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DLN: 93493040016636

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2014

Open to Public Inspection

A F	or the	2014 cal	endar year, or tax year beg	inning 10-01-2014 , and ending 09-30-2	2015		_	
ВС	heck if a	applicable	C Name of organization The Ayn Rand Institute The Co	onter for		D Empl	oyer ide	ntification number
┌ A	ddress cl	hange	The Advancement of Objective			22-2	570926	5
Γ_N	ame cha	ange	Doing business as			_		
┌ Ir	ntial retu	ım						
F	ınal			ox if mail is not delivered to street address) Room	n/suite	E Teleph	none num	ber
☐ re	eturn/ter	rmınated	2121 Alton Parkway Suite 250			(949) 222-6	550
Га	mended	return	City or town, state or province Irvine, CA 92606	e, country, and ZIP or foreign postal code		6 6 70 00	vacaunta d	10.005.070
Га	pplicatio	n pending	IIVINE, CA 92000			G Gross	receipts	5 10,985,878
			F Name and address of	of principal officer	H(a) Is t	:hıs a grou	p return	for
			Yaron Brook 2121 Alton Parkway Sı	ute 250	sub	ordinates	7	┌ Yes 🗸 No
			Irvine,CA 92606		H(b) Are	all suborc	linates	┌ Yes 🗸 No
					ınc	luded?		
<u>I</u>	ax-exen	npt status	✓ 501(c)(3) 501(c) () ◀ (insert no)	If"	No," attac	h a lıst	(see instructions)
J V	Vebsit	e: 🕨 ww	w aynrand org		H(c) Gr	oup exemp	tion nur	mber ►
K Fo	rm of or	rganızatıon	Corporation Trust Ass	ociation Other ►	L Year of	formation 1	.984 M	State of legal domicile PA
	art I		mary					-
	1	Briefly d	escribe the organization's n	nission or most significant activities				
		To incre	ase readership and underst	anding of Ayn Rand's works and to find a	nd train the nev	v ıntellectı	uals to t	each her philosophy o
ė		<u>objectivi</u>	ism					
a Sie								
Ē								
Governance	2	Check th	nis box 🔭 if the organizati	on discontinued its operations or dispose	ed of more than	25% of it	s net as	sets
	3	Number	of voting members of the go	overning body (Part VI, line 1a)		_	з	9
<u> </u>	1			bers of the governing body (Part VI, line			4	8
Activities &				ed in calendar year 2014 (Part V, line 2a			5	64
य स	6	Total nu	mber of volunteers (estimat	te if necessary)			6	103
	7a	Total un	related business revenue fr	om Part VIII, column (C), line 12			7a	1,234
	ь	Net unre	lated business taxable inco	ome from Form 990-T, line 34			7b	
					Pr	ior Year		Current Year
а.	8			III, line 1 h)		9,965	,635	10,542,907
H	9			III, line 2g)			,111	317,435
Ravenue	10		·	olumn (A), lines 3, 4, and 7d)	·		,195	3
_	11		·	n (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		23	,052	35,048
	12		_	gh 11 (must equal Part VIII, column (A),	line	10,310	,603	10,895,393
	13			(Part IX, column (A), lines 1-3)		302	,398	214,564
	14	Benefi	ts paid to or for members (F	Part IX, column (A), line 4)				0
	15			ployee benefits (Part IX, column (A), line	es	5,757	,524	5,171,237
Expenses	16-	5-10)		et IV solumn (A) line 11a)				586
₹.	16a			rt IX, column (A), line 11e)	•			500
짚	Ь	Total fu	ındraısıng expenses (Part IX, colui	mn (D), line 25) 🕨 319,740	-			
	17			(A), lines 11a-11d, 11f-24e)		4,651		5,229,471
	18		·	' (must equal Part IX, column (A), line 25		10,711		10,615,858
	19	Reven	ue less expenses Subtract	line 18 from line 12		-400	_	279,535
8 9 9 10 10 10 10 10 10 10 10 10 10 10 10 10 1					Ведіппі	ng of Curro Year	ent	End of Year
Net Assets or Fund Balances	20	Total	assets (Part X, line 16) .			7,451	,781	6,847,753
A B	21	Total	liabilities (Part X, line 26)			5,564	,941	4,814,005
žZ	22	Netas	ssets or fund balances Sub	tract line 21 from line 20		1,886	,840	2,033,748
Pa	irt II	Sign	ature Block					
				e examined this return, including accom				
			belief, it is true, correct, and nowledge	d complete Declaration of preparer (othe	er than officer) i	s based or	n all info	rmation of which
		willy Ki						
		****				2016-02-09		
Sig		1.	ature of officer			Date		
Hei	re		n Brook President & Dir or print name and title					
			Print/Type preparer's name	Preparer's signature	Date C	heck I if	PTIN	
Pai	id	١	Michael R Ludin CPA	Michael R Ludin CPA	Se	elf-employed	1000044	.248
	epare		Firm's name 🕩 White Nelson Die	ehl Evans LLP	F	ırm's EIN 🟲		
	z μαι τ Δ Ωn		Firm's address ► 2875 Michelle Dri	ive Suite 300	P	hone no (71	4) 978-13	300

Irvine, CA 92606

May the IRS discuss this return with the preparer shown above? (see instructions) .

