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EXTENDED TO FEBRUARY 16, 2016

Form **990**

Return of Organization Exempt From Income Tax

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

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

2014
Open to Public Inspection

Department he Treasury

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. A For the 2014 calendar year, or tax year beginning JUL 1, 2014 and ending JUN 30, D Employer identification number C Name of organization Check if applicable CENTER FOR SCIENCE IN THE Address change PUBLIC INTEREST Name change 23-7122879 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final returr 1220 L STREET, NW 300 (202)777-830418,876,805. City or town, state or province, country, and ZIP or foreign postal code Amende WASHINGTON, DC 20005 H(a) Is this a group return Applica F Name and address of principal officer MICHAEL JACOBSON Yes X No for subordinates? pending SAME AS C ABOVE Yes No H(b) Are all subordinates included? I Tax-exempt status: ■ 501(c)(3) 4947(a)(1) or ___ 501(c) () (insert no.) If "No," attach a list. (see instructions) J Website: ► WWW.CSPINET.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Other > Trust Association L Year of formation: 1971 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities: CSPI CONDUCTS RESEARCH Activities & Governance EDUCATION, AND ADVOCACY ON NUTRITION, FOOD SAFETY AND HEALTH ISSUES. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 14 Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 85 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable uncome from Form 990-T, line 34 0. **Prior Year Current Year** Contributions and grants (Part VIII) line 17,058,351 15,692,039. SECANNED WAR OF 2016 Bavenue Program service revenue (Part VIII, line 2g) 477,726. 283,095. Investment income (Part VIII, column A), lines 3, 4, and 7d) 352,487 <u>353,933.</u> Other revenue (Rart VIII, Column (A) lines 5, 6d, 8c, 9c, 10c, and 11e) 769,687. 962,935. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 18,658,251 292,002. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to octor members (Part IX, column (A), line 4) 0. 0. 5,894,818. 5,439,497. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part iX, column (D), line 25) 1,931,605. 15,361,603. 11,669,562. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17,109,059. 21,256,421 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -2,598,170 182,943. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 10,739,607. 10,272,261. 2,813,910 2,<u>3</u>11,577. 21 Total liabilities (Part X, line 26) 7,960,684. 7,925,697. Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer to the reference than officer) is based on all information of which preparer has any knowledge. untra Signature of officer Sign MICHAEL JACOBSON, EXEC. DIRECTOR Here Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature BRED 1/21/1 Paid CHARLES R. DEPPE P01300682 Firm's name MATTHEWS, CARTER & BOYCE 54-1487262 Preparer Firm's EIN Firm's address 12500 FAIR LAKES CIRCLE, SUITE 260 Use Only FAIRFAX, VA 22033 Phone no. 703 - 218 - 3600X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

945

Form **990** (2014)

orm	n 990 (2014) PUBLIC INTEREST 23	<u>-7122879 </u>	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	THE CENTER FOR SCIENCE IN THE PUBLIC INTEREST (CSPI) IS A	NOT FOR	
	PROFIT ORGANIZATION OPERATING IN THE UNITED STATES AND CAN		
	SEEKS TO PROVIDE USEFUL, OBJECTIVE INFORMATION TO THE PUBL		
	CONDUCT RESEARCH ON NUTRITION, FOOD SAFETY, ALCOHOL, HEALT	H, THE	
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	. LYes	X No
	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?	Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured to the organization of the	sured by expenses	1
-		• •	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	e total expenses,	and
	revenue, if any, for each program service reported		
4a)
	PUBLIC EDUCATION - INCLUDES THE DISTRIBUTION OF HEALTH AND	NUTRITIO	N
	ORIENTED MATERIALS, SUCH AS BOOKS, BROCHURES, LETTERS, ART	ICLES, AN	D
	PAMPHLETS TO THE PUBLIC; SPONSORSHIP OF CONFERENCES AND WE	BSITES.	
		<u></u>	
4b	(Code) (Expenses \$ 6,498,901. Including grants of \$) (Revenue \$	BLISHING ICAL FOR	
	FOOD SAFETY, AND RELATED HEALTH ISSUES.		
4c	(Code) (Expenses \$4 , 086 , 871 . including grants of \$) (Revenue \$)	61,	<u>863.</u>)
	SPECIAL PROJECTS - INCLUDES EFFORTS TO:		
	- PROVIDE PUBLIC INFORMATION ON NUTRITION AND DIET, PROVID	E CONSUME	R
	INPUT ON NUTRITION AND FOOD SAFETY LAWS AND REGULATIONS, I		
	ACCURACY OF FOOD AND BEVERAGE ADVERTISING AND LABELING, PR		
	HEALTHIER MENU ITEMS IN RESTAURANTS;	OMOTE	
	HEADINIER MENU IIEMS IN RESIAURANIS;		
		 .	
	- PROMOTE INCREASED PRODUCTION AND AVAILABILITY OF FOOD TH		E OF
	UNSAFE INGREDIENTS BY WORKING WITH FOOD PRODUCERS AND RETA	ILERS,	
	MONITORING AND INVESTIGATING PROPOSED AND APPROVED ADDITIV	ES TO THE	
	FOOD SUPPLY, AND MONITORING AND IMPROVING THE LAWS AND REG		
		FOOD AND	
4		TOOD AND	•
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses ► 14,788,162.		
		Form 9	90 (2014)
13200 11-07			

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			_
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		i	
	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	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	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		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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
h	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		<u> </u>
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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		х
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
20a		20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			aan	(2014)

