,272 75 Conferences, conventions, and meetings 19 Interest 20 21 Payments to affiliates 13,202. 9,785. 3,417 22 Depreciation, depletion, and amortization 34. 596. Insurance 670. 40. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 386,065 386,065 a Local forum expenses 10,173. 315,255 119,353. 185,729. ь Special projects c Contract services 209,262. 200,720. 5,011. 3,531. 9,887. 74,650. 18,126. 46,637. d Professional fees 99,716. 42,805. 25,081. <u>31,830.</u> e All other expenses 2,243,528. 1,526,836. 210,259. 506,433. Total functional expenses. Add lines 1 through 24e 25 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Part X | Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 732.494. 1 698,518. Cash - non-interest-bearing 2 Savings and temporary cash investments 2 696,485. 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 instr) Complete Part II of Sch L 6 Assets Notes and loans receivable, net 7 7 8 Inventories for sale or use 50,922. 3,811. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 120,336. 90,066. 11,074. 30,270. b Less accumulated depreciation 10b 10c 5,280. 9,836. Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 13 Investments - program-related See Part IV, line 11 13 3,418. 14 Intangible assets 14 4,507. 4,145. Other assets See Part IV, line 11 15 15 1,443,065. 807,695. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 170,039. 169,156. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 110,391. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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 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 25 280,430 169,156. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 108,951. 553,973. 27 Unrestricted net assets 27 418,314. 719,936. 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 527,265. 1,273,909. 33 33 Total net assets or fund balances 807,695. 1,443,065. Total liabilities and net assets/fund balances

orm	1990 (2014) The Veritas Forum Inc.	20-5	61694	L Pa	age 12
	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u> 269.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,2	<u>13,5</u>	<u>528.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			741.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5:	27,2	<u> 265.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	7:	21,9	903.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,2	73,9	909.
Pa	rt XII 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 X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	if "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	if "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audi	t		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audr	:		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3h		

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization The Veritas Forum Inc. 20-5616941 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 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). 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv), (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (ii) EIN (described on lines 1-9 listed in your organization support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes Nο (see instructions))

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)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and					•	
	membership fees received (Do not						
	ınclude any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10					,	
12	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
Sec	organization, check this box and stop ction C. Computation of Publ		rcentage				> L
	Public support percentage for 2014 (column (f))		14	%
15	Public support percentage from 2013	Schedule A, Part	II, line 14	,,,		15	%
16a	33 1/3% support test - 2014. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			ightharpoons
b	33 1/3% support test - 2013. If the	organization did no	t check a box on	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly s	supported organiz	ation			ightharpoons
17a	10% -facts-and-circumstances tes	t - 2014. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tl	nis box and stop h	nere. Explain in Pa	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		
b	10% -facts-and-circumstances tes	t - 2013. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, c	neck this box and	stop here. Explair	n in Part VI how the	
	organization meets the "facts-and-circ	cumstances" test	The organization of	qualifies as a publi	cly supported orga	anızatıon	▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	b, check this box a	ind see instruction	s >
					Sche	dule A (Form 990	or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 The Veritas Forum Inc. Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Se	ction A. Public Support	olow, ploade comp	noto i are ii j				
Cale	ndar 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						
	ınclude any "unusual grants ")	618,098.	961,676.	1,458,514.	1,724,037.	2,226,128.	6,988,453.
2	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	1,029.	4,005.	4,033.	14,981.	5,318.	29,366.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	619,127.	965,681.	1,462,547.	1,739,018.	2,231,446.	7,017,819.
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons		16,000.	45,000.	39,055.	147,500.	247,555.
t) 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						0.
c	Add lines 7a and 7b		16,000.	45,000.	39,055.	147,500.	247,555.
	Public support (Subtract line 7c from line 6)						6,770,264.
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6	619,127.	965,681.	1,462,547.	1,739,018.	2,231,446.	7,017,819.
10a	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	761.	373.			178.	1,312.
t	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	761.	373.			178.	1,312.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)					36,645.	36,645.
13	Total support. (Add lines 9, 10c, 11, and 12)	619,888.	966,054.	1,462,547.	1,739,018.	2,268,269.	7,055,776.
14	First five years. If the Form 990 is for			d, fourth, or fifth ta		n 501(c)(3) organiz	
	check this box and stop here						▶□
Se	ction C. Computation of Publ	ic Support Pe	rcentage	-			
15	Public support percentage for 2014 (I	ine 8, column (f) di	vided by line 13, c	olumn (f))		15	<u>95.95 %</u>
	Public support percentage from 2013		•			16	<u>97.95 %</u>
Se	ction D. Computation of Inves	stment Incom	e Percentage			г т	
	Investment income percentage for 20			e 13, column (f))		17	.02 %
	Investment income percentage from 2					18	%
198	a 33 1/3% support tests - 2014. If the more than 33 1/3%, check this box at	_					7 is not ►X
t	33 1/3% support tests - 2013. If the	•	•	•			
	line 18 is not more than 33 1/3%, che	-					ightharpoons
20	Private foundation. If the organization		· ·				ightharpoonup

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.)