✓ Yes ☐ No

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	-110
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part 1</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			No
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		110
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\bullet}	9		Νo
LO	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	Yes	
l1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	103	No
L2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
L5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
L6	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	Yes	
L 7	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 (see instructions)	17		No
L8	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	Yes	
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \blacksquare	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
	·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 109			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c	Yes	
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		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
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?			N.o.
0-	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		No No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		No
10	Section 501(c)(7) organizations. Enter	90		110
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)............			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O	contains a resr	onse or note	to anv	/ line in this Part VI								_	.マ
Chick ii ochicadic o	contains a resp	onse or noce	,	, illic ill cilio i dic vi	•	 •	•	•		•	•	•	-,

Se	ction A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax	1a	9			
	year	1a		_		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	8			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus	iness	relationship with any			
	other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con			3		No
4	Did the organization make any significant changes to its governing documents since filed?		rior Form 990 was	4		Νo
5	Did the organization become aware during the year of a significant diversion of the or	ganıza	ation's assets? .	5		Νo
6	Did the organization have members or stockholders?			6		Νo
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?	l by) n	nembers, stockholders,	7b		Νo
8	Did the organization contemporaneously document the meetings held or written active year by the following					
2	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
_	Is there any officer, director, trustee, or key employee listed in Part VII, Section A,			\vdash	162	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule	<i>o</i> .		9		No
Se	ection B. Policies (This Section B requests information about policies not i	requi	rea by the Internal R	evenu		
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	ivities on's ex	of such chapters, kempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	s gove	erning body before filing	1 1		
b				11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	90		Yes	
12a	Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13 $$.				Yes	
		•		11a		
b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> . Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte • • the po	rests that could give	11a 12a	Yes	
b c	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte the po	rests that could give	11a 12a 12b	Yes	
b c 13	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte the po	rests that could give in the second give in	11a 12a 12b 12c 13	Yes Yes Yes	
b c 13 14	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte the po	rests that could give in the second give olicy? If "Yes," describe in the second give in the second gi	11a 12a 12b	Yes Yes Yes	
b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte the po ew and e delib	rests that could give	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte	rests that could give	11a 12a 12b 12c 13 14	Yes Yes Yes	
b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte	rests that could give	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte	rests that could give	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte	rests that could give	11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes	
b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	y inte the po ew an e delib	rests that could give	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte the po ew an e delib	rests that could give	11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes	
b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organical in the policy or procedure requ	y inte the po ew an e delib cr simi	rests that could give	11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes	

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶PA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website V 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 financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►Rachel Knapp

2121 Alton Parkway Suite 250

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ect	not box h an or/tr	checke Highest compensated	ess er e)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		х						0	0	0
Director (2) Carl Barney	0 00 2 00									
Director	0 00	Х						0	0	0
(3) Arturo Gamboa	2 00									
Director	0 00	Х						0	0	0
(4) Harry Binswanger	2 00									
Dırector	0 00	Х						0	0	0
(5) Peter Leport	2 00									
Director	0 00	Х						0	0	0
(6) Arline Mann	2 00	.,								
Director	0 00	Х						0	0	0
(7) Larry Salzman	2 00	v								
Director	0 00	Х						0	0	0
(8) Tara Smith	2 00							F F00	0	
Director	0 00	Х						5,500	0	0
(9) Yaron Brook	45 00	х		Х				415.010	0	26 700
President & Dir	5 00	^		^				415,018	U	26,700
(10) Mark Chapman	45 00			Х				306,130	0	21,665
VP Development	0 00			^				300,130	Ů	21,003
(11) Rachel Knapp	45 00			Х				83,326	0	11,079
Treasurer	0 00			^				03,320	Ü	11,079
(12) Julie Ferguson	45 00			Х				167,462	0	20,128
VP of Bus Oper	0 00			^`				107,402	Ŭ	20,120
(13) Onkar Ghate	45 00			Х				200,715	0	11,440
CCO	0 00							200,713	Ŭ	
(14) Jerelyn Eagan	45 00			х				330,000	0	0
C00/Secretary	0 00			.,				333,300		
										Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					ss er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(15) Duane Knight	45 00				х			170,186	0	14,185
Director of Development (16) Katherine Cross	0 00 45 00									
Gift Planning Mgr	0 00					х		128,559	0	22,323
(17) Elan Journo Policy Research Dr	45 00 0 00					х		114,728	0	12,488
(18) Steven Sımpson Dır Legal Studies	45 00 0 00					х		178,098	0	8,293
(19) Anu Seppala Dir of Outreach	45 00 0 00						х	140,634	0	14,234
(20) Linda Zinser Dir of Outreach	45 00						х	144,766	0	16,487

1b	Sub-Total	 -		
С	Total from continuation sheets to Part VII, Section A	•		
d	Total (add lines 1b and 1c)	•	2,385,122	179,022

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►14

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Specialized Marketing Services 3421 W Segerstrom Ave Santa Ana, CA 92704	Mailing and Database	249,278
Blitz Digital Studios LLC 1453 3rd Street Promenade Ste 420 Santa Monica, CA 90401	Design & Marketing	620,061
Silk Marketing Group 520 N Sierra Bonita Avenue Los Angeles, CA 90036	Project Management	131,290
Westamenca Graphics 19682 Descartes Foothill Ranch, CA 92610	Printing Services	135,815
2. Total number of independent contractors (including but not limited to t	hose listed above) who received more than	+