Form 990 (2014) PUBLIC INTEREST Part 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 organization report more than \$5.000 of grants or other assistance to any domestic individuals on Part IX, column (A), in P1 "IV "es, "complete Schedule I, Part I and III Parts		•		Yes	No
22 Description of the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part IX, cournel for Schedule J. Part I and III 22 X 23 X 24 24 25 25 25 26 26 26 26 26	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
22 Det the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part IX, coummels eshable is Parts and III 23 Det the organization answer "Yes" to Part IVI, Section A, Ine 3, 4, or 5 about compensation of the organization scurrent and former officiers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedulu / 24 Det 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 \$1, 2002? If "Yes," answer lines 24b through 24d and complete Schedulus K. If "No." yo to line 25e Det the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? d Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and a star an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and a star and "on the part of the organization and person in a princy year, and that the transaction with a disqualified person if it is organization and a star to report the organization and person in a princy year, and that the transaction with a disqualified person if it is organization and a star to report the organization person in a princy or a princy to the organization person in a princy or a princy to the princy organization in person of a grant or other assistance to an officer, director, trustee, key employee, bulkets complete Schedulu II, Part IV instructions for applicabl		dòmestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
23 De the organization answer "Yes" to Part VII, Section A, Inis 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 I. I "Yes," complete Schedule I. I "Yes," to the very intal was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25s D dit the organization maintain an escrive account other than a refunding escrive at any time during the year of defease any tax-exempt bonds? D dit the organization maintain an escrive account other than a refunding escrive at any time during the year? O the organization maintain an escrive account other than a refunding escrive at any time during the year? D dit the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D dit the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? D dit the organization was a behalf of person during the year? If "Yes," complete Schedule L, Part I ("Yes," complete Schedule L, Part I ("Yes," complete Schedule L, Part II ("Yes," comple	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
23 Did the organization answer "Yes" to Part VII, Section A, Ine 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 I. I "No", go to line 25a		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Dd 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 I, "No." yo of une 25a 24b 24b 5 b Dd the organization minest any proceeds of tax-exempt bonds beyond a temporary peniod exception? c Dd the organization minest any proceeds of tax-exempt bonds beyond a temporary peniod exception? d Dd the organization minest any proceeds of tax-exempt bonds beyond a temporary peniod exception? d Dd the organization minest any proceeds of tax-exempt bonds outstanding at any time during the year of defease any tax-exempt bonds? d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Dd the organization with a disqualified person during the year? If "Yes," complete Schedule L, Part I is 1 bis the organization and that the transaction with a disqualified person in a prory year, and that the transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, are other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, against selection committee member, or to a 35% controlled entity or family member of a unrent for former officer, director, trustee, or key employee or a family member thereof) was an officer, director, trustee, or key employee	23				
Schedule J 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 "Fes," answer lines 24b through 24d and complete Schedule K. If "No.", go to line 25a Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds. did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds. Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? did the organization as a "on behalf of" issuer for bonds outstanding at any time during the year? did the organization at a sea "on behalf of" issuer for bonds outstanding at any time during the year? 24d			1		
24a Dd 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 ines 24b through 24d and complete Schedule K. If 'NO', go to line 25a b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25c Section 501(c/3), 501(c/4), and 501(c)(29) organizations. Did the organization engage in an excess behefit transaction with a dequalified person in a prior year, and that the transaction with a dequalified person in a prior year, and that the transaction has not been reported on any of the organization is prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II 25b Dd 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, fusitees, key employees, substantial contribution or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a ran yof these persons? If "Yes," complete Schedule L, Part III 27b Dd the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a Acurent or former officer, director, fusitee, or key employee? If "Yes," complete Schedule L, Part IV 27c, and 27c, and 30c, and 3			23	x	
alsat 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 b Did the organization mantain an escrive account other than a refunding escrive at any time during the year to defease any tax-evempt bonds? d Did the organization mantain an escrive account other than a refunding escrive at any time during the year to defease any tax-evempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and been reported on any of the organization report any any any and that the transaction has not been reported on any of the organization report any amount on Part X, line 5, 6, or 22 for recevables from or payables to any current or former officer, trustes, key employees, inghest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II Did the organization report any amount on Part X, line 5, 6, or 22 for recevables from or payables to any current or former officer, trustes, key employees, or disqualified persons? If "Yes," complete Schedule L, Part II Did the organization propriet against committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions or the second propriets Schedule II, Part IV instructions? If "Yes," complete Schedule II, Part	24a	·			
Schedule K. If "No", go to line 25a b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? C Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax exempt bonds outstanding at any time during the year to defease any tax exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did to the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did 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 is prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II 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 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 a unrest of both the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant stransaction with one of the following parties (see Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 26a Did the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? If					
b Did the organization invest any proceeds of fax-exempt bonds beyond a temporary period exception? 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? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person of any of the organization period on any of the organization period of any of the organization period any of the organization or period any of these persons? If "Yes," complete Schedule L, Part III 25b			242		x
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Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 50 ((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? "Yes," complete Schedule L, Part 1 25b 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-E27 // "Yes," complete 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? // "Yes," complete Schedule L, Part II 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? // "Yes," complete Schedule L, Part II 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): a A current or former officer, director, trustee, or key employee? // "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29b Did the organization receive more than \$25,000 in non-ash contributions? If "Yes," complete Schedule L, Part IV 29c Did the organization receive more than \$25,000 in non-ash contributions? If "Yes," complete Schedule M, Part I 30 Did the organization receive more than \$25,000 in non-ash contributions? If "Yes," complete Schedule M, Part I 31 Did the organization related to any tax exempt or taxable entity? If "Yes," complete Schedule R,	·	, , , ,	24-		
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		• • • • • • • • • • • • • • • • • • • •			\vdash
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If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 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 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 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 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 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			30		<u>X</u>
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Note. All Form 990 filers are required to complete Schedule O		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Form 990 (2014)		Note. All Form 990 filers are required to complete Schedule O			<u> </u>
			Form	990	(2014)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			-3-
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c_	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			ĺ
	filed for the calendar year ending with or within the year covered by this return . 2a 85			İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			İ
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 O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<u> X</u>	
b	If "Yes," enter the name of the foreign country: ► <u>CANADA</u>			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	-		i
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_5c_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		.,	1
	any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	~ L	x	ĺ
_	were not tax deductible?	6b	^	
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х	ĺ
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	′′		
·	to file Form 8282?	7c		X
d	If "Yes," Indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			ĺ
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		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.) Continue 4047(-)(4) man avantable truste le the organization filing Form 900 in liquid Form 10412	40-		ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
12			1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O	ısa		
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
J	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	-	_ -
	The state of the s		aan	10011

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			X
Sec	tiòn 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 14			
	If there are material differences in voting rights among members of the governing body, or if the governing		ļ	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	ļ	ŀ	
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_	officer, director, trustee, or key employee?	2	ŀ	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	İ	x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			i
	more members of the governing body?	7a		X
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		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
b	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			
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	<u> </u>
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	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			
	taxable entity dunng the year?	16a		X
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		L
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶AR, CA, CT, HI, IL, KS, KY, ME, MI	, MA	<u>,MI</u>	, MN
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)	avaılat	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	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			
	BOOKKEEPER - 202-777-8304			
	1220 L STREET, NW SUITE 300, WASHINGTON, DC 20005			
42200	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	1 990	(2014)

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

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

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

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

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

(A) Name and Title	(B) Average	_ ا		(C Posi	ition	l than	 -	(D) Reportable	(E) Reportable	(F) Estimated
	hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week (list any hours for	or director	ceran	dad	recto	x/trus		from the organization	from related organizations (W-2/1099-MISC)	other compensation from the
	related organizations below	rustee	Institutional trustee		Key employee	Highest compensated employee	;	(W-2/1099-MISC)	,	organization and related
	line)	Individual	nstrtut	Officer	Key em	Highes	Former			organizations
(1) TOM GEGAX	4.00									
PRESIDENT		X		X			<u> </u>	0.	0.	0
(2) MICHAEL JACOBSON	50.00									
EXECUTIVE DIRECTOR/SECR		X		X		<u> </u>		253,191.	0.	13,911
(3) DENISE M. ELLIOTT	2.00					ļ	ļ			
DIRECTOR		X	<u> </u>			!		0.	0.	0
(4) MARK INGRAM	4.00								_	
TREASURER		X	<u> </u>	X		<u> </u>	ļ	0.	0.	0
(5) SUSHMA PALMER	2.00	┨				1	,			
DIRECTOR		X	<u> </u>	_		<u> </u>	<u> </u>	0.	0.	.0
(6) JAMES SULLIVAN	2.00	ļ	ļ			1			•	
DIRECTOR		X	├			ļ		0.	0.	0
(7) SHEILA RABB WEIDENFELD	2.00					ļ	ŀ		•	
DIRECTOR		X	-			 	<u> </u>	0.	0.	0
(8) LYNN SILVER CHALFIN	2.00	.							_	,
DIRECTOR	2 00	X	┢				\vdash	0.	0.	0
(9) DAVID KESSLER	2.00	x						0.	0.	0
DIRECTOR	2.00	^					_	0.		
(10) ROBIN CAIOLA SHEEKEY	2.00	X						0.	0.	0
DIRECTOR CZEWELY	2.00	Λ						0.		
(11) DEBORAH SZEKELY	2.00	x				ŀ		0.	0.	0
DIRECTOR (12) PENN STAPLES	2.00	1				 	-			
DIRECTOR	2.00	X						0.	0.	0
(13) RUDY RUIZ	2.00		\vdash							<u>_</u>
DIRECTOR	2000	\mathbf{x}						0.	0.	0
(14) LISA HEINZERLING	2.00					Г				
DIRECTOR		\mathbf{x}						0.	0.	0
(15) STEPHEN SCHMIDT	40.00	T	T				Г			<u>-</u>
EDITOR HEALTHLETTER		1			Х			183,982.	0.	8,423
(16) WILLIAM DUGAN	40.00	İ			_ <u>-</u>	\Box				
DEPUTY DIRECTOR		1			x			168,286.	0.	6,492
(17) CAROLINE SMITH DEWAAL	40.00									, = = =
FOOD SAFETY DIRECTOR]				X		159,755.	0.	5,725

Form **990** (2014)

