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DLN: 93493222011246

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

Open to Public Inspection

A F	or the	2014 ca	ılendar year, or tax year begin	ning 10-01-2014 , and ending 09-30-	2015			
B C	heck ıf a	pplicable	C Name of organization NATIONAL COUNCIL OF LA RAZA	A INC		D Empl	oyer ide	ntification number
☐ A	ddress ch	nange	% HOLLY BLANCHARD			86-0	21287	3
ΓN	ame cha	nge	Doing business as					
┌ Ir	ııtıal retu	rn				E Teleph	none num	ber
re	nal :turn/terr		Number and street (or P O box 1126 16TH STREET NW	: if mail is not delivered to street address) Rooi	n/suite		785-1	
_	mended oplication	return n pending	WASHINGTON, DC 200364845	country, and ZIP or foreign postal code		G Gross	receipts	\$ 45,653,692
			F Name and address of JANET MURGUIA			subordinates?		for
			1126 16TH STREET NW Washington, DC 200364			Are all subord ncluded?	lınates	┌ Yes ┌ No
IT	ax-exem	npt statu:	s 🔽 501(c)(3) 🗆 501(c)()	◀ (insert no)			h a lıst	(see instructions)
JV	Vebsite	e: > W	WW NCLR ORG		H(c)	Group exemp	tion nur	mber ►
K Fo	rm of or	ganızatıo	n 🔽 Corporation 🗌 Trust 🦳 Assoc	ciation Other 🕨	L Year	of formation 1	968 M	State of legal domicile AZ
P	art I	Sur	nmary					
Governance		NCLR-t Hispan	the largest national Hispanic o ic Americans	ssion or most significant activities civil rights and advocacy organization i				
ŝ		CHECK	tills box Fig. II tile organization	n discontinued its operations of dispos	ed of more ti	1411 25 70 01 16		
Activities &	3	Numbe	r of voting members of the gov	verning body (Part VI, line 1a)			3	23
≣	1			ers of the governing body (Part VI, line			4	22
c <u>t</u>	1			l ın calendar year 2014 (Part V, line 2a			5	138
∢	1		·	ıf necessary)			6	50
				m Part VIII, column (C), line 12 ne from Form 990-T, line 34			7a 7b	0
_	+ -	ivec um	erated business taxable incom	me nomi romi 990-1, ime 34		Prior Year	 /b	Current Year
	8	Cont	ributions and grants (Part VII	I, line 1 h)	_	27,331	.952	29,794,393
ĕ	9			I, line 2g)		5,856		8,253,808
Revenue	10			umn (A), lines 3, 4, and 7d)		285	,128	329,080
æ	11	Othe	r revenue (Part VIII, column ((A), lines 5, 6d, 8c, 9c, 10c, and 11e)		320	,503	164,844
	12			11 (must equal Part VIII, column (A)	, line	33,794	161	38,542,125
	13			Part IX, column (A), lines 1–3)		8,159		7,804,040
	14			art IX, column (A), line 4)		0,139	0	7,004,040
	15			loyee benefits (Part IX, column (A), lin		11.107	-	
8		5-10	0)			11,407		11,727,572
Expenses	16a			IX, column (A), line 11e)	· ·		0	0
五	Ь		fundraising expenses (Part IX, colum		-			
	17			A), lines 11a-11d, 11f-24e)		12,370		16,250,837
	18 19		·	(must equal Part IX, column (A), line 2 ine 18 from line 12		31,937 1,857		35,782,449
Net Assets or Fund Balances		Reve	nue less expenses Subtracti	me 10 nom me 12		nning of Curre		2,759,676 End of Year
See.	20	Total	l assets (Part X, line 16) .			60,854	,444	62,087,640
Age	21					5,744	,457	4,781,937
žΞ	22	Neta	assets or fund balances Subtr	act line 21 from line 20		55,109	,987	57,305,703
Pa	rt II	Sig	nature Block					
my l	cnowled parer ha	as any l	d belief, it is true, correct, and knowledge **** nature of officer LLY BLANCHARD CFO	examined this return, including accomposition of preparer (oth				
		Тур	pe or print name and title					
_			Print/Type preparer's name Joyce Underwood	Preparer's signature Joyce Underwood	Date	Check if self-employed	PTIN P00022	2361
Pai			Firm's name	•	1	Firm's EIN	1	
	epare e On		Firm's address ► 8401 GREENSBORG	D DRIVE SUITE 800		Phone no (70	3) 893-0	500

MCLEAN, VA 22102

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

✓ Yes ☐ No

orm	m 990 (2014)	Page
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	স
ORG NETY YEAI RESE ASSI HEA LOC.	Briefly describe the organization's mission E NATIONAL COUNCIL OF LA RAZA (NCLR)-THE LARGEST NATIONAL HISPANIC CIVIL RIGHT GANIZATION IN THE UNITED STATES - WORKS TO IMPROVE OPPORTUNITIES FOR HISPANIC TWORK OF NEARLY 300 AFFILIATED COMMUNITY-BASED ORGANIZATIONS, NCLR REACHES NAR IN 41 STATES, PUERTO RICO, AND THE DISTRICT OF COLUMBIA TO ACHIEVE ITS MISSIC SEARCH, POLICY ANALYSIS, AND ADVOCACY, PROVIDING A LATINO PERSPECTIVE IN FIVE POSTERS (INVESTMENTS, (2) CIVIL RIGHTS /IMMIGRATION, (3) EDUCATION, (4) EMPLOYMENT ANALTH IN ADDITION, IT PROVIDES CAPACITY-BUILDING ASSISTANCE TO ITS AFFILIATES WITH COLUMN ADVANCE OPPORTUNITIES FOR INDIVIDUALS AND FAMILIES FOUNDED IN 19 NOROFIT, NONPARTISAN, TAX-EXEMPT ORGANIZATION HEADQUARTERED IN WASHINGTON BEROUPS IN ALL REGIONS OF THE COUNTRY IT HAS REGIONAL OFFICES IN CHICA	C AMERICANS THROUGH ITS MILLIONS OF HISPANICS EACH DN, NCLR CONDUCTS APPLIED KEY AREAS - (1) ND ECONOMIC STATUS, AND (5) HO WORK AT THE STATE AND 968, NCLR IS A PRIVATE,
2	Did the organization undertake any significant program services during the year which were not list the prior Form 990 or 990-EZ?	red on Tyes V No
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?	m ┌ Yes
4	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grar the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 7,532,171 including grants of \$ 3,709,959) (Recommunity Development and Fellowship Program - The mission of the National Council of La Raza Community Development End to the Communities through the creation of social, political, and economic wealth NCLR seeks to measurably increase the level held by the Hispanic community. This will be measured both by the wealth of individual families and the amount of cap The Hispanic Community Development Finance Institution (CDFI) is the largest provider OF low cost capital to community.	pment Program is to build healthy el of liquid, non-liquid and institutional asset vital assets controlled by Latino institutions
4b	(Code) (Expenses \$ 7,036,763 including grants of \$ 0) (Reference of the Component seeks to enhance the visibility of the Component seeks to enhance the visibility of the Normal States of the Norma	es the NCLR Annual Conference, the Nationa other events With the help of key partners
4 c	(Code) (Expenses \$ 5,565,426 including grants of \$ 70,275) (Recovered Core & ORAL-The Office of Research, Advocacy, and Legislation (ORAL) is one of the most influential, visible, and leading public policy on behalf of Latinos ORAL is composed of the Policy Analysis Center, the Research Department, the Legisla community-and field-focused departments. National Campaigns and Capacity-Building. To provide decision-makers with authentic Hispanic perspective, ORAL has eight issue-based policy projects in the following areas: (1) civic engagement education and children, (4) health, (5)economic security and employment, (6) immigration, (7) state and local advocace.	ng national advocacy voices championing ative Affairs Department, and two h deep, substantive information about the , (2) civil rights and criminal justice, (3)
	See Additional Data	
4d	Other program services (Describe in Schedule O) (Expenses \$ 13,009,381 including grants of \$ 4,023,806) (Revenue \$	266,129)

33,143,741

Total program service expenses ▶

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

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule $A^{\bullet \bullet}$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
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? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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	
е	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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{7}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
	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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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		No
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	Yes	
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		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		<u> </u>	厂_
4 -	Estantla number respected in Day 2 of Farms 1000 Faton 0 of materialists.		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 120 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
٠	gaming (gambling) winnings to prize winners?	1c	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	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		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)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	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
D	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		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	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			
Ī	contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
D	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O			
D	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			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Section A. Governing Body and Management

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

	, ,			,	,	,		_			
See instructions.											
Check if Schedule O c	ontains a response	or note to any line in	this Part VI .								.J