		Check if Schedule O contains a respon	ise of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इ. इ.	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership dues 1b					
S,E	С	Fundraising events 1c	526,865				
티 <u> </u>	d	Related organizations 1d					
<u> </u>	e	Government grants (contributions) 1e					
inor	f	All other contributions, gifts, grants, and similar amounts not included above	10,016,042	j			
<u> </u>	g	Noncash contributions included in lines	317,481	i			
ם פו	.	Total. Add lines 1a-1f		10,542,907			
ā C	h	Iotal. Add lines 1a-11	•	10,342,307			
e E	22	Book	Business Code	02.445	02.445		
wen	2a b	Book Conference	451211	82,415	82,415		
م ج	c	Professional Outreach	611710 611710	218,470 16,550	218,470 16,550		
r v c	d	Tiolessional outreach	611710	10,330	10,330		
<u> </u>	e		 				
Program Service Revenue	f	All other program service revenue					
<u>آ</u>	g	Total. Add lines 2a-2f		317,435			
	3	Investment income (including dividen		317,433			
		and other similar amounts)		3			,
	4	Income from investment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·	33,521	33,521		
	5	(i) Real	(II) Personal	33,321	33,321		
	6a	Gross rents	(ii) i cissiidi				
	b	Less rental expenses					
	c	Rental income					
	d	or (loss) Net rental income or (loss)		0			
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	C	Gain or (loss)		0			
ש	d 8a	Net gain or (loss)		0			
		\$526,865 of contributions reported on line 1c) See Part IV, line 18					
- u	_	a	90,485				
5		Less direct expenses b Net income or (loss) from fundraising	90,485	0			
		Gross income from gaming activities See Part IV, line 19	events p				
	ь	Less direct expenses b					
		Net income or (loss) from gaming acti	vities	o			
		Gross sales of inventory, less returns and allowances .	-				
	Ь	Less cost of goods sold b					
		Net income or (loss) from sales of invo	entory 🛌	o			
ŀ		Miscellaneous Revenue	Business Code				
Ī	11a	Miscellaneous	900099	1,527	293	1,234	
	b						
	c						
	d	All other revenue	L				
	е	Total. Add lines 11a-11d		1,527			
	12	Total revenue. See Instructions .	🖊	10,895,393	351,249	1,234	

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must come

Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns All	other organızatı	ons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX			<u></u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	15,000	15,000		
2	Grants and other assistance to domestic individuals See Part IV, line 22	108,805	108,805		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	90,759	90,759		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,358,808	1,003,596	193,176	162,036
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	388,687	385,774	2,913	
7	Other salaries and wages	2,737,346	2,351,463	101,874	284,009
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	52,196	46,246	192	5,758
9	Other employee benefits	306,234	263,627	11,389	31,218
10	Payroll taxes	327,966	274,055	20,635	33,276
11	Fees for services (non-employees)		,,		
а	Management	0			
b	Legal	36,302		31,195	5,107
c	Accounting	56,316		28,453	27,863
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	586			586
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	139,661	120,126		19,535
13	Office expenses	47,432	39,329	4,048	4,055
14	Information technology	0			
15	Royalties	17,626	17,626		
16	Occupancy	669,870	601,811	38,761	29,298
17	Travel	377,716	283,339	12,848	81,529
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	16,045	14,925	480	640
20	Interest	13,931	11,806	1,164	961
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	64,196	58,607	3,203	2,386
23	Insurance	19,171	2,122	17,049	
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)				
a	Outside Services	2,298,706	2,242,011	20,063	36,632
b	Books	393,830	374,802	3,236	15,792
c	Event Expense	259,156	186,295	6,940	65,921
d	Postage and Freight	212,753	188,480	2,735	21,538
e	All other expenses	606,760	442,870	72,282	91,608
25	Total functional expenses. Add lines 1 through 24e	10,615,858	9,123,474	572,636	919,748
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ✓ if following SOP 98-2 (ASC 958-720)	1,892	946		946

Part X Balance Sheet

Par	t 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	745,714	1	181,710
	2	Savings and temporary cash investments		2	0
	3	Pledges and grants receivable, net	1,555,399	3	1,875,711
	4	Accounts receivable, net		4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
s:	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	0
क्				6	0
Assets	7	Notes and loans receivable, net		7	0
	8	Inventories for sale or use	78,342	8	41,588
	9	Prepaid expenses and deferred charges	68,229	9	105,186
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 496,471			
	ь	Less accumulated depreciation 10b 393,392	134,081	10 c	103,079
	11	Investments—publicly traded securities	241,889	11	194,260
	12	Investments—other securities See Part IV, line 11		12	0
	13	Investments—program-related See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11	4,628,127	15	4,346,219
	16	Total assets. Add lines 1 through 15 (must equal line 34)	7,451,781	16	6,847,753
	17	Accounts payable and accrued expenses	1,697,894	17	1,158,076
	18	Grants payable		18	
	19	Deferred revenue	142,511	19	134,677
	20	Tax-exempt bond liabilities		20	
Ø	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
qе		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	_
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	3,724,536	25	3,521,252
	26	Total liabilities. Add lines 17 through 25	5,564,941	26	4,814,005
S) d)		Organizations that follow SFAS 117 (ASC 958), check here ► ▼ and complete			
ž	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	-737,787	27	-1,081,204
<u>ප</u>	28	Temporarily restricted net assets	2,624,627	28	3,114,952
<u>~</u>	29		2,024,021	29	3,114,332
Assets or Fund Balance	29	Permanently restricted net assets		23	
正		complete lines 30 through 34.			
0	30	Capital stock or trust principal, or current funds		30	
Ą	31	Paid-in or capital surplus, or land, building or equipment fund		31	
\$ S &	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	1,886,840	33	2,033,748
Z	34	Total liabilities and net assets/fund balances	7,451,781	34	6,847,753
	L .		1 .,,	<i>-</i>	

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI	•			୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1 10,895			895,393
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1				279,535
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
5	Net unrealized gains (losses) on investments	5 -132,627			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2,0	033,748
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	rate			
	▼ Separate basis				
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?				Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule ${\sf O}$	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2011