Se

3ec	tion A. All Supporting Organizations		V	•••
4	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
1	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	-	-	
2	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				
Зā	(b) and (c) below	3a		
.	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	Sa		
U	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		
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)	30		
C	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4-		30		
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If	4.0		
_	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	4a		
b		1		
	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	46		
		4b		
С	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)? 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)			
	, , , , , , , , , , , , , , , , , , , ,	4c		
E-	purposes. Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	40		
oa	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		Ja		
b	designated in the organization's organizing document?	5b		
_	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	- 50		
Ü	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	•	1
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	1	
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 I 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			ļ
	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? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit		T -	
•	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	41.00			
	(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)

cho	odule A (Form 990 or 990 EZ) 2014 The Veritas Forum Inc.	20-56169)41 F	Page 5
	rt IV Supporting Organizations (continued)			age C
	Supporting Organizations (continued)			Ma
	Use the assessment a contract or contribution from any of the following persons?		Yes	No_
11	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)	44.		Ì
	below, the governing body of a supported organization?	112		+
	A family member of a person described in (a) above?	111		+
	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.	110	; <u> </u>	1
ec.	tion B. Type I Supporting Organizations		1	Τ
			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 carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Sec	tion 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		1.55	1
•	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			
			İ	
-	the supported organization(s) tion D. Type III Supporting Organizations	1		ــــــــــــــــــــــــــــــــــــــ
, C C	tion b. Type in Supporting Organizations		V	N _a
_		Γ	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?	<u> </u>	_	
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]
Sec	tion 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 ins	tructions):		
а	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity	ty (see instruction	ons)	
2	Activities Test Answer (a) and (b) below.	•	Yes	No
	S. L. L. L. D. Charles and the control of the contr			
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			1
	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			
		2a		
L	that these activities constituted substantially all of its activities.	<u>Z</u> a	' 	+
D	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		1	
	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		<u> </u>	+
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	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		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		- 1	1

_	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	og Orga	-	20-5616941 Page
	Check here if the organization satisfied the Integral Part Test as a qualifying			uetions All
1	other Type III non-functionally integrated supporting organizations must co	·-		ictions. All
Sect	on A - Adjusted Net Income	Jinpiete C	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveres of pnor-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		
Sect	ion 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)			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b	<u>.</u>	
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3_		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly-integrat	ed Type III supporting org	anization (see

instructions)

ra	t v Type III Non-Functionally integrated 508	(a)(3) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish ex-			
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organization	IS .	
4	Amounts paid to acquire exempt-use assets		· =	
5_	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which to	the organization is responsive	9	
	(provide details in Part VI). See instructions			
9_	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount		· 	
		(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
Sect	ion E - Distribution Allocations (see instructions)	LACESS DISTIBUTIONS	Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6		110 2017	7 11100111 101 2017
2	Underdistributions, if any, for years prior to 2014			
_	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014			71-
a	Dioose distributions carry over, it arry, to be		· · · · · · · · · · · · · · · · · · ·	-
b			- "-	
c				
d				
е	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)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D,			
	line 7 \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4	<u></u>		
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				
b				
c				
	Excess from 2013			
	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Schedule A	(Form 990 or 990 EZ) 2014 The Veritas	Forum Inc.		<u>20-561694</u>	11 Page 8
Part VI	(Form 990 or 990 EZ) 2014 The Veritas Supplemental Information. Provide the ex	planations required b	y Part II, line 10, Part II, lir	ne 17a or 17b, and Part III, i	ne 12
	Also complete this part for any additional information	on. (See instructions)			
		· -			
					
					
					
			·		
	· · · · · · · · · · · · · · · · · · ·		·- <u>-</u> .		
		· .			
		·			
		<u> </u>			
			· ·		<u>-</u>
	······································				

SCHEDULE D

Department of the Treasury

(Form 990)

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.lrs.gov/form990.

Employer identification number

Internal Revenue Service Name of the organization

The Veritas Forum Inc.