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization'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 power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		_
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 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 review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed ►AL, AK, AZ, CA, CT, FL, GA, IL, KS, KY, ME, MD, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI,SC,TN,UT,VA,WA,WV,WI
- 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 Upon request Other (explain in Schedule O)
- 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
- State the name, address, and telephone number of the person who possesses the organization's books and records ►HOLLY BLANCHARD

1126 16TH STREET NW

Washington, DC 200364845 (202) 785-1670

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

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

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

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

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

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

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

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

Form **990** (2014)

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

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

1b	Sub-Total	•			
C	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	•	2,042,558	91,969	296,125

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►18

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
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		Νo

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
BVX Entertainment LLC, 12400 Wilshire Blvd Ste 1275 LOS ANGELES, CA 90025	ALMA Show Air Fees	2,315,000
Levy Premium Foodservice LP, 1201 S Figueroa Street LOS ANGELES, CA 90015	Catering-Annual Conf	457,512
Sweetwater Digital Productions, 7635 Airport Business Parkway VAN NUYS, CA 91406	Audio visual svcs	446,523
RSM US LLP, 9737 Washingtonian Blvd Ste 400 GAITHERSBURG, MD 20878	Consulting Services	276,163
Solidarity Strategies LLC, 1090 Vermont Avenue NW WASHINGTON, DC 20005	Telecom Consulting	278,368
2 Total number of independent contractors (including but not limited to those list	ed above) who received more than	

Part V	4 🛊 🛊 1	Statement o			e in this Part VIII						
		Check if Scheal	ule O contains a respoi	ise or note to any iir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
s s	1a	Federated camp	paigns 1a					011 011			
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es 1b								
. Gr	С	Fundraising eve	ents 1 c								
ifts ar A	d	Related organiz	ations 1d	1,072,728							
s, G mili	e	Government grants	s (contributions) 1e	5,693,470							
ions r Si	f	All other contribution	ons, gifts, grants, and 1f	23,028,195							
buti ther		sımılar amounts no	ot included above								
ıtril 4 Oʻ	g	Noncash contribution 1a-1f \$	ons included in lines								
Cor	h	Total. Add lines	s 1a-1f	· · · .	29,794,393						
o.				Business Code							
Program Serwde Revenue	2a	EVENTS		900099	8,024,134	8,024,134					
Веv	ь	MEMBERSHIP DUES	S	900099	229,674	229,674					
100	С										
Serv	d										
i Lue	е										
illo.	f	All other progra	am service revenue								
<u>~</u>	g	Total. Add lines	s 2a-2f		8,253,808						
	3		ome (including dividen ar amounts)		349,923			349,923			
	4		tment of tax-exempt bond		0						
	5	Royalties	<u> </u>	▶	0						
			(ı) Real	(11) Personal							
	6a	Gross rents Less rental									
	b	expenses	0	0							
	C	Rental income or (loss)	_	0							
	d	Net rental incor	me or (loss)	· -	0						
	7a	Gross amount	(ı) Securities	(II) O ther							
	,	from sales of assets other	7,090,724								
	ь	than inventory Less cost or									
		other basis and sales expenses	7,111,567								
	С	Gain or (loss)	-20,843								
	d		s)		-20,843			-20,843			
enne	8a	Gross income for events (not include \$	luding								
Other Revenue		See Part IV, lin	reported on line 1c) le 18 a								
Ě	b		penses b	<u> </u>							
,	c 9a		(loss) from fundraising rom gaming activities	events 🛌	0						
		See Part IV, lin	e 19								
			a								
	b c		penses b (loss) from gamıng actı	vities	0						
	10a	Gross sales of returns and allo	inventory, less owances .								
	L	loca asster	a h								
	С		oods sold b (loss) from sales of inv	entory	0						
		Miscellaneous		Business Code							
	11a	REIMBURSED	EXPENSES	900099	26,665	26,665					
	ь	REGISTRATIO	N FEES	900099	42,345	42,345					
	С	OTHER INCOM	1E	900099	95,834	95,834					
	d	All other revenu	ue								
	е	Total. Add lines	s 11a-11d		164,844						
	12	Total revenue.	See Instructions .	▶	38,542,125	8,418,652		329,080			

Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizati	ons must comp	olete column (A)	
Check if Schedule O contains a response or note to any line in this	Part IX			
De not include anyonete noneted on lines Ch	4.53	(B)	(C)	T

	Check if Schedule O contains a response or note to any line in this		(B)		
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	7,804,040	7,804,040		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,850,667	1,406,506	444,161	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	7,693,210	5,794,944	1,523,431	374,835
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	480,697	364,514	93,494	22,689
9	Other employee benefits	1,055,361	791,334	210,178	53,849
10	Payroll taxes	647,637	488,818	132,742	26,077
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	112,025	85,633	20,108	6,284
С	Accounting	116,446		116,446	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	69,785		69,785	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,750,674	3,783,224	633,559	333,891
12	Advertising and promotion	716,488	632,564	33,287	50,637
13	Office expenses	580,471	473,715	77,320	29,436
14	Information technology	341,066	263,352	54,089	23,625
15	Royalties	0			
16	Occupancy	1,835,081	1,432,796	330,879	71,406
17	Travel	2,159,465	1,790,320	316,222	52,923
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	5,248,142	5,178,026	55,991	14,125
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	147,113		147,113	
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10%	178,941	155,839	20,338	2,764
	of line 25, column (A) amount, list line 24e expenses on Schedule O)				
_	EQUIP RENTAL & MAINT	67,184	59,401	7,293	490
b	BAD DEBT EXPENSE	62,551	56,260	6,291	
С.	MISCELLANEOUS	-134,595	-246,218	72,163	39,460
d	IND COST ALLOCATIONS	-	2,828,673	-2,966,484	137,811
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	35,782,449	33,143,741	1,398,406	1,240,302
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)				
				Fo	rm 990 (2014)

Part X Balance Sheet

Pal	rt X	Check if Schedule O contains a response or note to any line in	thıs Pa	art X						
					(A)		(B)			
	Π_				Beginning of year		End of year			
	1	Cash-non-interest-bearing			1,600		1,600			
	2	Savings and temporary cash investments			16,276,972		15,373,446			
	3	Pledges and grants receivable, net			1,240,960 288,395		1,276,780			
	4		ounts receivable, net							
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P. Schedule L	0	5	0					
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule		3						
8	7	Notes and loans receivable, net			0		0			
48	8	Inventories for sale or use			0		0			
	9	Prepaid expenses and deferred charges			2,130,917	<u> </u>	192,437			
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		2,410,460		9	102,407			
	ь	Less accumulated depreciation	10b	<u> </u>		100	1,184,096			
	11	Investments—publicly traded securities			7,183,877		9,947,653			
	12	Investments—publicly traded securities			7,100,077		9,947,033			
		Investments—program-related See Part IV, line 11	0		0					
	13		0		0					
	14	Intangible assets	32,420,373							
	15	Other assets See Part IV, line 11			60,854,444		33,018,475			
	16	Total assets. Add lines 1 through 15 (must equal line 34) .					62,087,640			
	17	Accounts payable and accrued expenses			3,682,732		2,954,891			
	18	Grants payable								
	19	Deferred revenue			1,757,315	-	1,533,570			
	20	Tax-exempt bond liabilities			0		0			
တ္	21	Escrow or custodial account liability Complete Part IV of Sch			0	21				
Liabiliti	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqual	ıfıed							
<u></u>		persons Complete Part II of Schedule L			0		0			
_	23	Secured mortgages and notes payable to unrelated third partie			0		0			
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0			
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	art X of	Schedule	304,410	25	293,476			
	26	Total liabilities. Add lines 17 through 25			5,744,457	26	4,781,937			
—- Ф		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.					.,,			
ănc M	27	Unrestricted net assets			2,380,218	27	3,861,638			
<u> 85</u>	28	Temporarily restricted net assets	48,669,161		49,434,970					
<u> </u>	29	Permanently restricted net assets	4,060,608		4,009,095					
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check becomplete lines 30 through 34.					, ,			
ō	30	Capital stock or trust principal, or current funds				30				
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31				
15.5	32	Retained earnings, endowment, accumulated income, or other				32				
7 *	33	Total net assets or fund balances	iuilub		55,109,987	33	57,305,703			
Net			•				· · ·			
	34	Total liabilities and net assets/fund balances	• •	• •	60,854,444	34	62,087,640			

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
	Check if Schedule o Contains a response of note to any line in this rate XI	· · ·	•		• •
1	Total revenue (must equal Part VIII, column (A), line 12)	1		38,5	542,125
2	Total expenses (must equal Part IX, column (A), line 25)	2		·	782,449
3	Revenue less expenses Subtract line 2 from line 1	3			, ,676,676
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			.09,987
5	Net unrealized gains (losses) on investments	5		-	
6	Donated services and use of facilities	6			<u> </u>
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		57,3	305,703
Par	rt XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				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		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis			1	1
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separasis, consolidated basis, or both	arate			
	Separate basis Consolidated basis 🔽 Both consolidated and separate basis			1	1
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n		1:	1:
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 86-0212873