Open to Public Inspection

Name of the organization The Ayn Rand Institute The Center for						Employer identifica	ation number	
		ment of Objectivism					22-2570926	
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	tions must co	mplete this r		ons.
		zation is not a private fo						
1	\sqcap	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	b)(1)(A)(i).	
2	\sqcap	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)			
3	Γ	A hospital or a cooper	atıve hospıtal	service organization o	described in sec	tion 170(b)(1))(A)(iii).	
4	Γ	A medical research or hospital's name, city,		erated in conjunction v	vith a hospital d	lescribed in se	ction 170(b)(1)(A)(iii	i). Enter the
5	Γ	An organization opera		nefit of a college or uni	versity owned o	or operated by	a governmental unit d	escribed in
		section 170(b)(1)(A)((iv). (Complet	e Part II)				
6	\sqcap	A federal, state, or loc	al governmen	t or governmental unit	described in se	ection 170(b)(1	1)(A)(v).	
7	굣	An organization that n described in section 1	•	•		om a governme	ental unit or from the o	general public
8	Г	A community trust des		• •	•	tII)		
9	Ē	An organization that n					butions, membership	fees, and gross
	·	receipts from activitie						
		its support from gross						
		acquired by the organi				•	•	
10	Г	An organization organ						
11	Г	An organization organ	zed and opera	ated exclusively for the	e benefit of, to p	erform the fun	ctions of, or to carry o	out the purposes of
	•	one or more publicly s						
	_	the box in lines 11a th						
а	ı	Type I. A supporting o supported organization	-		•			
		organization You mus				ty of the direct	ors or crustees or the	supporting
b	Γ	Type II. A supporting	•			with its suppo	rted organization(s), l	by having control or
		management of the su			same persons t	hat control or r	manage the supported	organization(s) You
_	_	must complete Part I\	•					
С	ı	Type III functionally i supported organization	_		•			grated with, its
d	Г	Type III non-function						janization(s) that is
		not functionally integr					ement and an attentiv	eness requirement
	_	(see instructions) Yo	•	•	•		T I T II T	
е	ı	Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization						
f		Enter the number of supported organizations						
g		Provide the following i	nformation ab	out the supported orga	ınızatıon(s)			
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganization	(v) A mount of	(vi) A mount of
		organization	organization listed in your governing (described on lines document?			monetary support	other support (see	
					ent?	(see instructions)	ınstructions)	
			1- 9 above or IRC section (see					
				instructions))		Γ		
					Yes	No		
				i .		l	1	l

Schedule A (Form 990 or 990-EZ) 2014 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 8,518,372 8,067,843 10,030,251 9,965,636 10,542,907 47,125,009 include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 8,518,372 8,067,843 10,030,251 9,965,636 10,542,907 47,125,009 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 8,861,910 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 38,263,099 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2010 (d) 2013 **(b)** 2011 (c) 2012 (e) 2014 (f) Total beginning in) 🟲 8,067,843 8,518,372 10,030,251 10,542,907 Amounts from line 4 9,965,636 47,125,009 Gross income from interest, dividends, payments received on securities loans, rents, royalties 5 1,204 20,341 94 21,647 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 481 19,663 36,018 19,889 34,836 110,887 capital assets (Explain in Part VI) 11 Total support Add lines 7 47,257,543 through 10 12 Gross receipts from related activities, etc (see instructions) 1,059,493 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 80 970 % Public support percentage for 2013 Schedule A, Part II, line 14 15 66 170 % 16a 33 1/3% support test-2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┡┰ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

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

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

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

Section D. Computation of Investment Income Percentage

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

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

18

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

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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

11c

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

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

3b

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

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

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

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

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

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DLN: 93493040016636

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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.

Open to Public Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service **Employer identification number** Name of the organization The Avn Rand Institute The Center for The Advancement of Objectivism 22-2570926 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the tax year 🟲 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art,	, His	tori	cal Tr	easu	res, or O	ther	Similar Ass	ets (c	ontınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	eck	·		_		significant use o	of its	
а	Public exhibition		d	Γ	Loan	or exch	nange progr	ams			
b	Scholarly research		e	Γ	Other	=					
C	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and explai	n how	the	y furthe	r the o	rganızatıon	's exe	empt purpose in		
5	During the year, did the organization solicit										-
Day	assets to be sold to raise funds rather than t t IV								<u> </u>	Yes	l No
Pal	Part IV, line 9, or reported an an						i aliswelet	ו ופ	s to Follil 99	υ,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						r other ass	ets n		Yes	
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ng t	able		_				
							_		Amo	unt	
С.	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e f	Distributions during the year						-	1e			
f	Ending balance	000 5					L	1f		,	
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21,1	ores	scrow o	rcusto	dial accour	it liat	oility? J	Yes	□ No
ь	If "Yes," explain the arrangement in Part XII										<u> </u>
Pa	rt V Endowment Funds. Complete	f the organization (a)Current year		were						e) Four v	ears back
1a	Beginning of year balance	123,046	(1)		138,192	D (C)IV	145,404	(4)	125,267	C)i oui y	138,812
ь	Contributions										
c	Net investment earnings, gains, and losses	7.010			F 010		2 202		20.122		10.615
d	Grants or scholarships	-7,810			-5,810 6,871		3,302 7,566		30,132 7,284		-10,615
e	Other expenditures for facilities				-,		.,		.,		
_	and programs										
f	Administrative expenses	1,430			2,465		2,948		2,711		2,930
g	End of year balance	113,806			123,046		138,192		145,404		125,267
2	Provide the estimated percentage of the cur	·	e (line	e 1g	, colum	n (a)) h	eld as				
а	Board designated or quasi-endowment 🕨	100 000 %									
b	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
3a	Are there endowment funds not in the posses	ssion of the organiza	ition t	hata	are held	d and a	dmınıstered	fort	he		
	organization by (i) unrelated organizations								3a(i)	Yes	No No
	(ii) related organizations		• •						3a(ii)	_	No
ь	If "Yes" to 3a(II), are the related organization			chec	· · Iule R?	٠		٠. ٠	Зь	1	No
4	Describe in Part XIII the intended uses of the	ne organization's end	dowme	ent f	unds					•	
Par	t VI Land, Buildings, and Equipme		he or	gan	ıızatıor	n answ	ered 'Yes	to F	orm 990, Par	t IV, l	ne
	11a. See Form 990, Part X, line : Description of property	10.			a) Cost o sis (inves		(b)Cost or o		(c) Accumulated depreciation	(d) B	book value
1 2	Land			+			-	\dashv		1	
	Buildings		_					\dashv		1	
	Leasehold improvements						140	,849	99,084		41,765
	Equipment							,316	234,294	+	58,022
	Other							,306	60,014	+	3,292
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			mn (B), line	10(c).)	<u> </u>				103,079
									Schedule D (Form 9	990) 2014