PUBLIC INTEREST

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	Compensated Employe	es (continued)				
(A) Name and title	(B) Average hours per	(do	not c	(C Pos heck	C) itior	i than	one	(D) Reportable	(E) Reportable			(F)	
	week (list any hours for related organizations below line)	tee or director				Highest compensated employee	tee)	from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-MIS	l s	com fro orga	nount other pensatiom the anizated d related	ation ne tion ted
(18) BONNIE LIEBMAN	40.00												
DIRECTOR OF NUTRITION			$oxed{oxed}$		_	X		175,058.		0.		<u>4,7</u>	<u> 17.</u>
(19) MARGO WOOTAN	40.00	1	1			ŀ							
NUTRITION POLICY DIRECTOR					_	X		160,594.		0.	1	<u>5,2</u>	28.
(20) STEPHEN GARDNER	40.00												
LITIGATION DIRECTOR			<u> </u>		_	X	ļ	202,931.		0.	1	<u>0,2</u>	24.
(21) GREGORY JAFFE	40.00					ŀ							
DIRECTOR OF BIOTECHNOLOGY			_		<u> </u>	X		143,512.		0.	1	4,7	31.
						ļ							
		_	<u> </u>										
1b Sub-total							•	1,447,309.		0.	<u> </u>	9, <u>4</u>	51.
c Total from continuation sheets to Part V	II, Section A						>	0.		0.			0.
d Total (add lines 1b and 1c)							▶_	1,447,309.		0.	<u> </u>	9,4	51.
Total number of individuals (including but no compensation from the organization	ot limited to th	nose	liste	ed al	bove	e) wh	o r	eceived more than \$100	,000 of reportabl	e			15
												Yes	No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y en	nplo	yee,	or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su								•	the organization				
and related organizations greater than \$15	0,000? If "Yes,	" co	mpl	ete S	Sche	edule) J 1	for such individual		,	4	X	
5 Did any person listed on line 1a receive or a	•				-		elat	ted organization or indivi	dual for services				
rendered to the organization? If "Yes," com	plete Schedul	<u>e J 1</u>	or s	uch	per	son			 		5		X
Section B. Independent Contractors								77.47					
 Complete this table for your five highest co the organization. Report compensation for 										pensa	ation fi	rom	
(A)								(B)			(C	:)	
Name and business	address						_	Description of s	ervices	С	omper		n
SISK MAILING SERVICES , STEVENSVILLE, MD							- 1	DIRECT MAIL PRODUCTION			94'	76	92.
UNITED ENVELOPE						一					<i>.</i> , <u>.</u>	<u>, , , , , , , , , , , , , , , , , , , </u>	
, CLEVELAND, OH							ŀ	PRINTER	·		49	3.0	06.
BROWN PRINTING COMPANY		-					$\overline{}$	NEWSLETTER P	RINTING				
, WASECA, MN							- 1	& PRODUCTION	I		47	5.8	70.
AMIDON GRAPHICS													

Form **990** (2014)

441,643.

440,085.

2 Total number of independent contractors (including but not limited to those listed above) who received more than

, ST PAUL, MN

, DANBURY, CT

RMI DIRECT MARKETING

\$100,000 of compensation from the organization

MAIL LIST BROKERAGE

PRINTER

Form 990 (2014) PUBLIC
Part VIII Statement of Revenue

			` Check if Schedule O cont	tains a response	or note to any lin	e in this Part VIII			
-						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1	а	Federated campaigns	1a					
E			Membership dues	1b	7,769,539.				
ع ق			Fundraising events	1c	7,705,555.				
i A			Related organizations	1d					
a,iii			Government grants (contribut						
Sign			All other contributions, gifts, gran		-				
풀힐		•	similar amounts not included abo		7,922,500,				
풀히		_	Noncash contributions included in lines		1,322,300.	•			
Contributions, Gifts, Grants and Other Similar Amounts		-	Total. Add lines 1a-1f	s 1a-11 \$	<u> </u>	15 692 039			
					Business Code	15,032,033			
e l	2	а	PUBLICATION SALES		900099	221,232,	221,232,		
اه ځ		b	HONORARIA		900099	61,863.	61,863.		
Program Service Revenue		С				·	·		
e a		d							
P. G		е						•	
<u>ہ</u>		f	All other program service reve	enue .					
		g	Total. Add lines 2a-2f	•		283_095			
	3		Investment income (including	dividends, intere	est, and	·			
			other similar amounts)	-	▶	140,451.			140,451.
	4		Income from investment of ta	x-exempt bond p	roceeds				
	5		Royalties -		>	511 397.			511,397,
				(i) Real	(ii) Personal				
	6	a	Gross rents						
		b	Less rental expenses						
		С	Rental income or (loss)						
		d	Net rental income or (loss)	<u> </u>					
	7	а	Gross amount from sales of	(i) Secunties	(ıi) Other				
			assets other than inventory	1,798,285.					
		b	Less. cost or other basis						
			and sales expenses	1,584,803.					
		С	Gain or (loss)	213,482.					
		d	Net gain or (loss)			213,482,			213,482,
<u>o</u>	8	а	Gross income from fundraisin	g events (not					
Other Revenu			including \$	of					
ا ۾			contributions reported on line	: 1c). See					
- F			Part IV, line 18	. а					
튬			Less: direct expenses	b					
-			Net income or (loss) from fund	-	<u> </u>				-
	9	а	Gross income from gaming ad						
			Part IV, line 19	а					
			Less: direct expenses	ь					
			Net income or (loss) from gam	-	<u>_</u>				
	10	а	Gross sales of inventory, less						
			and allowances	a					
			Less: cost of goods sold	b	L		-		
ŀ		С	Net income or (loss) from sale				<u> </u>		
-	44	_	Miscellaneous Revenu		Business Code				
			OTHER INCOME		900099	451,538.			451,538.
		b							
		C	All other severe						
			All other revenue			450 500			
		е	Total. Add lines 11a-11d Total revenue. See instructions.			451,538,			1 200 000
43200 11-07	9		TOTAL TEACHING ORG HISH OCHORS.			17,292,002	283,095,	0,	1 316 868. Form 990 (2014)

Form 990 (2014) PUBLIC INTERE Part IX Statement of Functional Expenses

	Check if Schedule O contains a responsor include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic			,	
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			ľ	
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	645 272	506 524	10 524	46 214
_	trustees, and key employees	645,272.	586,524.	12,534.	46,214
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	4 100 074	2 520 545	TO 066	002 061
7	Other salaries and wages	4,102,874.	3,730,747.	78,866.	293,261
8	Pension plan accruals and contributions (include	00 005	01 260	0 100	6 505
	section 401(k) and 403(b) employer contributions)	90,225.	81,368.	2,130.	6,727
9	Other employee benefits	258,111.	232,774.	6,093.	19,244
10	Payroll taxes	343,015.	309,285.	7,730.	26,000
11	Fees for services (non-employees).				
а	Management				
þ	Legal	9,359.	5,253.	3,918.	188
C	Accounting	40,800.	28,964.	5,680.	6,156
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	113,493.	64,438.		49,055
13	Office expenses	408,356.	299,305.	19,354.	<u>89,697</u>
14	Information technology				<u> </u>
15	Royalties				
16	Occupancy	781,499.	548,427.	116,536.	116,536
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	124,068.	96,237.	1,341.	26,490
20	Interest .				<u></u>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	161,892.	114,927.	22,537.	24,428
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	POSTAGE AND MAILING	5,434,544.	4,738,573.	644.	<u>695,327</u>
b	PRINTING & PUBLICATIONS	2,472,428.	2,161,952.	979.	309,497
C	OTHER EXPENSES	749,368.	566,759.	133,933.	48,676
d	CONSULTANTS, PROFESSION	461,818.	436,879.	2,929.	22,010
е	All other expenses	911,937.	785,750.	-25,912.	152,099
5	Total functional expenses. Add lines 1 through 24e	17,109,059.	14,788,162.	389,292.	1,931,605
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here X if following SOP 98-2 (ASC 958-720)	4,643,941.	3,132,021.	0.	1,511,920

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Form 990 (2014)