Name: NATIONAL COUNCIL OF LA RAZA INC

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

(Code Workforce Development) (Expenses \$	5,001,501	including grants of \$	1,750,856) (Revenue \$	233,222)
(Code) (Expenses \$	1,793,380	ıncludıng grants of \$) (Revenue \$	5,000)
Legislative Advocacy and	Mission				

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

orm 550, Fart III	Line te. Frogra	III SCI VICE A	Accomplishments (See	the Instructions,	
(Code) (Expenses \$	3,690,596	including grants of \$	938,450) (Revenue \$	15,500)
Education Programs					
(Code) (Expenses \$	2,523,904	including grants of \$	1,334,500) (Revenue \$)
Institute for Hispanic H	ealth Program				

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

01111 220, 1 411 222	ziiic ici i rograiii ce	Trice Mecomphismments (See the 2	iioti detieiio,	
(Code) (Expenses \$	including grants of \$) (Revenue \$	12,407)
ADMINISTRATIVE				

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

Compensated Employees, and Independent Contractors								1		
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor/	ox, ι an o /trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099 11100/	2,1033 112007	related organizations
(1) Janet Murguia	36 5	×		х				425,525	40,803	37,387
President & CEO (1) Jorge Plasencia	3 5	x		x				0	0	0
Chair	0 0							0		
(2) Renata Soto Vice Chair	1 0	×		х				0	0	0
(3) Fred Fernandez	1 0	х		Х				0	0	0
Secretary	1 0							, and the second	•	
(4) Beatrice Olvera Stotzer	1 0	x		х				0	0	0
Treasurer (5) Catherine Pino	0 0									
Executive Committee	0 0	X						0	0	0
(6) Nilda Ruiz	1 0	х						0	0	0
(7) Maria Salinas	1 0	×						0	0	0
Executive Committee (8) J Walter Tejada	0 0									
Executive Committee (9) Luis Avila	0 0	×						0	0	0
General Membership	0.0	х						0	0	0
(10) Christine Cannon PhD RN	1 0	x						0	0	0
General Membership (11) Mary Alice Cisneros	0 0	.,								
General Membership (12) Russell Deyo	0 0	X						0	0	0
General Membership	0 0	х						0	0	0
(13) Lorena Gonzalez	1 0	x						0	0	0
General Membership (14) Sergio Gonzalez	0 0									
General Membership (15) Dr Edwin Melendez	0 0	X						0	0	0
General Membership	0 0	x						0	0	0
(16) Ernest Ortega	1 0	x						0	0	0
General Membership (17) Pilar Rocha-Goldberg	1 0									
General Membership	0 0	x						0	0	0
(18) Jose Rodriguez	1 0	х						0	0	0
General Membership (19) Tony Salazar	0 0	x						0	0	0
General Membership (20) Paul Saldana	0 0	^								
General Membership	0 0	х						0	0	0
(21) Juan Salgado	1 0	×						0	0	0
General Membership (22) Gary Stone	1 0	×						0	0	0
General Membership	0 0									
(23) Charles Kamasakı Senior Advisor	0 0			Х				138,764	0	30,990
(24) Holly Blanchard	32 0			х				181,935	51,166	26,233
Chief Financial Officer	9 0	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Pore in a Individual trustae or director	ion (d nan oi n is b	one booth a ctor/	ox, u an of /trus	inless fficer tee)	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(26) Sonia Perez Senior VP	40 0			х			205,752	0	39,568
(1) Delia Pompa	38 0								
Senior VP	2 0			Х			221,115	0	26,313
(2) Eric Rodriguez	39 0						462.256		22.470
VP	2 0			Х			163,356	0	33,178
(3) Ivelisse Fairchild VP	40 0			х			7,308	0	512
(4) Delia De La Vara VP	40 0					х	150,864	0	19,644
(5) Darcy Eischens Dir - ORAL	40 0					х	138,980	0	18,549
(6) Johanna Greene Controller	40 0					х	137,094	0	24,007
(7) Margaret McLeod Deputy VP	40 0					х	136,605	0	13,773
(8) Lautaro Diaz	40 0					х	135,260	0	25,971

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493222011246

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		ne organization DUNCIL OF LA RAZA INC					Employer identification	ation number
NATIC	INAL CO	JONEIL OF LA RAZA INC					86-0212873	
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	itions must co	mplete this r		ns
		zation is not a private f						71101
1	Ī	A church, convention		· ·	= :	•	•	
2	, —	A school described in	•				-/(-/(-/(-/	
3	<u>'</u>	A hospital or a cooper				tion 170(h)(1	\(
4	<u>'</u>	A medical research or		_				i) Enterthe
4	ı	hospital's name, city,		erated in Conjunction v	vitii a iiospitai u	iescribed iii se	CCION 170(D)(1)(A)(III	. Enter the
5	Г	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	r operated by	a governmental unit d	escribed in
	•	section 170(b)(1)(A)			,		J	
6	Г	A federal, state, or loc			described in se	ection 170(b)(:	1)(A)(v).	
7	<u>,</u>	An organization that n						neneral nublic
•	1.	described in section 1				om a governm	sincar aims or morn the g	general public
8	Γ	A community trust de				tII)		
9	Γ	An organization that n	ormally receiv	es (1) more than 33:	1/3% of its supp	ort from contri	butions, membership	fees, and gross
		receipts from activitie	s related to it	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of
		its support from gross	ınvestment ır	ncome and unrelated b	usiness taxable	e income (less	section 511 tax) from	n businesses
		acquired by the organ	ızatıon after Jı	ine 30, 1975 See sec	tion 509(a)(2).	(Complete Pa	rt III)	
10	Г	An organization organ						
11	Г	An organization organ	ized 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 supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3)								
	_	the box in lines 11a th	_			_		
а	ı	Type I. A supporting of						
		supported organizatio organization You mus				ty of the direct	ors or trustees of the	supporting
ь	Г	Type II. A supporting				with its suppo	rted organization(s). I	ov having control or
	•	management of the su	_	•		• •	•	•
	_	must complete Part I'						
C	ļ	Type III functionally						grated with, its
a	_	supported organizatio Type III non-function						ianization(c) that is
d	ļ	not functionally integr						
		(see instructions) Yo					cilicite and all according	eness requirement
е	Γ	Check this box if the o	organization re	ceived a written deter	mination from t	he IRS that it i	s a Type I, Type II, T	ype 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	inization(s)			
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of
		organization		organization	listed in your	governing	monetary support	other support (see
				(described on lines	docume	nt?	(see instructions)	ınstructions)
				1-9 above or IRC				
			section (see instructions))					
				,,	Yes	No		
								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 35,757,043 25,855,921 33,131,688 27,331,952 29,794,393 151,870,997 not include any "unusual grants ") 2 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 0 to the organization without charge 35,757,043 25,855,921 33,131,688 27,331,952 29,794,393 151,870,997 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly

	supported organization) included on line 1 that exceeds 2% of the							13,429,545
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from line 4							138,441,452
	ection B. Total Support							
Cale	endar year (or fiscal year beginning in) 🏲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	014	(f) Total
7	A mounts from line 4	35,757,043	25,855,921	33,131,688	27,331,952	29	,794,393	151,870,997
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	79,834	67,207	117,523	214,018		349,923	828,505
9	Net income from unrelated business activities, whether or not the business is regularly carried on							0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	196,888	152,843	454,786	320,503		164,844	1,289,864
11	Total support Add lines 7 through 10							153,989,366
12	Gross receipts from related activit	ties, etc (see inst	tructions)		<u>.</u>	12	•	41,315,341
13	First five years. If the Form 990 is organization, check this box and s							
Se	ection C. Computation of Pu							·
14	Public support percentage for 201	4 (line 6, column	(f) divided by line	11, column (f))		14		89 903 %
15	Public support percentage for 201	3 Schedule A, Pa	rt II, line 14			15		82 154 %
16a	33 1/3% support test—2014. If th	e organızatıon dıd	not check the bo	x on line 13, and	line 14 is 33 1/3%	or more	, check t	hıs box
	and stop here. The organization qu					0 /		▶ ▽
D	33 1/3% support test—2013. If th box and stop here. The organization				, and line 15 is 33	1/3% 01	more, cn	IECK THIS ►
17a	10%-facts-and-circumstances test is 10% or more, and if the organiz in Part VI how the organization me organization	t—2014. If the org atıon meets the "1	anızatıon dıd not facts-and-cırcum	check a box on lı stances" test, ch	eck this box and st	op here	. Explain	,
b	10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiz	nızatıon meets th	e "facts-and-circ	umstances" test	, check this box and	d stop h	iere.	, у
10	supported organization		k a hay an line 4.2	165 165 17-	مناكة المحادية	hav == :		► □
18	Private foundation. If the organizations	ation did not chec	ka dox on line 13	, 10a, 16D, 1/a,	or 1 / b, cneck this	DOX and	ısee	▶ □
					Schedu	ıle A (F	orm 990 o	or 990-EZ) 2014

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

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

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

Section D. Computation of Investment Income Percentage

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

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

18

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

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	За		
	b Did the organization exercise 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 furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

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

DLN: 93493222011246

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Political Campaign and Lobbying Activities

Open to Public Inspection

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

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

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

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

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

◆ Section 501(c)(4) (5) or (6) organizations. Complete Part III.