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.	omplete if the organization	answered 'Yes' to Form 990,	Part IV, line 11b.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market v	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
		+	
-	<u>.</u>	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	Complete of the eventuation	a answared West to Form OO) Dowt IV line 11a
Part VIII Investments—Program Related. (See Form 990, Part X, line 13.	complete il the organization	n answered res to Form 990), Part IV, line IIC
(a) Description of investment	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market v	/alue
		+	
		<u> </u>	
		+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. Complete if the organizat			
(a) Desc	cription	(B)	Book value
(1) 457(b) Participant Interest in Accounts			757,018
(2) Beneficial Interest in Insurance Policy			544,614
(3) Beneficial Interest in Trusts			240,781
(4) Deposits and Other Assets			52,980
(5) Investments - Split-Interest Agreements			2,407,978
(6) Real Estate Investments for Sale			342,848
Total (Column (h) must squal form 000, Dest V and (D)	1E \		4 246 210
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the org			4,346,219
Form 990, Part X, line 25.	ganization answered 185 l	o roini 930, Fait IV, IIIIE 116	oi iii. See
1 (a) Description of liability	(b) Book value		
Federal income taxes			
457(b) Participant Interest	757,018		
BB&T Credit Line Payable	150,000		
Gift Annuity Obligation	2,405,234		
Loan Payable-Donor	4,500		
· · · · · · · · · · · · · · · · · · ·			
Notes Payable	204,500		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 3,521,252		

	(101111 330) 2014				raye -r
Part XI		evenue per Audited Financial Statements ered 'Yes' to Form 990, Part IV, line 12a.	With Revenue p	er R	eturn Complete if
1 Total		r support per audited financial statements		1	11,070,375
2 A m	ounts included on line 1 but	t not on Form 990, Part VIII, line 12			
a Net	unrealized gains (losses) c	on investments 2a	-7,720		
b Dor	nated services and use of fa	cilities	92,217		
c Rec	overies of prior year grants	2c	·		
	d lines 2a through 2d .			2e	84,497
3 Sub	otract line 2e from line 1 .			3	10,985,878
		D, Part VIII, line 12, but not on line 1			
		ided on Form 990, Part VIII, line 7b . 4a			
		4b	-90,485		
		<u> </u>		4c	-90,485
		4c. (This must equal Form 990, Part I, line 12)	I	5	10,895,393
		openses per Audited Financial Statement			
		swered 'Yes' to Form 990, Part IV, line 12a.		μ	
1 Tota	al expenses and losses per	audited financial statements		1	10,798,560
2 A mo	ounts included on line 1 but	not on Form 990, Part IX, line 25			
a Don	ated services and use of fa	cilities	92,217		
b Prio	ryear adjustments	2b			
c Oth	erlosses				
d Oth	er (Describe in Part XIII)		90,485		
e Add	l lines 2a through 2d			2e	182,702
3 Sub	tract line 2e from line 1 .			3	10,615,858
4 A mo	ounts included on Form 990), Part IX, line 25, but not on line 1:			· · ·
a Inve	estment expenses not inclu	ded on Form 990, Part VIII, line 7b 4a			
	•	4b			
				4c	
		d 4c. (This must equal Form 990, Part I, line 18).		5	10,615,858
	Supplemental Info				· · ·
	e 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa lines 2d and 4b, and Part XII, lines 2d and 4b Also			de any additional
F	Return Reference	Explanation			
elected und are, historic	cal treasures, o	The Institute has collections that are housed in the Ayn Rand Papers as well as other artifacts of histori with accounting principles generally accepted in the capitalized on the financial statements	ical significance and we United States of Am	vorks (erica,	of art In accordance these items are not
	ne 4 Description of o's collections and how it purpose	The Ayn Rand Archives procures, preserves, and prelated documents. It consists of more than 100 co Rand Papers. The Ayn Rand Papers comprises the pideath in 1982. This collection includes manuscripts correspondence, philosophic journals, research files address books, phonograph records, memorabilia, a included are microfilm and digital images of the Ayn papers are drafts, typescripts and galleys of her now Living, The Fountainhead, and Atlas Shrugged, plus collections cover Ayn Rand-related material acquire Rand's radio programs, lectures and interviews, oral documents, translations of her work, biographical ar and press mentions, screenplays, correspondence, Objectivist organizations	llections, with one priersonal papers and efficiency, notes and outlines, marginalia, clipping and recorded interview. Rand Papers at the Livella, Anthem, and heisome administrative ed since her death. The linstory interviews, Rand philosophical articles.	mary of fects I busing s, photos and ibrary three materies incursions and second secon	collection the Ayn eft by Ayn Rand at her ess and personal tographs, calendars, speeches Also of Congress These novels, We The lal The remaining lude recordings of Ayn academic and legal but Ayn Rand, reviews
Part V , Line endowment	4 Intended uses of the fund	The organization intends to use the endowment fund	ls for grants and scho	larship	os
	ne 2d Other expenses per audited F/S	Special Events Expenses \$90485			
		1			

Jenedale 2 (1 31111 33 3) 23 13		i age 💆
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE F

(Form 990)

As Filed Data -

DLN: 93493040016636

Stateme

Statement of Activities Outside the United States

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

► Attach to Form 990.