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	965.	1	1,417.
	2	Savings and temporary cash investments	501,630.	2	833,750.
	3	Pledges and grants receivable, net	264,877.	3	1,420,500.
	4	Accounts receivable, net	218,960.	4	121,584.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L	15,310.	5	0.
	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			
ş		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	,
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use	442,120.	8	319,055.
	9	Prepaid expenses and deferred charges	165,097.	9	141,803.
	10a	Land, buildings, and equipment, cost or other			•
		basis. Complete Part VI of Schedule D 10a 1,689,033.			
	b	Less: accumulated depreciation 10b 957,474.	885,941.	10c	731,559. 6,640,393.
	11	Investments · publicly traded securities	8,185,221.	11	6,640,393.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	59,486.	15	62,200.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	10,739,607.	16	10,272,261.
	17	Accounts payable and accrued expenses	1,432,549.	17	1,026,618.
	18	Grants payable		18	· ·
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
Ē		key employees, highest compensated employees, and disqualified persons		90	
Lia		Complete Part II of Schedule L		22 23	
	23	Unsecured notes and loans payable to unrelated third parties		24	
	24 25	Other liabilities (including federal income tax, payables to related third		24	
	25	parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	1,381,361.	25	1,284,959.
	26	Total liabilities, Add lines 17 through 25	2,813,910.	26	2,311,577.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ဟု		complete lines 27 through 29, and lines 33 and 34.			
ဥ	27	Unrestricted net assets	6,918,831.	27	5,969,353.
ajai	28	Temporarily restricted net assets	633,035.	28	1,617,500.
Ω P	29	Permanently restricted net assets	373,831.	29	373,831.
Ë		Organizations that do not follow SFAS 117 (ASC 958), check here			
P		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥Α	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	7,925,697.	33	7,960,684.
	34	Total liabilities and net assets/fund balances	10,739,607.	34	10,272,261.
			· — — — — — — — — — — — — — — — — — — —		Form 990 (2014)

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

Form **990** (2014)

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Act and OMB Circular A-133?

SCHEDULE A

(Form 990 or 990-EZ)

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.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

INTEREST

PUBLIC

Employer identification number 23-7122879

Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I

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). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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). X 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 11q 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 III, Type III

(iii) Type of organization

(described on lines 1-9

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)

(ii) EIN

ı ı	above or IRC section	governing	document?		
	(see instructions))	Yes	No	Instructions)	Instructions)
			ļ l		
				-	
				 	ļ <u> </u>
			ļ <u>.</u>		
Total					1

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

(i) Name of supported

organization

Schedule A (Form 990 or 990-EZ) 2014

(vi) Amount of

other support (see

(iv) is the organization

listed in your

(v) Amount of monetary

support (see

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						
	include any "unusual grants.")	17,218,832,	14.853\742.	18,260,326,	17,058,351,	15,692,039,	83,083,290,
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	17,218,832.	14,853,742.	18,260,326.	17,058,351,	15,692,039,	83 083 290.
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)						
	Public support. Subtract line 5 from line 4						83,083,290.
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	17,218,832,	14,853,742.	18,260,326.	17,058,351.	15,692,039,	83,083,290.
8	Gross income from interest,					İ	
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	486,895.	548,870.	544,756.	613,820.	651,848.	2,846,189,
9	Net income from unrelated business			,			
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain				į		
	or loss from the sale of capital						
	assets (Explain in Part VI)	186,761.	87,045.	553,140.	412,752.	513,401.	1 753 099.
	Total support. Add lines 7 through 10			77774			87,682,578.
	Gross receipts from related activities,					12	665,969.
13	First five years. If the Form 990 is for		first, second, thire	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
800	organization, check this box and stor	here	roomtogo.				
	ction C. Computation of Publ						
	Public support percentage for 2014 (I		•	olumn (f))		14	94.75 %
	Public support percentage from 2013	•	•		l	15	95.25 %
16a	33 1/3% support test - 2014. If the o				14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		•	•			_ ► X
D	33 1/3% support test - 2013. If the c				line 15 is 33 1/3%	or more, check th	is box
47-	and stop here. The organization qual	•			40 40 - 40 -		. •
1/a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					t vi now the organ	ization
L	meets the "facts-and-circumstances"	-			•	7	1007
D	10% -facts-and-circumstances tes						
	more, and if the organization meets the						⊾ —
10	organization meets the "facts-and-circ Private foundation. If the organization						
10	Filvate loundation. If the organization	ar allo not check a t	JOX OIT IIITE 13, 162	<u>a, 100, 17a, 0r 1/b</u>			
					Sche	dule A (Form 990	or 990-EZ) 2014

432022 09-17-14

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.)

iow, piease com	piete Part II)				
				1	
(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
				_	
				1	
					_
		l			
(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	1				
the organization'	s first, second, thii	d, fourth, or fifth to	ax year as a section	on 501(c)(3) organiz	ation,
s Support Pe	ercentage				
ne 8, column (f) d	livided by line 13,	column (f))		15	
Schedule A, Part	t III, line 15			16	
				17	
		.,,		18	
		on line 14, and line	e 15 is more than :	•	7 is not
-					▶□
•	•	• •			and
-					
		<u>-</u>		-	▶ □
	(a) 2010 (a) 2010 (b) 2010 (c) Support Pene 8, column (f) of Schedule A, Part the Incomused (line 10c, column (f) of Schedule A, organization did of stop here. The organization did ock this box and set the source of the set of the organization did ock this box and set of the set of the organization did ock this box and set of the set of the organization did ock this box and set of the set of the organization did ock this box and set of the set of the organization did ock this box and set of the set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock this box and set of the organization did ock the oc	the organization's first, second, this c Support Percentage ne 8, column (f) divided by line 13, oschedule A, Part III, line 15 tment Income Percentage (I) (line 10c, column (f) divided by line 13 schedule A, Part III, line 17 organization did not check the box of stop here. The organization qualorganization did not check a box or ck this box and stop here. The organization did not check a box or ck this box and stop here. The organization did not check a box or ck this box and stop here. The organization did not check a box or ck this box and stop here. The organization did not check a box or ck this box and stop here. The organization did not check a box or ck this box and stop here. The organization did not check a box or ck this box and stop here. The organization did not check a box or ck this box and stop here. The organization did not check a box or ck this box and stop here. The organization did not check a box or ck this box and stop here.	the organization's first, second, third, fourth, or fifth to c Support Percentage 18 8, column (f) divided by line 13, column (f)) Schedule A, Part III, line 15 Timent Inc. column (f) divided by line 13, column (f)) Old Schedule A, Part III, line 15 Torganization did not check the box on line 14, and line did stop here. The organization qualifies as a publicly organization did not check a box on line 14 or line 19 ock this box and stop here. The organization qualifies	(a) 2010 (b) 2011 (c) 2012 (d) 2013 (a) 2010 (b) 2011 (c) 2012 (d) 2013 (b) 2011 (c) 2012 (d) 2013 (c) 2010 (b) 2011 (c) 2012 (d) 2013 (d) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2010 (b) 2011 (c) 2012 (d) 2013 (f) 2010 (b) 2011 (c) 2012 (d) 2013 (g) 2010 (b) 2011 (c) 2012 (d) 2013 (g) 2010 (b) 2011 (c) 2012 (d) 2013 (g) 2010 (e) 2012 (d) 2013 (g) 2010 (e) 2012 (d) 2013 (g) 2013 (e) 2012 (d) 2013 (g) 2013 (e) 2012 (d) 2013 (g) 2013 (e) 2012 (d) 2013 (g) 2013 (e) 2012 (e) 2013 (g) 2013 (e) 2012 (e) 2013 (g) 2013 (e) 2012 (e) 2013 (g) 2013 (e) 2012 (e) 2013 (g) 2013 (e) 2012 (e) 2013 (g) 2013 (e) 2012 (e) 2013 (g) 2013 (e) 2012 (e) 2013 (g) 2013 (e) 2012 (e) 2013 (g) 2013 (e) 2013 (e) 2013 (g) 2014 (e) 2012 (e) 2013 (g) 2014 (e) 2012 (e) 2013 (g) 2015 (e) 2012 (e) 2013 (g) 2015 (e) 2012 (e) 2013 (g) 2015 (e) 2012 (e) 2013 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 (e) 2015 (e) 2015 (g) 2015 ((a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (c) 2014 (e) 2014 (f) 2015 (e) 2016 (f) 2016

Schedule A (Form 990 or 990-EZ) 2014 PUBLIC INTEREST

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)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)			
sec	tion 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.	3a		
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		
С	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.	_3c		
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		
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)			
	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		
С	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 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			
	ın 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			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	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		