Na	me of the organization TIONAL COUNCIL OF LA RAZA INC			Employer iden 86-0212873	tification number
Par	t I-A Complete if the or	ganization is exempt unde	r section 501(organization.
1 2 3	Provide a description of the org Political expenditures Volunteer hours	ganization's direct and indirect pol	itical campaign act	ivities in Part IV	\$
Par	t I-B Complete if the or	ganization is exempt unde	r section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization (under section 4955	▶	\$
2	Enter the amount of any excise	e tax incurred by organization man	agers under sectioi	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	720 for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
		ganization is exempt unde	_		1(c)(3).
1	·	ended by the filing organization for organization's funds contributed to	•		\$ \$
3	Total exempt function expendit	tures Add lines 1 and 2 Enter hei	e and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file F	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments F amount of political contribution	nd employer identification number For each organization listed, enter ns received that were promptly and political action committee (PAC)	the amount paid fro I directly delivered	om the filing organization's t to a separate political orga	funds Also enter the inization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶ □	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
		expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

oneck i i mane ming organization enecked be	x / and miniculation provisions apply		
Limits on Lobbying I (The term "expenditures" means a		(a) Filing organization's totals	(b) Affiliated group totals
Total lobbying expenditures to influence public of	opinion (grass roots lobbying)		
Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	410,930	
Total lobbying expenditures (add lines 1a and 1	410,930		
Other exempt purpose expenditures		35,371,519	
Total exempt purpose expenditures (add lines 1	c and 1d)	35,782,449	
Lobbying nontaxable amount Enter the amount columns	from the following table in both	1,000,000	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
Grassroots nontaxable amount (enter 25% of lin	ne 1f)	250,000	
Subtract line 1g from line 1a If zero or less, ent	rer -0 -		
Subtract line 1f from line 1c If zero or less, ente	er-0-		
If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 472	20 reporting	

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) Total beginning in) Lobbying nontaxable amount 1,000,000 1,000,000 1,000,000 1,000,000 4,000,000 Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) 378,988 410,930 Total lobbying expenditures 466,065 415,676 1,671,659 Grassroots nontaxable amount 250,000 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) Grassroots lobbying expenditures

	filed Form 5768 (election u	on is exempt under section 501(c)(3) and has I under section 501(h)).				
For e	each "Yes" response to lines 1a through 1: below, p	provide in Part IV a detailed description of the lobbying	(a	1)	(1)
activ	rity.		Yes	No	Amo	ount
1 a		empt to influence foreign, national, state or local public opinion on a legislative matter or referendum,				
b c	Paid staff or management (include compensa Media advertisements?	tion in expenses reported on lines 1c through 1i)?				
d	Mailings to members, legislators, or the publi	c?				
e	Publications, or published or broadcast state	ments?				
f	Grants to other organizations for lobbying pur	poses?				
g	Direct contact with legislators, their staffs, g	overnment officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventio	ns, speeches, lectures, or any similar means?				
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organiza	tion to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred	d under section 4912				
C	If "Yes," enter the amount of any tax incurred	d by organization managers under section 4912				
d	If the filing organization incurred a section 49	912 tax, did it file Form 4720 for this year?				
Par		on is exempt under section 501(c)(4), section !	5 01(c))(5), o	r sect	ion
	501(c)(6).				Ye	es No
1	Were substantially all (90% or more) dues re	ceived nondeductible by members?		Г	1	.5 110
2	Did the organization make only in-house lobb	•		⊢	2	
3		ying and political expenditures from the prior year?			3	
Par		on is exempt under section 501(c)(4), section !	501(c)(5), o	r sect	ion
	501(c)(6) and if either (a)	BOTH Part III-A, lines 1 and 2, are answered "				
_	line 3, is answered "Yes."		1 4 1			
1 2	Dues, assessments and similar amounts from	olitical expenditures (do not include amounts of political	1			
	expenses for which the section 527(f) tax w		2a			
a b	Current year Carryover from last year		2b			
c	Total		2c			
3		e)(1)(A) notices of nondeductible section 162(e) dues	3			
4		c exceeds the amount on line 3, what portion of the excess				
•		ne reasonable estimate of nondeductible lobbying and				
	political expenditure next year?		4			
5	Taxable amount of lobbying and political expe	enditures (see instructions)	5			
Pa	art IV Supplemental Information					
	ovide the descriptions required for Part I-A , line see instructions), and Part II-B, line 1 Also, co	e 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou Implete this part for any additional information	up list),	Part II	-A , lines	s 1 and
	Return Reference	Explanation				

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

DLN: 93493222011246

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

Name of the organization NATIONAL COUNCIL OF LA RAZA INC

Employer identification number 86-0212873 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 Aggregate value of contributions to (during year)

3	Aggregate value of grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or				nor advi	sed	Γ	Yes	┌ No
6	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?						Г	Yes	┌ No
Pa	tt III Conservation Easements. Complete if	the organizat	ion a	answered "Yes" t	to Forn	า 990, Part IV	, lın	e 7.	
1	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space	•				•		l area	
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conse	ervat	on contribution in	the forn	n of a conservat	ion		
						Held at the	End	of the	Year
а	Total number of conservation easements				2a				
b	Total acreage restricted by conservation easements				2b				
c	Number of conservation easements on a certified histo	oric structure in	clude	dın (a)	2c				