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization The Ayn Rand Institute The Center for				Employer iden	tification number			
The Advancement of O bjectivism				22-2570926				
Part I General Information "Yes" to Form 990, Par		s Outside th	ne United States. Co	emplete if the organiz	zation answered			
For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
2 For grantmakers. Describe in assistance outside the United	l States.	·		-	ts and other			
3 Activites per Region (The follow	ing Part I, line 3	table can be di	uplicated if additional spa	ce is needed)				
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a (f) Total expenditures for and investments in region			
(1) See Add'l Data		-						
(2)								
(3)								
(4)								
(5)								
3a Sub-total b Total from continuation sheets to Part I					227,000			
c Totals (add lines 3a and 3b)					227,000			

Pa				anizations or Entitions ceived more than \$5,0		•			" to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		Europe	Sponsorship	8,881	Wire Trans			
(2)		M East/N Africa	Outreach	74,443	Wire Trans	557	Books	Cost
(3)								
(4)								
2				isted above that are re ee or counsel has pro				as 	2
3	Enter total num	ber of other	organizations or e	ntities					

Schedule F (Form 990) 2014

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

Part III can be	duplicated if addition	nal space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Book grant	Europe	1	400	PayPal			
(2) Essay Contest Prizes	Europe	1	50	PayPal			
(3) Essay Contest Prizes	Middle East/N Africa	1	50	Check			
(4) Essay Contest Prizes	North America	16	2,050	Check			
(5) Essay Contest Prizes	South Asia	3	1,150	PayPal			
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1	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)	Γ	Yes	[~	Νo
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)	Г	Yes	▽	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)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	~	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)	Γ	Yes	V	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	্ন	Νo

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page 5

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US	Procedures vary depending on the type of grant Scholarship and essay contest prizes do no t require monitoring, as there are no ongoing conditions after the scholarship/prize is aw arded Grantee organizations will generally submit bimonthly reports on activities and pro gress

Additional Data

Software ID: 14000265

Software Version: 2014v6.0

EIN: 22-2570926

Name: The Ayn Rand Institute The Center for

The Advancement of Objectivism

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America	0	0	Grants		2,000
Europe	0	0	Program Service		116,000
Middle East/N Africa	0	0	Grants		75,000

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region			
North America	0	0	Fundraising		2,000			
Mıddle East/N Afrıca	0	0	Program Services	Seminars/Conferences	4,000			
South America	0	0	Program Services		7,000			

<u>Forn</u>	n 990 Schedule F I	<u> Part I - Activit</u>	<u>ties Outside T</u>	he United States			
(a) Region		(b) Number of offices in the region agents in region		(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region	
Europ	e	0	0	Fundraising		4,000	
Europ	e	0	0	Grants		13,000	
South	n Asia	0	0	Grants		1,000	

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
North America	0	0	Program Services	Providing agents for seminars	3,000			

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DLN: 93493040016636

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

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

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

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

Open to Public Inspection

ame of the organization	ntor for					Employer ider	itirication number
e Ayn Rand Institute The Center for e Advancement of Objectivism						22-2570926	
	ivities. Complete ured to complete the	_	janizatio	n answered "Yes" to	Form 9	90, Part IV,	line 17. Form 990-E
•	•	•	ny of the f	following activities Che	eck all tha	at apply	
Indicate whether the organization raised funds through any of the following activities Check Mail solicitations e Solicitation of non-get							
·	licitations		f	Solicitation of gov	_	_	
c Phone solicitations g Special fundraising events							
I ✓ In-person solicitation	ıs						
Did the organization have or key employees listed in							Γ _{Yes} Γ
If "Yes," list the ten higher to be compensated at leas			fundraisei	rs) pursuant to agreem	ents unde	er which the fu	ndraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Dıd fundraıser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
		Yes	No				
1							
2							
3							
1							
5							
5							
7							
3		+					
9							
0							
tal							
List all states in which the registration or licensing	organization is regis	tered or li	censed to	solicit contributions o	r has bee	n notified it is	exempt from
., AK, AZ, AR, CA, CO, CT, D I, TX, UT, VA, WA, WV, WI, W		, KS, KY, M	1E, MD, M	IA, MI, MN, MS, NH, N.	J, NM, NY	,NC,ND,OH	,OK,OR,PA,RI,SC,

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contributi	on answered "Yes" to ons and gross income	Form 990, Part IV, line on Form 990-EZ, line	e 18, or reported es 1 and 6b. List				
			(a) Event #1 NY Dinner (event type)	(b) Event #2 IL Dinner (event type)	(c) O ther events 1 (total number)	(d) Total events (add col (a) through col (c))				
E E	1	Gross receipts	354,700	254,150	8,500	617,350				
Revenue	2	Less Contributions	301,728	218,806	6,331	526,865				
<u>~</u>	3	Gross income (line 1 minus line 2)	52,972	2 35,344	2,169	90,485				
	4	Cash prizes								
မှာ	5	Noncash prizes	4,000	21,300)	25,300				
Expenses	6	Rent/facility costs								
ă	7	Food and beverages .	48,972	14,044	2,169	65,185				
Direct	8	Entertainment								
ā	9	Other direct expenses .								
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(90,485)				
	11	Net income summary Subtract III	ne 10 from line 3, column	(d)						
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than				
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
		Cash prizes								
Expenses		Non-cash prizes								
	4	Rent/facility costs								
Direct	5	Other direct expenses								
	6	Volunteer labor	✓ Yes %✓ No	✓ Yes						
	7	Direct expense summary Add line	s 2 through 5 ın column (d)						
	8	Net gaming income summary Subt	ract line 7 from line 1, co	lumn (d)	<u> ▶</u>					
9 a b	a Is the organization licensed to conduct gaming activities in each of these states?									
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspen	ded or terminated during	the tax year?					