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Pa	rt IV	Supporting Organizations (continued)				
	_	•		Y	es	No
11	Has t	he organization accepted a gift or contribution from any of the following persons?				
а	A`per	son who directly or indirectly controls, either alone or together with persons described in (b) and (c)			İ	
	below	v, the governing body of a supported organization?	11a			
b		nily member of a person described in (a) above?	11t	_		
С	A 359	6 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>: L</u>		
Sec	tion	B. Type I Supporting Organizations				
				<u> Y</u>	es	No
1	Did th	ne directors, trustees, or membership of one or more supported organizations have the power to		- [
	regula	arly appoint or elect at least a majority of the organization's directors or trustees at all times during the				
	-	ear? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	İ	-	-	
	contr	olled the organization's activities. If the organization had more than one supported organization,				
		abe how the powers to appoint and/or remove directors or trustees were allocated among the supported			l	
		nizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1			
2	-	ne organization operate for the benefit of any supported organization other than the supported				
_		nization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		i		
	-	// how providing such benefit carried out the purposes of the supported organization(s) that operated,				
		vised, or controlled the supporting organization.	2			
Sec		C. Type II Supporting Organizations				
				Y	es	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors				
•		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		1		
		anagement of the supporting organization was vested in the same persons that controlled or managed				
		upported organization(s).	1		İ	
Sec		D. Type III Supporting Organizations				
		5. Typo in outporting organizations		Ty	'es	No
1	Did t	ne organization provide to each of its supported organizations, by the last day of the fifth month of the		\top	-	
'		nization's tax year, (1) a written notice describing the type and amount of support provided during the prior ta	ax			
	-	(2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	-		ı	
		nization's governing documents in effect on the date of notification, to the extent not previously provided?	1			
_	-	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	<u> </u>	\top		
2		nization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	i			
	-	rganization maintained a close and continuous working relationship with the supported organization(s).	2			
_		rganization maintained a close and continuous working relationship with the supported organization(s).				
3						
		ficant voice in the organization's investment policies and in directing the use of the organization's		1	ļ	
		ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	з	ŀ		
500		orted organizations played in this regard. E. Type III Functionally-Integrated Supporting Organizations				
1	Chec	the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i n The organization satisfied the Activities Test Complete line 2 below.	suucuons).			
a	<u> </u>	The organization satisfied the Activities rest Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.				
b	<u> </u>		titu (coo inetriictii	nel		
C	L	The organization supported a governmental entity. Describe in Part VI how you supported a government en	ary (s ee mstructio	- 1	es	No
2		nties Test. Answer (a) and (b) below.		+	es	NO
а		substantially all of the organization's activities during the tax year directly further the exempt purposes of				
		supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		- 1	1	
		e supported organizations and explain how these activities directly furthered their exempt purposes,			ŀ	
		the organization was responsive to those supported organizations, and how the organization determined	_			
		these activities constituted substantially all of its activities	2a	-	-	
b		he activities described in (a) constitute activities that, but for the organization's involvement, one or more				
		e organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the				
		ons for the organization's position that its supported organization(s) would have engaged in these				
		ities but for the organization's involvement.	2b			
3		nt of Supported Organizations Answer (a) and (b) below.	į			1
а	Did t	he organization have the power to regularly appoint or elect a majority of the officers, directors, or	1			1
		ees of each of the supported organizations? Provide details in Part VI.	3a	\perp		
b	Did t	he organization exercise a substantial degree of direction over the policies, programs, and activities of each				1
	of its	supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b			

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Schedule A (Form 990 or 990-EZ) 2014

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Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on N	Nov 20, 1970. See instru	uctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete Sec	ctions A through E	
C4	ton A. Adivated Net Income		(A) Prior Year	(B) Current Year
Secu	ion A - Adjusted Net Income		(A) FIIOI Teal	(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	1		
	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		
Saat	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year
	On B - William Asset Amount		(A) FIIOI Teal	(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)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	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	1		
	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	Recovenes of pnor-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion 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		ļ
7	Check here if the current year is the organization's first as a non-functional	y-integrate	d Type III supporting org	anization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2014

	edule A (Form 990 or 990-EZ) 2014 PUBLIC INTERE			3-7122879 Page 7
Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exemple	pt purposes of supported		-
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	S	
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 t	he organization is responsive)	
	(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			
Sect	ion 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 required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
<u>a</u>			· · · · · · · · · · · · · · · · · · ·	
<u>b</u>	2.11//			
c		,		
<u>d</u>				
е	From 2013			`
<u>f</u>	Total of lines 3a through e			
	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2014 distributable amount			
<u>_i</u>	Carryover from 2009 not applied (see instructions)			
<u>_i</u>	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7 [·] \$			
<u>a</u>	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2014 distributable amount		<u></u>	
<u>c</u>	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			·	
b				
c				
d	Excess from 2013			

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 PUBLIC INTEREST	23-7122879 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, lin	ne 10, Part II, line 17a or 17b, and Part III, line 12.
Also complete this part for any additional information (See instructions).	
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SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Complete if the organization is described below. ► Attach to Form 990 or Form 990-E Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) organiza	ations: Complete Part III.			
		FOR SCIENCE IN T	HE	Emp	loyer identification number
	PUBLIC	INTEREST			23-7122879
Pa	rt I-A Complete if the or	ganization is exempt und	der section 501(c)	or is a section 527 of	rganization.
2	Provide a description of the organic Political expenditures Volunteer hours	ization's direct and indirect politi	cal campaign activities	_	
Pa	art I-B Complete if the or	ganization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax			. >\$;
	Enter the amount of any excise tax			5 ▶\$	3
	If the organization incurred a section			·	Yes No
48	Was a correction made?				Yes No
Ł	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the or	ganization is exempt und	der section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expende	ed by the filing organization for se	ection 527 exempt fund	ction activities	·
2	Enter the amount of the filing orga	nization's funds contributed to o	ther organizations for s	section 527	
	exempt function activities				<u> </u>
3	Total exempt function expenditure	es. Add lines 1 and 2 Enter here	and on Form 1120-POL	- ,	
	line 17b			▶\$	· ————————————————————————————————————
4	Did the filing organization file Forn				Yes No
5	Enter the names, addresses and e made payments. For each organiz contributions received that were p	ation listed, enter the amount pa	aid from the filing organ	ization's funds. Also enter t	ne amount of political
	political action committee (PAC). I				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2014

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Schedule C (Form 990 or 990-EZ) 2014 P	UBLIC INTE	REST	n 501(c)(3) and fil	23-7	122879 Page 2
section 501(h)).	inization is exci	inprantaci scotici		(0	icotion ander
	on belongs to an affil	ated group (and list in	Part IV each affiliated	group member's nam	e address FIN
	of excess lobbying	- · · ·	Training Court annual Court	group mombor o nam	o, addroos, Em,
	, ,	d "limited control" pro	visions apply		
Limits	on Lobbying Exper			(a) Filing organization's totals	(b) Affiliated group totals
4 - Total labbung avpanditures to influ	anno public opinion (c	arace roote lobbung)		8,136.	
 1a Total lobbying expenditures to influe b Total lobbying expenditures to influe 				69,883.	
	•	y (direct lobbying)		78,019.	
	•	15,099,435.			
 d Other exempt purpose expenditures e Total exempt purpose expenditures 		 \	•	15,177,454.	
f Lobbying nontaxable amount. Enter			 h columns	908,873.	
If the amount on line 1e, column (a) or		oying nontaxable ame		300,073.	
Not over \$500,000		the amount on line 1e	odik is.		
Over \$500,000 but not over \$1,000,		0 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,500		0 plus 10% of the exc			
Over \$1,500,000 but not over \$17,00		0 plus 5% of the exce			
Over \$17,000,000	\$1,000,0		33 373, 47,000,000		
στοι φ.τ.,οσο,οσο	4.,000,0				-
g Grassroots nontaxable amount (ent	er 25% of line 1f)			227,218.	
h Subtract line 1g from line 1a. If zero			•	0.	
i Subtract line 1f from line 1c. If zero		••		0.	· · · · · · · · · · · · · · · · · · ·
i If there is an amount other than zero	on either line 1h or l	ine 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this y					Yes No
(Some organizations the	at made a section 50	raging Period Under 01(h) election do not ate instructions for lir	have to complete all	of the five columns b	elow.
	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	899,837.	998,261.	1,000,000.	908,873.	3,806,971.
b Lobbying ceiling amount (150% of line 2a, column(e))	•				5,710,457.
c Total lobbying expenditures	48,250.	89,447.	78,631.	78,019.	294,347.
d Grassroots nontaxable amount	224,959.	249,565.	250,000.	227,218.	951,742.
e Grassroots ceiling amount		223,303.	255,000.	22/,210:	
(150% of line 2d, column (e))					1,427,613.
f Grassroots lobbying expenditures	13,983.	29,924.	23,894.	8,136.	75,937.