b	Total acreage restricted by conservation easements	2b			
С	Number of conservation easements on a certified historic structure included in (a)	2c			
d	Number of conservation easements included in (c) acquired after $8/17/06$, and not on a historic structure listed in the National Register	2d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminate	ed by th	ie organization d	luring	
	the tax year -				
4	Number of states where property subject to conservation easement is located 🛌				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, han enforcement of the conservation easements it holds?	dling of	violations, and	┌ Yes	┌ N
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easer	nents c	luring the year		
	▶				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easement	s durin	g the year		
	▶ \$				
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of second section $170(h)(4)(B)(II)$?	tion 17	70(h)(4)(B)(ı)	┌ Yes	
9	In Part XIII, describe how the organization reports conservation easements in its revenue an balance sheet, and include, if applicable, the text of the footnote to the organization's financia 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 IV Ine 9, or reported an amount on Form 990, Part X, Ine 21. The 1 Ine 9, or reported an amount on Form 990, Part X, Ine 21.	Part	Organizations Maintaining Co	llections of Art, I	Histori	cal Tı	reasu	res, or O	ther	Similar Ass	sets (d	continued)
b Scholarly research e Other c Preservation for future generations Part XIII During the year, did the organization solicitions and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization assists to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XIII During the year, did the organization assists to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XIII Is I stee organization an agent, rustes, custodian or either intermediary for contributions or other assets not included on Form 990, Fent X Is I stee organization and pagent, rustes, custodian or either intermediary for contributions or other assets not included on Form 990, Fent X If I'res," explain the arrangement in Part XIII and complete the following table Beginning balance C Beginning balance If Admitted the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Yes refered the organization answered "Yes" to Form 990, Part IV, line 10. If I'res," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII Part V Endowment Funds, Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance 4,884,599 4,785,598 2,207,194 2,021,127 2,028 Contributions 4,884,599 4,785,598 2,207,194 2,021,127 2,028 G Cantas or scholarships 1,7417 17,488 3,369 1,86,071 2,021,127 2	3		ion, and other records	, check			_		significant use	of its	
4 Provide a description of the organizations collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII section 1. Section 2. Section 3.	а	Public exhibition		d ┌	Loan	or excl	hange progr	ams			
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization asserded "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1 Is the organization an angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 2 If "Yes," explain the arrangement in Part XIII and complete the following table 5 Beginning balance 4 Additions during the year 5 Distributions during the year 6 Distributions during the year 7 Ending balance 9 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 9 Yes Part V Endowment Funds, Complete if the organization answered "Yes" to Form 990, Part X, line 10. 10 Beginning of year balance 10 Scornent year (b)Prior years (c)Prior years back (c)Prior yea	b	Scholarly research	•	е Г	Othe	r					
Part XIII Source the sold to raise funds rather than to be maintained as part of the organization collection? Part XV Excrew and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Ia Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X is a complete the following table. C Beginning balance C Beginning balance I Id Amount I Id Amount I Id	C	Preservation for future generations									
Part IV. In 19. or reported an amount on Form 990, Part X, line 21, for escrow or custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year e Distributions during the year 1a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account hability? Yes If	4		ollections and explain	how the	y furthe	er the c	organızatıon	's exe	mpt purpose II	n	
Part IV Ine 9, or reported an amount on Form 990, Part X, line 21. I is the repair trustee, custodial architecture of the companization an assert of the contributions or other assets not included on Form 990, Part X? Ine 1.	5										
Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table	Dar								<u>'</u>		l No
Fire	Par						i answered	ı re	S to rollil 9	90,	
C Beginning balance	1a		lian or other intermedi	ary for d	ontribu	utions	or other ass	ets no		_ Yes	┌ No
C Beginning balance Ic Id Id Id Id Id Id Id	b	If "Yes," explain the arrangement in Part XI	II and complete the fo	llowing	table		_				
d Additions during the year e Distributions during the year f Ending balance Diff the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part ▼ Endowment Funds. Complete if the organization has been provided in Part XIII							_		Am	ount	
Distributions during the year Distributions during the year Distributions during the year Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Part X Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Part X Did the organization answered "Yes" to Form 990, Part X Did the organization answered "Yes" to Form 990, Part IV, line 10.	_						-				
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance . (a)Ciment year (b)Prory year b (c)Prov years back (d)Time years back (e)Four							-				
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization has been provided in Part XIII							-				
Describe in Part XIII Check here if the explanation has been provided in Part XIII		•					<u>L</u>				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.	2a	Did the organization include an amount on F	orm 990, Part X, line 2	21, for e	scrow	orcusto	odial accour	nt liab	ulity?	Yes	□ No
Table Contributions Con	ь									<u> </u>	<u> </u>
1a Beginning of year balance 4,888,458 4,765,508 2,207,194 2,021,123 2,028 b Contributions 2,500,000 2,500,000 3 c Net investment earnings, gains, and losses -142,084 159,765 65,382 186,071 -7 d Grants or scholarships	Pai	t V Endowment Funds. Complete								(a)Four	veare hack
b Contributions	1a	Beginning of year balance								(e)i oui	2,028,540
142,084 159,765 65,382 186,071 -7	_						2,500,000				
d Grants or scholarships	c	Net investment earnings, gains, and losses	142.004		150.765		65.202		106.071		7.417
e Other expenditures for facilities and programs	а	Grants or scholarships	-142,084		159,765		65,382		186,0/1		-7,417
and programs 17,617 17,688 3,369 f Administrative expenses 19,269 19,127 3,669 g End of year balance 14,709,488 4,888,458 4,765,508 2,207,194 2,021 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ 0 890 % b Permanent endowment ▶ 85 130 % c Temporarily restricted endowment ▶ 15 760 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations		·									
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ○ 890 % Permanent endowment ○ 85 130 % C Temporarily restricted endowment ○ 15 760 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	·	·	17,617		17,688		3,369				
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ 0 890 % b Permanent endowment ▶ 85 130 % c Temporarily restricted endowment ▶ 15 760 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	f	Administrative expenses			•		•				
a Board designated or quasi-endowment ► 0 890 % b Permanent endowment ► 85 130 % c Temporarily restricted endowment ► 15 760 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	g	End of year balance	4,709,488	4,	888,458		4,765,508		2,207,194		2,021,123
b Permanent endowment ► 85 130 % c Temporarily restricted endowment ► 15 760 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	2	Provide the estimated percentage of the cur	•	(line 1g	, colum	nn (a)) l	held as				
C Temporarily restricted endowment ► 15 760 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	а	Board designated or quasi-endowment 🕨	0 890 %								
The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	b	Permanent endowment ► 85 130 %									
organization by (i) unrelated organizations	C	remporarily restricted endowment F									
(i) unrelated organizations	3a		ssion of the organizati	on that	are hel	d and a	idministered	l for t	he		
(ii) related organizations									20/	_	+
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b)Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d)											No
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value of the basis (investment) (e) Accumulated depreciation (f) Book value of the basis (investment) (g) Cost or other basis (other) (h) Cost or other basis (other) (h) Cost or other basis (investment) (h) Cost or other basis (other) (h)	b			n Sche	ule R?	٠.٠.	· · · · ·	٠. ٠	· · · · · · · · · · · · · · · · · · ·		†
11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 2,068,930 928,110 1,140 c Leasehold improvements 2,068,930 928,110 1,140 d Equipment 341,530 298,254 43	4	Describe in Part XIII the intended uses of the	ne organization's endo	wment f	unds						
basis (investment) basis (other) depreciation b Buildings 2,068,930 928,110 1,140 d Equipment 341,530 298,254 43	Par			e orgar	nizatioi	n ansv	vered 'Yes	' to F	orm 990, Pa	rt IV, I	ine
b Buildings		Description of property								(d) E	Book value
c Leasehold improvements 2,068,930 928,110 1,140 d Equipment 341,530 298,254 43	1 a l	and									
d Equipment	b i	Buildings									
	c l	_easehold improvements					2,068	,930	928,11	0	1,140,820
	d i	Equipment		. [341	,530	298,25	4	43,276
e Other											
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	equal Form 990, Part X, c	column (B), line	10(c).)					1,184,096

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.	mplete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category	(b) Book value	(c) Method of vo	
(Including name of security) (1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F		
Part VIII Investments—Program Related. C	omplete if the organization	ப n answered 'Yes' to Fo	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13.			
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
		Cost of the of year	market varae
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*		
Part IX Other Assets. Complete if the organization (a) Description		0, Part IV, line 11d See	
(1) ASSETS-DEFERRED COMPENSATION	Прстоп		(b) Book value 293,476
(2) SECURITY DEPOSITS			54,943
(3) FUNDS HELD IN TRUST			31,944,200
(4) FUND FOR LA RAZA, INC			725,856
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		33,018,475
Part X Other Liabilities. Complete if the org			
Form 990, Part X, line 25.		· 	
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
LIABILITIES-DEFERRED COMPENSATION	293,476		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 293,476		
	233,170	<u> </u>	

Раг		vered 'Yes' to Form 990, Part IV, line 1		its wit	n kevent	ie ber i	teturn Complete II
1		r support per audited financial statements				1	37,978,165
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12					
а	Net unrealized gains (losses)	on investments	2a		-563,9	960	
b	Donated services and use of fa	acılıtıes	2b				
С	Recoveries of prior year grants	s	2c				
d	Other (Describe in Part XIII)		2d				
e	Add lines 2a through 2d .		· · ·			. 2e	-563,960
3	Subtract line ${f 2e}$ from line ${f 1}$.					. 3	38,542,125
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1					
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a				
b	Other (Describe in Part XIII)		4b				
C	Add lines 4a and 4b					. 4c	
5	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line	12)			5	38,542,125
Part		xpenses per Audited Financial Sta			th Expen	ses pei	Return. Complete
_		swered 'Yes' to Form 990, Part IV, line					7 25 702 440
1	·	raudited financial statements				1	35,782,449
2		t not on Form 990, Part IX, line 25	ا ۔	1			
a		acilities	2a	+		_	
b			2b				
с	Other losses		2c	+			
d			2d			┥.	
e	Add lines 2a through 2d		• •			. 2e	25 702 440
3						. 3	35,782,449
4		0, Part IX, line 25, but not on line 1:	۱.	1			
a	·	uded on Form 990, Part VIII, line 7b		+			
b			4b			- .	
_ C	Add lines 4a and 4b					. 4c	25.702.440
5 Dowl	XIII Supplemental Inf	nd 4c. (This must equal Form 990, Part I, lin	ie 18)	• •	· · ·	. 5	35,782,449
				D t 1) /		1 2 5	
Part		Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and					ıde any addıtıonal
	Return Reference	Explanation					
form 9	90 schedule D, Part V, line 4	Interest from permanently restricted net a and temporary endowment funds are spent					
form 9	90 schedule D, Part X, Line 2	NCLR does not believe there are any mate recognize any liability for unrecognized tax exemptions in the jurisdictions where it is Revenue Form 990 tax returns as required required NCLR believes that it is no longe income tax examinations by tax authoritie examinations by tax authorities from fisca 2015 and 2014, there were no interest or activities	benefi require landal rsubje sforta lyear2	ts NCLI d to do s l applica ct to U S x years !012 for	R has filed for Addition ble returns federal, state before 201; ward For th	or and rec ally, NCL in those j tate and l 2 Howeve e years e	ceived income tax R has filed Internal jurisdictions where it is ocal, or non-U S er, NCLR is still open to nded September 30,