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3						
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity								
	formed to administer charitable gaming	J ²		Г _{Yes} Г	— No						
13	Indicate the percentage of gaming acti		1 1	,							
а	The organization's facility		13a		%						
b	An outside facility				%						
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records								
	Name ▶										
	Address ►										
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming								
154				┌ Yes 「	– _{No}						
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization > \$ and the								
c	If "Yes," enter name and address of the	e third party									
	Name ►										
	Address 🏲										
16	Gaming manager information										
	Name 🟲										
	Gaming manager compensation 🕨 \$		······								
	Description of services provided										
	Director/officer	_ Employee	☐ Independent contractor								
17	Mandatory distributions										
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to										
	retain the state gaming license?										
b	Enter the amount of distributions requi	red under state law	distributed to other exempt organizations or spent								
	ın the organization's own exempt activi		·								
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr								
	Return Reference		Explanation								

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DLN: 93493040016636

OMB No 1545-0047

Name of the organization

Schedule I

(Form 990)

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

> Open to Public **Inspection**

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Department of the Treasury Internal Revenue Service ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

The Ayn Rand Institute The Center for The Advancement of Objectivism

Employer identification number

22-2570926

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Part II Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) University of Maryland Founda 4603 Calvert Road College Park, MD 20740	52-2197313	501(c)(3)	15,000	0			Produce teacher seminar

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table		1
3	Enter total number of other organizations listed in the line 1 table	(0

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Reading Group	1	125			
(2) Conference scholarships	33	30,374			
(3) Essay Contest Prizes	84	32,030			
(4) Intern Grant	19	22,200			
(5) Scholarship	5	12,216			
(6) Travel Grant	21	10,745	1,115	COST	Travel & Registration for Conf

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.						
Return Reference	Explanation					
Grants are Used	Procedures vary depending on the type of grant Scholarships and essay contest prizes do not require monitoring, as there are no ongoing conditions after the scholarship/prize is awarded Long-term grants such as book grants are reviewed at least annually, depending on the grant terms Such grantees are generally required to submit regular progress reports, typically on a quarterly basis					

Schedule I (Form 990) 2014

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DLN: 93493040016636

OMB No 1545-0047

Compensation Information

(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

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

Open to Public Inspection

Internal Revenue Service Name of the organization The Ayn Rand Institute The Center for

The Advancement of Objectivism

Schedule J

Department of the Treasury

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

Employer identification number

22-2570926

Pa	rt I Questions Regarding Compensation	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III First-class or charter travel		,			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	J	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de			1b	Yes	
2	Did the organization require substantiation prior to indirectors, trustees, officers, including the CEO/Exec			2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all th used by a related organization to establish compens	hat apply				
	∇ Compensation committee	Γ	Written employment contract			
	Independent compensation consultant	<u> - </u>	Compensation survey or study			
	Form 990 of other organizations	⋝	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	c Participate in, or receive payment from, an equity-based compensation arrangement?					
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	tions mu	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7	Yes	
8	Were any amounts reported in Form 990, Part VII, psubject to the initial contract exception described in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section $53\ 4958-6(c)$?	e rebutta	able presumption procedure described in Regulations	9		No

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

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

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

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

Schedule J (Form 990) 2014

Part IIII Supplemental Information

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

Also complete this part for any additional information

Return Reference	Explanation
Part I, Line 1a Relevant information in regards to selections on 1a	Travel for family members of listed persons is paid or reimbursed only if the family member's travel is for bona fide business purposes
Part I, Line 7 Non-Fixed payments not listed above	The officers, key employee, and HCE listed received a discretionary bonus based on performance and other factors

Schedule J (Form 990) 2014

Additional Data

Software ID: 14000265

Software Version: 2014v6.0

EIN: 22-2570926

Name: The Ayn Rand Institute The Center for

The Advancement of Objectivism

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

(A) Name and Title		(B) Breakdown of (i) Base Compensation	of W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
Anu Seppala, Dir of Outreach	(I) (II)	120,287	18,540	1,807	3,000	11,234	154,868	
Duane Knight, Director of Development	(I) (II)	124,892	45,294		3,000	11,185	184,371	
Jerelyn Eagan, COO/Secretary	(I) (II)	260,000	70,000				330,000	
Julie Ferguson, VP of Bus Oper	(I) (II)	137,462	30,000		3,000	17,128	187,590	
Katherine Cross, Gift Planning Mgr	(I) (II)	96,018	32,541		3,000	19,323	150,882	
Linda Zinser, Dir of Outreach	(I) (II)	128,044	16,722		3,000	13,487	161,253	
Mark Chapman, VP Development	(I) (II)	221,130	85,000		3,000	18,665	327,795	
Onkar Ghate, CCO	(I) (II)	155,715	45,000		3,000	8,440	212,155	
Steven Simpson, Dir Legal Studies	(I) (II)	159,996	18,087	15		8,293	186,391	
Yaron Brook, President & Dir	(I) (II)	285,018	130,000		3,000	23,700	441,718	

DLN: 93493040016636

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Transactions with Interested Persons

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

The Ayn Rand Institute The Center for The Advancement of Objectivism 22-2570926 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of (b) Relationship (d) Loan to (e)Original (f)Balance (i)Written **(g)** In (h) (c) Purpose of or from the Approved agreement? interested with organization principal due default? organization? by board or person loan amount committee? Yes Yes Τо From No Yes No

lotai	F \$								
Part IIII Grants or As	Grants or Assistance Benefiting Interested Persons.								
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.									
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of assistance	(d) Type o	of assistance	e (e) Purpos	e of assistance			

Dusiness Hallsactions II	INDIALIS THEFESTER	i Fersons.									
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.											
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction		(e) Sharing of organization revenues?							
				Yes	No						
(1) Nıv Brook	Child of Ofc	21,415	Employee		No						

Part V Supplemental Information

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

Return Reference	Explanation
Schedule L, Part V Supplemental	Part IV (1) Nıv Brook ıs a Child of the Officer, Yaron Brook
Information	

Schedule L (Form 990 or 990-EZ) 2014

DLN: 93493040016636

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE M (Form 990)

Department of the Treasury

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

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

Internal Revenue Service Name of the organization The Ayn Rand Institute The Center for The Advancement of Objectivism