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 PUBLIC INTEREST

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

			(b)	
	Yes	No	Amo	unt
e filing organization attempt to influence foreign, national, state or				
ng any attempt to influence public opinion on a legislative matter				
the use of:				
ent (include compensation in expenses reported on lines 1c through 1i)?				
7				
egislators, or the public?				
ned or broadcast statements?				
, sommars, conventions, specialists, instance, or any similar means.				
•		- +		
-				
			_	
if the organization is exempt under section 501(c)(4), sec	tion 501(c)	(5) or sec	ction	
in the organization is exempt under section out(o)(4), sec		(5), 01 36		
			Yes	N
90% or more) dues received nondeductible by members?		1		
ake only in-house lobbying expenditures of \$2,000 or less?		2		
ree to carry over lobbying and political expenditures from the prior year?		3		
		1 1		
	litical			
ne section 527(f) tax was paid).				
to occurr our (i) tax true paraji		2a		
ìr				
ar		2b		
		2b 2c		
orted in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2b		
orted in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues d the amount on line 2c exceeds the amount on line 3, what portion of the		2b 2c		
orted in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues d the amount on line 2c exceeds the amount on line 3, what portion of the agree to carryover to the reasonable estimate of nondeductible lobbying an		2b 2c 3		
orted in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues d the amount on line 2c exceeds the amount on line 3, what portion of the		2b 2c		
o e o o n i i i i i i i i i i i i i i i i i	(90% or more) dues received nondeductible by members? nake only in-house lobbying expenditures of \$2,000 or less? gree to carry over lobbying and political expenditures from the pnor year? if the organization is exempt under section 501(c)(4), section if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." In dismilar amounts from members ductible lobbying and political expenditures (do not include amounts of political expenditures)	pislators, their staffs, government officials, or a legislative body? pis, seminars, conventions, speeches, lectures, or any similar means? ough 1i e 1 cause the organization to be not described in section 501(c)(3)? ount of any tax incurred under section 4912 ount of any tax incurred by organization managers under section 4912 n incurred a section 4912 tax, did it file Form 4720 for this year? if the organization is exempt under section 501(c)(4), section 501(c) (90% or more) dues received nondeductible by members? nake only in-house lobbying expenditures of \$2,000 or less? gree to carry over lobbying and political expenditures from the prior year? if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OI "Yes." In dismilar amounts from members ductible lobbying and political expenditures (do not include amounts of political	pislators, their staffs, government officials, or a legislative body? sis, seminars, conventions, speeches, lectures, or any similar means? ough 1i e 1 cause the organization to be not described in section 501(c)(3)? ount of any tax incurred under section 4912 ount of any tax incurred by organization managers under section 4912 n incurred a section 4912 tax, did it file Form 4720 for this year? if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 in the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 4912 if	gislators, their staffs, government officials, or a legislative body? is, seminars, conventions, speeches, lectures, or any similar means? ough 1i e 1 cause the organization to be not described in section 501(c)(3)? ount of any tax incurred under section 4912 in incurred a section 4912 tax, did it file Form 4720 for this year? if the organization is exempt under section 501(c)(4), section 501(c)(5), or section (90% or more) dues received nondeductible by members? inake only in-house lobbying expenditures of \$2,000 or less? gree to carry over lobbying and political expenditures from the pnor year? if the organization is exempt under section 501(c)(4), section 501(c)(5), or section and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, lines." Industrible lobbying and political expenditures (do not include amounts of political

SCHEDULE D

(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.irs.gov/form990.

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CENTER FOR SCIENCE IN THE

PUBLIC INTEREST

Employer identification number 23-7122879

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	= "	• • — • — •
Ū	for charitable purposes and not for the benefit of the donor of		-
	impermissible private benefit?		Yes No
Pai		ganization answered "Yes" to Form 990.	
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or e		torically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	• • •	2b
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	,,	" ·
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	——————————————————————————————————————
•	year >	3	
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements	- · · · · · · · · · · · · · · · · · · ·	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abor		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	on easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes	s the organization's accounting for
	conservation easements		
Pa	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or C	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 (AS	SC 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	nbes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pi	ublic service, provide the following amounts
	relating to these items	·	-
	(i) Revenue included in Form 990, Part VIII, line 1		. \$
	(ii) Assets included in Form 990, Part X		• \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	
	the following amounts required to be reported under SFAS 1	•	
а	Revenue included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

		<u>INTEREST</u>						Page 2
Par	t III Organizations Maintaining C	collections of A	rt, Historical Tr	easures, or Ot	her Simi	lar Asse	ts (contint	ued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are	a significant	use of its	collection	ıtems
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further t	he organization's e	xempt purp	ose in Par	t XIII	
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	isures, or other sim	ılar assets		_	
	to be sold to raise funds rather than to be ma						Yes	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Par		ete if the organization	on answered "Yes"	to Form 990), Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custod	an or other intermed	liary for contribution	ns or other assets r	not included			
	on Form 990, Part X?						Yes	X No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing 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 Fe	orm 990, Part X, line	21, for escrow or c	ustodial account lia	ability?		Yes	☐ No
_	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has beer	provided in Part X	111			
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes" to Fo	rm 990, Part IV, lin	e 10		1	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Four	years back_
1a	Beginning of year balance	373,831.	373,831,	372,831	<u> </u>	361,659 .		360,859 <u>.</u>
b	Contributions			1,000).	11,172.		800.
С	Net investment earnings, gains, and losses							
d	Grants or scholarships			<u> </u>				
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses			ļ	_		ļ <u>-</u>	
g	End of year balance	373,831.	373,831,	373,831	L.I	372,831.	l	361,659.
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1g, column (a)) held as:				
а	•		%					
	Permanent endowment ► 100.00	%						
С	Temporarily restricted endowment	%						
	The percentages in lines 2a, 2b, and 2c should							
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are held a	and administered fo	or the organ	zation	Г	
	by:							Yes No
	(i) unrelated organizations				•	•	3a(i)	X
	(ii) related organizations	- lossod oo	on Cale and Ja DO			•	3a(ii)	<u> </u>
	If "Yes" to 3a(ii), are the related organizations						3b	
Da.	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owment tunas.					
ı aı	Complete if the organization answere		Dort IV line 11a S	Con Form OOO Dort	V line 10			
	· · · · · · · · · · · · · · · · · · ·	(a) Cost or o					(-1) Daale	
	Description of property	basis (investr	\ \-'\) Accumulat depreciatior		(d) Book	value
	Land	24313 (11146311	Dasis	(53.101)	- Copi Colation	·		
	Land .							
	Buildings		1 22	23,706.	571,0	64	652	,642.
				55,327.	386,4			,917.
	Other		- 40	, , , , , , , , , , , , , , , , , , , ,	200,4			0.
	. Add lines 1a through 1e (Column (d) must e	egual Form 990 Part	X. column (R) line	10c)			731	,559.
- V (UI		are	,	/			<u> </u>	