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

DLN: 93493222011246 OMB No 1545-0047

(Form 990)

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

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

Department of the Treasury Internal Revenue Service	► Information	-	Attach to Form 990.rm 990) and its instruct	ions is at <u>www.irs.gov/i</u>	<u>form990</u> .	C	pen to Public Inspection
Name of the organization						Employer identificat	ion number
NATIONAL COUNCIL OF LA RAZA	INC					86-0212873	
Part I General Informati	on on Grants an	d Assistance				•	
 Does the organization maintain the selection criteria used to a Describe in Part IV the organization 	ward the grants or as	ssistance?			_	•	✓ Yes ✓ N
				Governments. Com rt II can be duplicated			es" to
(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 gran or assistance
See Additional Data Table							
	•	•	•			•	

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

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

Part IV Supplemental Ir	iformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
990 SCH I, Part I, line 2	Grantees need to submit financial and technical reports on a monthly, quarterly and/or semi-year basis according to the requirements set on the grant

Additional Data

Software ID:

Software Version:

EIN: 86-0212873

Name: NATIONAL COUNCIL OF LA RAZA INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Spanish Coal for Housing 4035 West North Ave Chicago, IL 60639	23-7230578	501(c)(3)	603,389				Grants
Hacienda Cmty Dev't Corp 5136 NE 42nd Ave Portland, OR 97218	93-0979064	501(c)(3)	385,634				Grants
Neighborhood Eco Dev't Corp 212 Main St Springfield, OR 97477	93-0739188	501(c)(3)	289,515				Grants

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
Youth Policy Institute634 S Spring St 10th Los Angeles, CA 90014	52-1278339	501(c)(3)	255,708				Grants			
Neighbor Christ Legal Clin 3333 N Meridian St Indianapolis,IN 46208	35-1916572	501(c)(3)	193,100				Grants			
AltaMed Health Srvs Corp 500 Citadel Dr Los Angeles, CA 90040	92-2810095	501(c)(3)	177,772				Grants			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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		
Comun Latinas Unidas En Srv 720 East Lake St Minneapolis, MN 55407	41-1386986	501(c)(3)	167,573				Grants		
Chicanos Por La Causa Phx 1242 E Washington 103 Phoenix, AZ 85034	86-0227210	501(c)(3)	164,769				Grants		
Brighton Park Nbhd Coun 4477 S Archer Ave Chicago, IL 60632	36-4229387	501(c)(3)	152,588				Grants		

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
CSU at Long Beach Ctr6300 State Univ Dr Long Beach,CA 90815	95-1810426	501(c)(3)	150,000				Grants			
El Concilio (The Concilio) 400 So Zang Blvd 300 Dallas,TX 75208	75-1770140	501(c)(3)	144,800				Grants			
Mex Amer Unity Coun Inc 2300 W Commerce St San Antonio, TX 78207	74-6088061	501(c)(3)	143,250				Grants			

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
MAAC PROJECT1355 Third Ave Chula Vista, CA 91911	95-2457354	501(c)(3)	136,757				Grants			
Hispanic Unity of Florida 5840 Johnson St Hollywood, FL 33021	59-2230272	501(c)(3)	126,800				Grants			
Hispanic Srvs Coun2902 N Armenia Ave 201 TAMPA,FL 33607	59-3198934	501(c)(3)	125,800				Grants			

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
Cyp Hills Local Dev't Corp 625 Jamaica Ave Brooklyn,NY 112081203	11-2683663	501(c)(3)	121,486				Grants			
Latino Cmty Dev't Agency 420 SW 10th St Oklahoma City,OK 73109	73-1424239	501(c)(3)	114,500				Grants			
Conexion Americas800 18th Ave S Ste A Nashville,TN 37203	62-1715618	501(c)(3)	111,750				Grants			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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		
The Resurrection Project 1818 S Paulina Ave Chicago, IL 60608	36-3576073	501(c)(3)	108,877				Grants		
Chicanos Por La Causa LV 200 N Stone Ave Tucson, AZ 85701	86-0227210	501(c)(3)	104,050				Grants		
Northwest Side Housing Ctr 5007 West Addison St Chicago, IL 60641	20-1413891	501(c)(3)	103,650				Grants		

Form 990,Schedule I, Par	<u>rt II, Grants ar</u>	<u>nd Other Assistance</u>	<u>e to Domestic Org</u> :	anizations and Do	<u>mestic Governmer</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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								
Gads Hill Ctr1919 W Cullerton Chicago,IL 60608	36-2167082	501(c)(3)	100,688				Grants								
Assoc House of Chicago 1116 N Kedzie Ave Chicago, IL 60651	36-2166961	501(c)(3)	95,450				Grants								
Housing & Educ Allaince Inc 550 N Rio St TAMPA,FL 33609	43-1963410	501(c)(3)	94,170				Grants								

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
Inst del Progreso Latino 2570 S Blue Island Ave Chicago,IL 60608	36-2937375	501(c)(3)	94,094				Grants			
Cmty Services of Nevada 3320 Sunrise Ave 108 Las Vegas, NV 89101	88-0360474	501(c)(3)	93,535				Grants			
TODEC Legal CtrPO Box 1733 Perris,CA 92570	33-0711527	501(c)(3)	93,300				Grants			

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
YWCA of El Paso TX YWCA 1918 Texas Ave El Paso,TX 79901	74-1109650	501(c)(3)	92,087				Grants			
Unity Council1900 Fruitvale Ave 2-A Oakland,CA 94601	94-1670490	501(c)(3)	91,617				Grants			
Houston Gateway Acad Inc 3400 Evergreen St Houston,TX 77087	31-1614343	501(c)(3)	87,800				Grants			

<u>Form 990,Schedule I, Par</u>	rt II, Grants ar	<u>ıd Other Assistanc</u>	to Domestic Org/	<u>anizations and Do</u>	mestic Governmer	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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								
Latino Alz & Mem Dis AAC 4327 N Ottawa Ave Norridge,IL 60706	35-2288467	501(c)(3)	83,500				Grants								
Latino Eco Dev't Corp2316 18th St NW Washington, DC 200091815	52-1749216	501(c)(3)	82,108				Grants								
El Centro Inc650 Minnesota Ave Kansas City, KS 66101	36-2904073	501(c)(3)	79,500				Grants								

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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		
Centro Camp Frmwrk Ctr Inc 35801 SW 186th Ave Florida City,FL 33034	59-1460598	501(c)(3)	74,825				Grants		
Poder Learning Ctr Inc1637 S Allport St Chicago, IL 60608	36-4251880	501(c)(3)	71,500				Grants		
Chicanos Por La Causa Tucson200 N Stone Ave Tucson, AZ 85701	86-0227210	501(c)(3)	69,750				Grants		

<u>Form 990,Schedule I, Par</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
A mer Lat Ctr for Res Educ 14610 S Hearthstn Grn Dr Houston,TX 77095	45-3308358	501(c)(3)	69,500				Grants			
Mex Coal for Empowerment 389 E 150th St Office 3 Bronx, NY 10455	46-2463951	501(c)(3)	69,200				Grants			
One Stop Career Ctr2000 839 Calle Anasco San Juan, PR 00926	66-0593598	501(c)(3)	68,843				Grants			

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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		
Con Cred Coun Srv of Org Cnty1920 Old Tustin Ave Santa Ana,CA 92705	95-2426981	501(c)(3)	67,215				Grants		
Latın American Youth Ctr 1419 Columbia Rd NW Washington, DC 20008	52-1023074	501(c)(3)	66,094				Grants		
Hogar Hispano Inc1126 16th St NW 600 Washington, DC 20036	55-0860403	501(c)(3)	65,407				Grants		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
Assoc for Adv of Mex Amer 6001 Gulf Fwy Bldg E Houston,TX 77023	74-1696961	501(c)(3)	64,500				Grants			
Homes on the Hill4318 Westland Mall Columbus, OH 43228	31-1349995	501(c)(3)	63,417				Grants			
Clin for Educ Treat & Prevnt 6020 Dawson Blvd Ste I Norcross, GA 30093	58-2493892	501(c)(3)	59,500				Grants			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
La Maestra Cmty Health Ctrs 4060 Fairmont Ave San Diego, CA 92105	33-0473171	501(c)(3)	59,500				Grants		
Vera Ct Neighborhood Ctr 614 Vera Ct Madison, WI 53704	39-1945609	501(c)(3)	59,000				Grants		
Tejano Ctr For Cmty Concerns 2950 Broadway Houston, TX 77017	76-0377101	501(c)(3)	57,966				Grants		