Employer identification number

22-2570926

Pa	rt I	Types of Property						
			(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of deterr noncash contribution		nts
1	Art-V	Vorks of art						
2	Art—H	listorical treasures .	Х	1	3,250	Auction Price		
3	Art—F	ractional interests						
4	Books	and publications						
5	Clothi goods	ng and household	Х		50	Donor Declared		
6	Carsa	and other vehicles						
7	Boats	and planes						
8	Intelle	ectual property	Х	3	16,787	Donor Declared		
9	Secur	ities—Publicly traded .	Х	13	95,670	FMV		
10	Secur	ities—Closely held stock .						
	or trus	ities—Partnership, LLC, st interests						
		ities—Miscellaneous						
13	contri	ied conservation bution—Historic ures						
14	-	ied conservation bution—O ther						
15	Reale	state—Residential .	Х	1	200,923	FMV		
16	Real e	state—Commercial						
		state—Other						
18	Collec	tibles						
		nventory						
		and medical supplies .						
		ermy						
		ical artifacts						
		rific specimens						
		ological artifacts						
	Other tion Ite	•	X	1	800	Donor Declared		
		►()						
		►() ►()						
	Other	` '						
		er of Forms 8283 received by the	L organizat	ion during the tay year for	contributions			
		ich the organization completed F				9	l vaa l	2
30>	Durin	g the year, did the organization r	eceive hv	contribution any property r	reported in Part I lines 1	through 28 that	Yes	No
J 0u		st hold for at least three years fr						
		empt purposes for the entire hol			, and winch is not required			
						· · · · 30a		No_
31		es," describe the arrangement in the organization have a gift acc		licy that requires the revie	w of any non-standard co	ntributions? 31	Yes	
32-		the organization hire or use thire						
JZa		ibutions?		· · · · · · · ·		<u>32a</u>		No
33	Ifthe	es," describe in Part II organization did not report an ai Tibe in Part II	mount in co	lumn (c) for a type of prop	erty for which column (a)	ıs checked,		

Page 2

Schedule M (Form 990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493040016636

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization	Employer identification number
The Ayn Rand Institute The Center for	
The Advancement of Objectivism	22-2570926

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Form 990 Review Process	An electronic copy of the 990 is provided to each member of the board before it is filed with the Internal Revenue Service
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Each officer & director annually signs an acknowledgment stating that they have read, unde rstand, and agree to comply with the conflict of interest policy. Governance committee has a review procedure for business dealings among board members and officers.
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	For the executive director, the board determines the salary, considering factors such as salary surveys and comparable organizations
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Form 990, governing documents, policies and financial statements are provided upon request
PART VII COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES, etc	The compensation paid to board member Tara Smith was in exchange for professional services she provided to the Institute, and was unrelated to her service on the board. The governa nce committee of the board reviewed and approved the compensation arrangement. No board member is compensated for his or her service on the board.

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DLN: 93493040016636

2014

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Name of the organization The Ayn Rand Institute The Center for The Advancement of Objectivism

Employer identification number 22-2570926

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.											
(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity						

Part II 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		Section (13) col enti	512(b) ntrolled
						Yes	No
(1) Anthem Foundation for Objectivist Schola 2121 Alton Pkwy Ste 225 Irvine, CA 92606 91-2145352	Education Grants	CA	501(C)(3)	Line 11A, I	N/A	Yes	

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	atıon ansv	ered "Ye	s" on Form	990, Part 1	[V, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.						
											$^{-}$

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

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

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule 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? A Receipt of (i) interest, (ii) annuities, (iii) royalities, or (iv) rent from a controlled entity b (ift, grant, or capital contribution to related organization(s) c (ift, grant, or capital contribution from related organization(s) d (Loans or loan guarantees to or for related organization(s) d (Loans or loan guarantees by related organization(s) f (Dividends from related organization(s) s Sale of assets to related organization(s) f (Loans or loan guarantees by related organization(s) s Exchange of assets with related organization(s) t (Loans or loan guarantees by related organization(s) t (Loans or loan guarantee			
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Loans or loan guarantees by related organization(s) Sale of assets to related organization(s) Rurchase of assets threlated organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Reformance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Rembursement paid to related organization(s) for expenses Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s)		Yes	No
b Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s) Sale of assets to related organization(s) Sale of assets to related organization(s) Lease of assets from related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Other transfer of cash or property to related organization(s) Other transfer of cash or property to related organization(s)			
c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) 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) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) s Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)	1a	Yes	
d Loans or loan guarantees to or for related organization(s) E Loans or loan guarantees by related organization(s) Juvidends from related organization(s) Sale of assets to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Other transfer of cash or property to related organization(s) Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)	1b		No
E Loans or loan guarantees by related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) s Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) R Reimbursement paid to related organization(s) for expenses R Reimbursement paid by related organization(s) for expenses O Other transfer of cash or property to related organization(s) O Therefore the property from related organization(s)	1 c		No
f Dividends from related organization(s) g Sale of assets to related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) o Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) President of the facilities	1d		No
g Sale of assets to related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) 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) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)	1e	Yes	
h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s)	1f		No
 i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s) 	1g		No
j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s)	1h		No
 k Lease of facilities, equipment, or other assets from related organization(s) I Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s) 	1i		No
I Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s)	1j		No
I Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s)			
m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) o Other transfer of cash or property from related organization(s)	1k		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s)	11	Yes	
 Sharing of paid employees with related organization(s) Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) 	1m		No
 Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) 	1n	Yes	
 Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) 	10	Yes	
 Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) 	1p	Yes	
r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s)	1q	Yes	
s Other transfer of cash or property from related organization(s)			
	1r	Yes	
	1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
(a) (b) (c) (d) Name of related organization Transaction type (a-s) (b) (c) (d) Amount involved Method of determining an	ount II	nvolved	i

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Anthem Foundation for Objectivist Schola	а	2,200	
(2) Anthem Foundation for Objectivist Schola	е	204,500	
(3) Anthem Foundation for Objectivist Schola	р	4,413	
(4) Anthem Foundation for Objectivist Schola	q	2,286	
(5) Anthem Foundation for Objectivist Schola	r	32,691	

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

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

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

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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