Schedule D (Form 990) 2014

PUB	LIC	INTEREST

Part VII Investments - Other Securities.			20 / 2220 / 3 tage 0
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost of	r end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			· · · · · · · · · · · · · · · · · · ·
(3) Other			
(A)		_	
(B)			_
(C)			
(D)			
(E)			
(F)			
(G)			· · ·
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
	44 F 000 D+ N/ I	- 44 - O Faura 000 Bank V Iva 40	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Method of valuation Cost o	r end-of-vear market value
	(b) Book Value	(c) Method of Valuation Cost of	Cid of year market value
(3)		-	
(4)			
(5)			
(6)	,		
(7)			····· ·· · · · · · · · · · · · · · · ·
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			•
Complete if the organization answered "Yes"	to Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	. 		
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities.	e 15)		<u> </u>
Complete if the organization answered "Yes"	to Form 000 Part IV lin	a 11a or 11f San Form 000 Bort V In	o 05
(a) Description of liability	10 T 0/11/ 990, Falt 1V, IIII	(b) Book value	e 20.
1. (a) Description of liability (1) Federal income taxes		(b) Book Value	
(2) DEFERRED RENT		1,091,251.	
(3) CHARITABLE GIFT ANNUITY L	TARTI.TTV	193,708.	
(4)	TADILLI	193,700.	
(5)	_		
(6)			
(7)			
(8)			
(9)	-		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25)	1,284,959.	
2. Liability for uncertain tax positions in Part XIII, provide			ents that reports the

432053 10-01-14 Schedule D (Form 990) 2014

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII X

PUBLIC INTEREST

Par	t XI	Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per R	leturi	n.
		Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		,	
1	Totalı	evenue, gains, and other support per audited financial statements		1	17,140,580.
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net ur	nrealized gains (losses) on investments	2a -151,422.		
b	Donat	ed services and use of facilities	2b		
С	Recov	reries of prior year grants	2c		
d	Other	(Describe in Part XIII.)	2d		
е	Add la	nes 2a through 2d	•	2e	-151,422.
3	Subtra	act line 2e from line 1		3	17,292,002.
4	Amou	nts included on Form 990, Part VIII, line 12, but not on line 1.			·= - ·
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other	(Describe in Part XIII)	4b]	
С	Add In	nes 4a and 4b		4c	0.
5	Total	evenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	17,292,002.
Par	t XII	Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per	Retu	
		Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			
1	Total	expenses and losses per audited financial statements	_	1	17,109,059.
2	Amou	nts included on line 1 but not on Form 990, Part IX, line 25:	·		•
а		ed services and use of facilities	2a		
Ь	Pnor y	rear adjustments	2b	1	
c	Other	losses	2c	1	
d	Other	(Describe in Part XIII.)	2d	1	
e		nes 2a through 2d		2e	0.
3		act line 2e from line 1		3	17,109,059.
4	Amou	nts included on Form 990, Part IX, line 25, but not on line 1.	·		
а		ment expenses not included on Form 990, Part VIII, line 7b	4a		
b		(Describe in Part XIII.)	4b		
c		nes 4a and 4b		4c	0.
5	Total	expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u>.</u>	5	17,109,059.
Par		Supplemental Information.			
Provi	de the	descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part	IV, lines 1b and 2b; Part V, line	4; Part	X, line 2; Part XI,
ines	2d and	4b, and Part XII, lines 2d and 4b. Also complete this part to provide any add	fitional information		
PAF	X TS	, LINE 2:			
CSE	I H	<u>AS ANALYZED ITS TAX POSITIONS, AND HAS</u>	CONCLUDED THAT	NO	LIABILITY
SHC	ULD	BE RECORDED RELATED TO ANY UNCERTAIN	TAX POSITIONS.	CSP	I IS NOT
AWA	RE	OF ANY TAX POSITIONS WHICH IT BELIEVES	WILL CHANGE MAT	ERI	ALLY IN THE
NEX	T T	WELVE MONTHS. IF THIS POSITION CHANGE	S, CSPI WILL ASS	ESS	THE IMPACT
OF.	ANY	SUCH MATTERS ON ITS FINANCIAL POSITION	N AND RESULTS OF	OP	ERATIONS.
					· · · · · · · · · · · · · · · · · · ·
			······································	· · - · - · - · - · · - · · · · · · · ·	
				_	

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

PUBLIC INTEREST		ne.			23-71228	70
		ctivities Ou	tside the United States. Comple	ete if the organ		
Form 990, Part IV			torac and compact	no ii tilo organ	Lation anovoida	103 011
		maintain recor	ds to substantiate the amount of its gra	ants and other	assistance,	
the grantees' eligibility fo	or the grants or a	assistance, and	the selection criteria used to award the	grants or ass	stance?	Yes No
2 For grantmakers. Desc United States	ribe in Part V the	organization's	procedures for monitoring the use of its	s grants and o	ther assistance ou	tside the
			an be duplicated if additional space is r			1
(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)	is a prodescribe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
ORTH AMERICA						
CANADA)	1	4	NATIONAL LEGAL AFFAIRS			125,854.
ORTH AMERICA						
CANADA)	1	4	PUBLIC EDUCATION			133,020.
ORTH AMERICA			NUTRITION ACTION			-
CANADA)	1	4	HEALTHLETTER			511,697,
ORTH AMERICA		į				
(CANADA)	1	4	FUNDRAISING			66,799,
					•	
ORTH AMERICA						
CANADA)	1	4	GST/ HST TAXES			73,605.
				,		
						- -
						-
3 a Sub-total	5	20				910,975.
b Total from continuation						1
sheets to Part I	0	0				0.
c Totals (add lines 3a	_	20				
000.401		,	· ·			010 075

Schedule F (Form 990) 2014

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

23-7122879

Schedule F (Form 990) 2014

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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. Part II

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of non-cash assistance (g) Amount of non-cash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by of cash grant cash disbursement (f) Manner of (e) Amount the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (d) Purpose of grant (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization N

Schedule F (Form 990) 2014

33

Enter total number of other organizations or entities

က

CENTER FOR SCIENCE IN THE PUBLIC INTEREST

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2014

Page 3

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(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of non-cash assistance					
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

Schedule F (Form 990) 2014

<u>Schedu</u>	ile F (Form 990) 2014 PUBLIC INTEREST	<u> </u>	Page 4
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)	Yes	X 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)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X 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)	Yes	X No

Schedule F (Form 990) 2014

Schedule F	(Form 990) 2014 PUBLIC INTEREST	<u>23-7122879</u>	Page 5
Part V	Supplemental Information		<u> </u>
		at a continual of	
	Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (account		
	investments vs expenditures per region); Part II, line 1 (accounting method); Part III (accounting method)	thod), and Part III, column (c)	
•	(estimated number of recipients), as applicable. Also complete this part to provide any additional info	ormation.	
	Tools and the second se		
		·	
		· 	
		· - · · · · · · · · · · · · · · · · · ·	· · ·
		 	
		· · · · · · · · · · · · · · · · · · ·	
		·····	
			
	 		
			
			

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 Name of the organization

Information about Schedule J (Form 990) and its instructions is at www.lrs.gov/form990. CENTER FOR SCIENCE IN THE

PUBLIC INTEREST

Employer identification number 23-7122879

Pe	ILLI Questions negariting compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	. !		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use	. [
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	J	
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.	. [
	X Compensation committee Written employment contract	. [
	☐ Independent compensation consultant ☐ Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	Tolli ood of dated of garmentone			
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:	ł l		
2	Receive a severance payment or change-of-control payment?	4a		х
h	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		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			_ -
	The foot to daily of lines and persons and provide the approach amounter to coor normal art and			
	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	i		
а	The organization?	5a		х
h	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			
Ŭ	contingent on the net earnings of.			
2	The organization?	6a		х
b	Any related organization?	6b		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			^
0	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		х
0	, , , , , , , , , , , , , , , , , , , ,	-		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	9		1
	Regulations section 53 4958-6(c)?	. 9		L