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
Hispanic Ctr of W Michigan 1204 Grandvl Av SW Grand Rapids, MI 49503	38-2265825	501(c)(3)	56,500				Grants			
Dalton-Whit Cmty Dev't Corp PO Box 248 Dalton, GA 307220248	54-2102541	501(c)(3)	56,494				Grants			
Watts Century Latino Org 10360 Wilmimgton Ave Los Angeles, CA 90002	95-4429533	501(c)(3)	47,700				Grants			

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CO Latino Ldr Adv & Res Org 309 W 1st Ave Denver, CO 80223	84-0562952	501(c)(3)	47,300				Grants			
Latino Memphis 2838 Hickory HI Rd B-25 Memphis, TN 38115	31-1694878	501(c)(3)	47,300				Grants			
Congreso de Lat Unidos Inc 216 N Somerset St Philadelphia, PA 19133	23-2051143	501(c)(3)	45,750				Grants			

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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				
Centro de Apoyo Familiar54 East Harverhill Lawrence, MA 01841	26-0452137	501(c)(3)	44,700				Grants				
Montebello Hsing Dev't Corp 1619 Paramount Blvd Montebello, CA 90640	95-4413788	501(c)(3)	44,165				Grants				
New Economics For Women 303 S Loma Dr Los Angeles, CA 900171103	95-3969029	501(c)(3)	43,390				Grants				

<u>Form 990,Schedule I, Par</u>	<u>rt II, Grants ar</u>	<u>ıd Other Assistanc</u>	e to Domestic Org	anizations and Do	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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							
Friendly HousePO Box 3695 Phoenix,AZ 85030	86-0447737	501(c)(3)	42,500				Grants							
E Bost Ecumenical Cmty Coun50 Meridian St East Boston, MA 02128	04-2774242	501(c)(3)	42,000				Grants							
Comunidades Unidades1341 S State St Salt Lake City, UT 84115	13-4257724	501(c)(3)	39,500				Grants							

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El Barrio Inc5209 Detroit Ave Cleveland,OH 44102	34-1657978	501(c)(3)	39,000				Grants		
Housing & Cmty Srvs of N VA7426 Alban Station Ct Springfield, VA 22150	54-1711347	501(c)(3)	37,932				Grants		
E Austin College Prep Acad 6002 Jain Lane Austin,TX 78721	74-2481167	501(c)(3)	35,750				Grants		

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Puentes New Orleans Inc 1050 S Jeff Dav Pkwy New Orleans, LA 70125	20-8846196	501(c)(3)	35,500				Grants		
Latino Network240 N Broadway 214 Portland,OR 97227	73-1675402	501(c)(3)	35,250				Grants		
Make the Road New York92- 10 Roosevelt Ave Jackson Hts,NY 11372	11-3344389	501(c)(3)	32,500				Grants		

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
Community Housing Works 4305 Univ Ave 550 San Diego, CA 92105	33-0317950	501(c)(3)	31,981				Grants			
Southwest Key Program Inc 6002 Jain Lane Austin,TX 787213104	74-2481167	501(c)(3)	31,975				Grants			
Central Amer Resource Ctr 1460 Columbia Rd NW Washington, DC 20009	52-1271888	501(c)(3)	31,850				Grants			

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Sociedad Latina Inc1530 Tremont St Roxbury, MA 02120	04-2678255	501(c)(3)	31,500				Grants			
El Centro de la Raza2524 16th Ave South Seattle, WA 98144	91-0899927	501(c)(3)	31,400				Grants			
Chhaya Cmty Dev't Corp37- 43 77th St Jackson Heights,NY 11372	11-3580935	501(c)(3)	30,765				Grants			

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Del Norte Nbhd Dev't Corp 2926 Zunı St 202 Denver, CO 80211	84-0783694	501(c)(3)	28,350				Grants		
El Centro de Srv Soc Inc 2800 Pearl Ave Lorain, OH 44055	34-1165756	501(c)(3)	27,750				Grants		
InCharge Debt Solutions 5750 Major Blvd Ste 175 Orlando,FL 32819	33-0770440	501(c)(3)	25,615				Grants		

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Eastmont Cmty Ctr701 Hoefner Ave Los Angeles, CA 90022	95-6221642	501(c)(3)	24,500				Grants		
La Clinica del Pueblo Inc 2831 15th St NW Washington, DC 20009	52-1942551	501(c)(3)	24,500				Grants		
Cuban American Nat'l Coun 1223 SW 4 St Miami,FL 33135	23-7269955	501(c)(3)	24,250				Grants		

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Housing America Corp2515 Kingman Ave Kingman, AZ 864014843	86-0315599	501(c)(3)	22,582				Grants			
Spanish American Committee4407 Lorain Ave Cleveland,OH 44113	34-1088559	501(c)(3)	22,050				Grants			
Coal of FLA Farmworker Org PO Box 603 Immokalee,FL 34143	65-0641010	501(c)(3)	22,000				Grants			

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Ohio Hispanic Coalition616 Busche Blvd Ste 311 Columbus,OH 43229	31-1477946	501(c)(3)	22,000				Grants		
Para Los Ninos Chtr Schl500 Lucas Ave Los Angeles,CA 90017	95-3443279	501(c)(3)	22,000				Grants		
Univ of Cal Student Assoc 385 Grand Ave Ste 302 Oakland, CA 94610	94-2911063	501(c)(3)	20,000				Grants		

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Camino Nuevo Chtr Acad 3435 W Temple St Los Angeles, CA 90026	95-4771789	501(c)(3)	19,500				Grants		
Goal Academy107 W 11th St Pueblo,CO 81003	27-1151001	501(c)(3)	19,500				Grants		
Avenida Guadalupe Assoc Inc1313 Guadalupe St San Antonio,TX 78207	74-2148804	501(c)(3)	18,501				Grants		

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East Los Angeles Cmty Corp 530 S Boyle Ave Los Angeles, CA 90033	95-4531076	501(c)(3)	18,215				Grants			
Sac Home Ln Counseling Ctr 1800 Tribute Rd Sacramento, CA 95815	68-0257422	501(c)(3)	18,060				Grants			
Asoc Puerto en Marcha Inc 4301 Rising Sun Ave Philadelphia, PA 19140	23-1930630	501(c)(3)	17,695				Grants			

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Hispanic AAC for Car Enhance330 S Wells Ste 1104 Chicago,IL 60606	36-3193236	501(c)(3)	17,000				Grants		
Mary's Ctr for Maternal2333 Ontario Rd NW Washington, DC 20009	52-1594116	501(c)(3)	17,000				Grants		
Gwinnett Housing Res Partner40 Tech Pkwy S 180 Norcross,GA 30092	58-2055819	501(c)(3)	16,864				Grants		

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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		
Self Help EnterprisesPO Box 6520 Visalia, CA 93290	94-1592676	501(c)(3)	16,135				Grants		
Latino Policy Forum180 N Michigan Av 1250 Chicago, IL 60601	36-3676873	501(c)(3)	15,900				Grants		
Academia Avance Chtr Schl 115 N Ave 53 Los Angeles, CA 90042	20-3082187	501(c)(3)	15,500				Grants		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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		
Mex Amer Opportunity Found 401 N Garfield Ave Montebello, CA 90640	95-2594166	501(c)(3)	15,500				Grants		
La Fuerza Unida Inc14 Glen St Ste 305 Glen Cove,NY 11542	11-2528786	501(c)(3)	15,273				Grants		
Southwest Improvement Coun1000 S Lowell Blvd Denver, CO 80219	74-2510477	501(c)(3)	15,000				Grants		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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				
Lawrence Cmty Works Inc 168 Newbury St Lawrence, MA 018413910	04-2982308	501(c)(3)	14,800				Grants				
Center for Latino Progress95 Park St 2nd Fl Hartford, CT 06106	06-1385027	501(c)(3)	14,500				Grants				
Centro Hispano Inc810 W Badger Rd Madison, WI 537132527	93-0844812	501(c)(3)	14,500				Grants				

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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				
Tiburcio Vasquez Health Ctr 33255 Ninth St Union City, CA 94587	23-7118361	501(c)(3)	14,500				Grants				
Youth Development Inc6301 Central NW Albuquerque, NM 87105	85-0246036	501(c)(3)	14,500				Grants				
Cath Charit of Arch of Chi 721 N LaSalle Chicago, IL 60654	36-2170821	501(c)(3)	14,200				Grants				

Form 990,Schedule I, Par	rt II, Grants ar	nd Other Assistance	e to Domestic Org	anizations and Do	mestic Governmer	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Visionary Home Builders315 N San Joaquin St Stockton, CA 95202	68-0062062	501(c)(3)	12,816				Grants
Idaho Cmty Action Netwok 3450 Hill Rd Boise,ID 83703	82-0357348	501(c)(3)	12,500				Grants
Bert Corona Chtr Schl9400 Remick Ave Arleta, CA 91331	20-0407224	501(c)(3)	12,000				Grants