20-5616941 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		ltas Forum			200011200	or Oth	or Cimil	<u> 20-56</u>			ge∠
	t III Organizations Maintaining C										
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following tha	at are a s	ignificant	use of its	collection	rtems	i
	(check all that apply):										
а	Public exhibition	ď	!	Loan or exc	hange progra	ams					
b	Scholarly research	•		Other							
С	Preservation for future generations										
4	Provide a description of the organization's continuous	ollections and expla	ın how tl	ney further t	he organizati	on's exe	mpt purp	ose in Par	t XIII		
5	During the year, did the organization solicit of	or receive donations	of art, h	storical trea	sures, or oth	er sımılaı	r assets		_		
	to be sold to raise funds rather than to be m								Yes		No
Pa	t IV Escrow and Custodial Arran		ete if the	organizatio	on answered	"Yes" to	Form 990), Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa			-							
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	sets not	ıncluded	_	_	_	
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or c	ustodial acco	ount liabil	lity?		Yes		No
b	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanation	on has been	provided in	Part XIII					
Pai	t V Endowment Funds. Complete	if the organization ar	nswered	"Yes" to Fo	rm 990, Part	IV, line 1	0				
		(a) Current year	(b) F	rior year	(c) Two yea	rs back	(d) Three	years back	(e) Four	years b	ack
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance				-						
2	Provide the estimated percentage of the cur	rent vear end baland	ce (line 1	a column (a	a)) held as	- 1					
a	Board designated or quasi-endowment	Torre your one building	%	9, 00.0 (u)) 11010 00						
h	Permanent endowment		— <i>''</i>								
6	Temporarily restricted endowment	% %									
·	The percentages in lines 2a, 2b, and 2c shou	_									
30	Are there endowment funds not in the posse	•	ation the	at are held a	and administr	ared for t	ho organi	zation			
Ja	by	sssion of the organiz	ation the	at are rieta a	ina aaniiniste	orea for t	ne organi	Zation	F.	Yes	No
	(i) unrelated organizations								3a(i)	165	140
	· · · · · · · · · · · · · · · · · · ·										—
	(ii) related organizations If "Yes" to 3a(ii), are the related organization:	a liated on required :	an Caba	dula DO					3a(ii)	-	—
b 4	Describe in Part XIII the intended uses of the	•							SU		
Par	t VI Land, Buildings, and Equipm		OWITHETH	iulius.							—
	Complete if the organization answere) Part IV	/ line 11a S	See Form 990	Part X	line 10				
	Description of property	(a) Cost or o		i ———	t or other		ccumulate	ad a	(d) Book	value	
	Bosonption of property	basis (investi		, , ,	(other)		preciation		(u) Door	value	
12	Land		. 7		, ,				 		
b	Buildings	_									
c	Leasehold improvements										
d	Equipment										
e	- · ·			12	0,336.		90,0	66.	30	,27	70.
	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colur							, 27	

Schedule D (Form 990) 2014

Sche	edule D (Form 990) 2014 The Veritas Forum Inc.		20-561694	11 Page 4
	rt XI Reconciliation of Revenue per Audited Financial St	atements With Reve	nue per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, III	ne 12a		
1	Total revenue, gains, and other support per audited financial statements		1 2,26	<u>8,532.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1		
	Net unrealized gains (losses) on investments	2a	263.	
	Donated services and use of facilities	<u>2</u> b		
	Recoveries of prior year grants	2c		
	Other (Describe in Part XIII)			0.00
_	Add lines 2a through 2d		2e	263.
3	Subtract line 2e from line 1		$3 \mid 2,26$	8,269.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.1		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII)	_4b		^
_	Add lines 4a and 4b	. .	4c	0. 58,269.
<u>5</u> Dai	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial S			00,409.
- 41	Complete if the organization answered "Yes" to Form 990, Part IV, III	•	enses per netum.	
	Total expenses and losses per audited financial statements	12 12 4	1 2.24	13,528.
1	Amounts included on line 1 but not on Form 990, Part IX, line 25		1 4,2,	13,320.
2	Donated services and use of facilities	2a		
	Prior year adjustments	2b		
	Other losses	2c		
	Other (Describe in Part XIII)	2d		
	Add lines 2a through 2d	<u> </u>		0.
3	Subtract line 2e from line 1			13,528.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		<u> </u>	<u> </u>
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII)	4b		
	Add lines 4a and 4b		4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	18.)	5 2,24	13,528.
Pai	rt XIII Supplemental Information.			
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide a			
_				

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990.

OMB No 1545-0047

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 The Veritas Forum Inc. Employer identification number 20-5616941

F 6	it i Questions negariting compensation		1	
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
¢	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	ļ	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			ļ
а	The organization?	5a		X
b	Any related organization?	5b		X
	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		1	
	contingent on the net earnings of			
а	The organization?	6a		X
b	Any related organization?	_6b_	<u> </u>	X
	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		X_
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	<u>L</u>	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2014

Page 2

20-5616941

The Veritas Forum Inc.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2014

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

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

								•
		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denemis		in column (B) reported as deferred in prior Form 990
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Schedule J (Form 990) 2014

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Inspection Employer identification number

The	Veritas Forum Inc.		20-5616941
Form 990, Part I, Li	ne 1, Description of Org	ganization Mis	sion:
questions with the p	erson and story of Jesus	Christ.	
Form 990, Part VI, S	ection B, line 11:		
Form 990, PArt VI, L	ine 11b - The Executive	Director of t	he Organization
reviews a copy of th	Form 990 prior to fili	ing.	
Form 990, Part VI, S	ection B, Line 12c:		
Form 990, PArt VI, L	ine 12c: All Board membe	ers and key em	ployees are
required annually to	review the conflict of	interest poli	cy and complete
and sign a conflict	of interest questionnair	e. Any quest	ionable
relationships are re	riewed by the Board.		
Form 990, Part VI, S	ection C, Line 18:		
Form 990, PArt VI, L	ne 19: All documents a	re made avail	able to the public
upon request.			
Form 990, Part VI, S	·-		
	ne 12C - Conflict of In		
	uired annually to revie		
	and sign a conflict of i		ionnaire. Any
<u>questionable relation</u>	ships are reviewed by t	the Board.	
			