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

Schedule J (Form 990) 2014

23-7122879

PUBLIC INTEREST

Schedule J (Form 990) 2014

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

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	able	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(G)·(i)(g)	in column (B) reported as deferred in prior Form 990
(1) MICHAEL JACOBSON	Ξ	253,191.	0	0	7,240.	6,671.	267,102.	0
CUTIVE DIRECTOR/SECR	≘	0	0	0	0		0	0
	ε	183,982.	0.	0.	4,911.	3,51	192,405.	0
TOR, HEALTHLETTER	€		0.	0.	0	0.		0
	ε	165,76	0	2,517.	5,123.	1,369.	174,778.	0
UTY DIRECTOR	(ii)		0	0	0	0.	0	0
MITH DEWAAL	Ξ	155,62	0	4,134.	4,90	823.	165,480.	0
	(E)	0	0.	0		0.	0	0
(5) BONNIE LIEBMAN	(!)	174,001.	0.	1,057.	2,62	2,095.	179,775.	0.
ECTOR OF NUTRITION	€	0.	0	0.	• 0	0.	0	0
	Ξ	160,594.	0.	0.	4,966.	10,262.	175,822.	0
DIRECTOR	€		0	0	0	0	0	0
(7) STEPHEN GARDNER	ε	202,931.	0	0.	5,089.	5,135.	213,155.	0
LITIGATION DIRECTOR	(ii)		0.	0.	0.	0	0	0
(8) GREGORY JAPPE	(i)	143,512.	0.	0.	4,543.	10,188.	158,243.	0
DIRECTOR OF BIOTECHNOLOGY	▣	0	0	0.	0.	0	0	0
	Ξ							
	≘							
	Ξ							
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	Ξ							
	<u>(ii)</u>							
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Schedule J (Form 990) 2014

CENTER FOR SCIENCE IN THE PUBLIC INTEREST Schedule J (Form 990) 2014

Part III Supplemental Information

Page 3

23-7122879

	dditional information
П	olete this part for any a
	l for Part II. Also com
	, 6a, 6b, 7, and 8, and for
	b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6l
	for Part I, lines 1a, 1b
	descriptions required f
ental miormation	le information, explanation, or d
raitili Suppleili	Provide the informa

				١						

Schedule J (Form 990) 2014

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. Open to Public

OMB No 1545-0047

Inspection

Name of the organization

CENTER FOR SCIENCE IN THE PUBLIC INTEREST

Employer identification number 23-7122879

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ENVIRONMENT, AND OTHER ISSUES; TO REPRESENT CITIZENS' INTERESTS BEFORE LEGISLATIVE, REGULATORY, AND JUDICIAL BODIES ON NUTRITION, FOOD SAFETY, ALCOHOL, HEALTH, THE ENVIRONMENT, AND OTHER ISSUES; AND TO ENSURE THAT ADVANCES IN SCIENCE ARE USED FOR THE PUBLIC'S GOOD AND TO ENCOURAGE SCIENTISTS TO ENGAGE IN PUBLIC INTEREST ACTIVITIES. CSPI BEGAN OPERATIONS IN CANADA DURING THE FISCAL YEAR ENDED JUNE 30, 1996. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: PRODUCE; PROMOTE INCREASED PROTECTION FROM "FOOD BIOTERRORISM" - THE INTENTIONAL CONTAMINATION OF THE U.S. AND CANADIAN FOOD SUPPLY BY TERRORISTS - AS WELL AS ORDINARY CONTAMINATION WITH MICROBES THROUGH INCREASED APPROPRIATIONS FOR INSPECTIONS OF IMPORTED AND DOMESTIC FOODS AND FOOD MANUFACTURING FACILITIES; IMPROVE THE DIET OF AMERICAN CHILDREN BY PROMOTING MORE NUTRITIOUS SCHOOL FOOD THROUGH PUBLICATIONS, SEMINARS, AND PUBLIC POLICY EFFORTS; ENCOURAGE FOOD PRODUCERS TO IMPROVE THE NUTRIENT CONTENT OF THE PRODUCTS SOLD IN SCHOOLS AND RESTAURANTS; AND DISCOURAGE THE ADVERTISING OF UNHEALTHY FOODS TO CHILDREN; - IDENTIFY AND PUBLICIZE LINKS BETWEEN INDUSTRY AND SCIENCE IN MATTERS RELATED TO HEALTH, FOOD, AND ENVIRONMENTAL RESEARCH; EXAMINE HOW THE DEMANDS OF INDUSTRY MAY UNDERMINE THE PUBLIC-INTEREST MISSION OF LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2014)

432211 08-27-14

AND AFFORDABLE FOOD THAT IS PRODUCED IN A SUSTAINABLE HUMANE WAY.

FORM 990, PART XII, LINE 2C

432212 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization CENTER FOR SCIENCE IN THE	Employer identification number
PUBLIC INTEREST	23-7122879
	-
THE ORGANIZATION HAS AN AUDIT/FINANCIAL COMMITTEE THAT AN	NUALLY REVIEWS
THE OROMATION IND IN TODAY TENEVOLUE CONTRACTOR	
AND APPROVES THE FINANCIAL STATEMENTS. THIS PROCESS HAS	NOT CHANGED
AND APPROVES THE FINANCIAL STATEMENTS. THIS PROCESS HAS	NOT CHANGED
FROM THE PRIOR YEAR.	
	
	
	<u></u>

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶Information about Schedule R (Form 990) and its instructions is at www.lrs.gov/form990. Related Organizations and Unrelated Partnerships ► Attach to Form 990. CENTER FOR SCIENCE IN THE PUBLIC INTEREST Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Part

2014

OMB No 1545-0047

Open to Public Inspection

Employer identification number 23-7122879

Direct controlling

entity

End-of-year assets **e** Total income Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

Part II

(g) Section 512(b)(13) controlled ŝ × entity? Yes Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Direct controlling entity status (if section Public charity 501(c)(3)) Exempt Code section YOOD SAFETY & FOOD POLICY DISTRICT OF COLUMBIA Legal domicile (state or foreign country) INTEREST IN NUTRITION, Primary activity REPRESENTS CONSUMER 9 ORGANIZATIONS, 1220 L STREET, NW, SUITE 300 INTERNATIONAL ASSOCIATION OF CONSUMER FOOD Name, address, and EIN of related organization WASHINGTON, DC 20005

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

Schedule R (Form 990) 2014

Schedule R (Form 990) 2014 PUBLIC INTEREST

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

Page 2

23-7122879

General or Percentage managing ownership 3 Yes 6 Code V-UBI camount in box no 20 of Schedule L Ξ Disproportionate Yes No allocations? Ξ Share of end-of-year assets <u>(6</u> Share of total income $\boldsymbol{\varepsilon}$ Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** Direct controlling entity ন্ত (c)
Legal
domicile
(state or
foreign Primary activity <u>e</u> Name, address, and EIN of related organization (a)

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 Part IV

on (13) 11ed 72	٥									
(i) Section 512(b)(13) controlled entity?	Yes No					_				
(h) Percentage ownership				•						
(g) Share of end-of-year	2000	!								
(f) Share of total income			_							
(e) Type of entity (C corp., S corp.,	o many									
(d) Direct controlling entity										
(C) Legal domicile (state or foreign	country)									
(b) Primary activity										
(a) Name, address, and EIN of related organization										

Schedule R (Form 990) 2014

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CENTER FOR SCIENCE IN THE PUBLIC INTEREST

Schedule R (Form 990) 2014 PUBLIC INTEREST

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	ž
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	lated organizations listed i	n Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>			1a		×
b Gift, grant, or capital contribution to related organization(s)				9		×
c Gift, grant, or capital contribution from related organization(s)	-			5		×
d Loans or loan guarantees to or for related organization(s)				19		×
				16		×
f Dividends from related organization(s)	٠			#		×
				19		×
				ŧ		×
n Purchase of assets from Peretor Organization(s)		:		ï		: >
i Exchange of assets with related organization(s)				=		4:
 j Lease of facilities, equipment, or other assets to related organization(s) 				-		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			13		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	lon(s)	•		£		×
				9		×
p Reimbursement paid to related organization(s) for expenses		:	-	₽	1	×
q Reimbursement paid by related organization(s) for expenses				4		×
				į		>
r Other transfer of cash or property to related organization(s) c Other transfer of cash or property from related organization(s)	:			- "		4
1	who must complete the	is line, including covered i	elationships and transaction thresholds.	!		
1		6				
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved		
(1)						
(2)						
(3)				•		
(4)						
(5)						
(9)						
100 00 to to	46		Schedule B (Form 990) 2014	D (Earm	000	140

23-7122879

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CENTER FOR SCIENCE IN THE

Schedule R (Form 990) 2014 PUBLIC INTEREST

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.

bisproportionate amount in box 20 managing autocations?

Ves No (Form 1065) Ves No end-of-year Share of assets **6** Share of total income Predominant income patiesse (related, unrelated, outs outs sections 512-514) (state or foreign country) Legal domicile છ Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2014