Form 990,Schedule I, Par	rt II, Grants ar	nd Other Assistanc	e to Domestic Org	anizations and Do	mestic Governmer	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mon Oscar Romero Chtr Schl 634 S Spring St Los Angeles, CA 90014	20-3812146	501(c)(3)	12,000				Grants
Detroit Hispanic Dev't Corp 1211 Trumbull St Detroit, MI 482161940	38-3355698	501(c)(3)	10,000				Grants
Erie Neighborhood House 1701 W Superior St Chicago, IL 60622	36-3043253	501(c)(3)	10,000				Grants

Form 990,Schedule I, Par	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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			
Esperanza Inc3104 W 25th St 4th Cleveland,OH 44109	34-1403492	501(c)(3)	10,000				Grants			
Guadalupe Centers1015 Ave Cesar E Chav Kansas Ct, MO 64108	44-0610781	501(c)(3)	10,000				Grants			
Lighthouse Cmty Chtr Schl 444 Hegenberger Rd Oakland, CA 94621	94-3370410	501(c)(3)	10,000				Grants			

Form 990,Schedule I, Par	t II, Grants an	d Other Assistance	≥ to Domestic Org	anizations and Do	mestic Governmer	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Spanish Speak Citizen's Found1470 Fruitvale Ave Oakland,CA 94601	94-1628221	501(c)(3)	10,000				Grants
ConnectFamilias Inc1111 SW 8th St Ste 207 Miami,FL 33130	37-1646586	501(c)(3)	9,500				Grants
ConXion to Cmty749 Story Rd Ste 10 San Jose,CA 95122	94-2400381	501(c)(3)	9,500				Grants

Form 990,Schedule I, Pa	<u>rt II, Grants ar</u>	<u>nd Other Assistance</u>	to Domestic Org:	anizations and Do	mestic Governmer	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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							
El Centro Hispano Inc600 E Main St Ste 100 Durham, NC 27701	56-2011661	501(c)(3)	9,500				Grants							
George I Sanchez Chtr Schl 6001 Gulf Fwy Bldg E Houston,TX 77023	74-1696961	501(c)(3)	7,500				Grants							
Mı Casa Resource Ctr360 Acoma St Denver, CO 80223	84-0867773	501(c)(3)	7,500				Grants							

DLN: 93493222011246

OMB No 1545-0047

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Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

7

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization NATIONAL COUNCIL OF LA RAZA INC **Employer identification number**

86-0212873 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee $\overline{\mathbf{v}}$ Written employment contract Independent compensation consultant 굣 Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo Any related organization? If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Nο If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

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

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

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns (B)(1)-(D)	(F) Compensation in	
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits		column(B) reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2014

Part III Supplemental Information

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

T

Return Reference Explanation

Schedule J (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 86-0212873

Name: NATIONAL COUNCIL OF LA RAZA INC

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

(A) Name and Title	(B) Breakdown o (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
Janet Murguia, President & CEO	(I) 423,105 (II) 40,571		2,420	15,969 1,531	18,147 1,740		
Charles Kamasakı, Senior Advisor	(I) 135,632 (II) 0	0 0	3,132	10,253 0	20,737 0	169,754 0	0
Holly Blanchard, Chief Financial Officer	(I) 180,109 (II) 50,652		1,826 514	13,132 3,693	7,343 2,065		0
Sonia Perez, Senior VP	(I) 203,100 (II) 0	0 0	2,652	15,114 0	24,454 0	245,320 0	0
Delia Pompa, Senior VP	(I) 217,431 (II) 0	0 0	3,684	15,611 0	10,702 0	247,428 0	0
Eric Rodriguez, VP	(I) 161,016 (II) 0	0 0	2,340	11,983 0	21,195 0	196,534 0	0
Delia De La Vara, VP	(I) 148,524 (II) 0	0 0	2,340	10,673 0	8,971 0	170,508 0	0
Darcy Eischens, Dir - ORAL	(I) 135,848 (II) 0	0 0	3,132	9,761 0	8,788 0	157,529 0	0
Johanna Greene, Controller	(I) 134,754 (II) 0	0 0	2,340	10,047	13,960 0	161,101 0	0
Margaret McLeod, Deputy VP	(I) 133,473 (II) 0	0 0	3,132	4,143 0	9,630 0	150,378 0	0
Lautaro Diaz, VP	(I) 132,128 (II) 0	0 0	3,132	9,794 0	16,177 0	161,231	0

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

Open to Public Inspection

Name of the o	rganization CIL OF LA RAZA INC						I	Employ	er ident	ificatio	n numbe	er
NATIONAL COOK	CIE OF BARAZA INC							36-02	12873			
	ess Benefit 1											
	plete if the orgai											
1 (a) Nan	ne of disqualified	person (b)		hıp between and organız	disqualified	(c) Desc	ription	of tra	nsaction		(d) Cor	
			person	and organiz	ation						Yes	No
4958. 3 Enter the Part II Loans to a Complete if the	amount of tax in amount of tax, if nd/or From ne organization a mount on Form 9	interested Finswered "Yes"	above, re Persons on Form 9		the organizati	on	 	· ·	* \$		anızatıoı	
(a) Name of interested person	(b) Relationsh with organizati	' ' '	(d) Loa or from organiza	the	(e)Original principal amount	(f) Balance due	(g) defa		(h) Approved by board or committee?		(i)Written agreement?	
			То	From			Yes	No	Yes	No	Yes	No
		organization a o) Relationship l terested person	nswered between and the	"Yes" on		· ·		sistand	e (e)) Purpo	se of ass	sistance
		organizatio	'11									

(1) NCLRAF see Part V

Part IV Business Transactions I	rt IV Business Transactions Involving Interested Persons.							
Complete if the organization	n answered "Yes" on F	Form 990, Part IV, lin	e 28a, 28b, or 28c.					
(a) Name of interested person	(b) Relationship	(c) Amount of	(d) Description of tra					
	between interested	transaction						

(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	: :atıon's	
			Yes	No	
see Part V	79 217	see Part V		Nο	

Part V Supplemental Infor	Part V Supplemental Information					
Provide additional information for responses to questions on Schedule L (see instructions)						
Return Reference	Return Reference Explanation					
transactions involving interested	(a) Name of interested person National Council of La Raza Action Fund (b) Relationship between interested person and the organization Entity with common Officer, director or trustee (2) (d)					
persons	Description of transaction Reimbursement paid by related organization for expenses (e.g. salaries,					

fringe benefits, related indirect costs, etc)

Schedule L (Form 990 or 990-EZ) 2014

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DLN: 93493222011246

OMB No 1545-0047

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization
NATIONAL COUNCIL OF LA RAZA INC

Employer identification number

86-0212873

Return Reference	Explanation
Form 990, Part III, Line 4d, - Workforce Development	The Workforce Development (WFD) component seeks to ensure the Latino community's ability to contribute to and share in the nation's economic opportunities. Working in partnership with NCLR's Affiliates, local and state governments, training and education providers, businesses, and other strategic partners, WFD builds programs that bridge Latino workers' education and skill gaps and that prepare them for lifelong career advancement. The Lideres Initiative is a national program designed to maximize opportunities for Latino youth that will elevate their influence as leaders in the United States. Our goal is to raise up new leaders - corporate executives, public officials, activists, and organizers - who will serve their communities and promote social justice at the local and national levels. The Affiliate Member Services (AMS) component collaborates with NCLR's program and policy staff to facilitate relationships between NCLR and its national network of Affiliates by supporting and complementing their on-the-ground efforts to improve opportunities for Hispanic Americans. To increase the effectiveness of the NCLR-Affiliate partnership, AMS has developed several categories for those Affiliates who engage more deeply with NCLR in specific areas of work. Advocacy Partners, Program Partners, Institutional Partners, and Next Generation Partners in addition, an important part of AMS's national and regional effort is the NCLR Affiliate Council - a 12-member advisory body of Affiliate executive directors fromsix regions of the country which represents and serves as a voice for our partnership, providing input on programmatic priorities of the Latino community, the public positions of NCLR, and the most effective ways to strengthen regional networks and promote the work of Affiliates. Expenses \$ 5,001,501. Including grants of \$ 1,750,856. Revenue \$ 233,222.

Return Reference	Explanation
Form 990, Part III, Line 4d, - Legislative Advocacy and Mission	NCLR's Legislative Advocacy and Mission Components is dedicated to improve opportunities and open doors for Hispanic Americans. NCLR believes that advocacy, civic engagement, and community-based support are essential parts of any community-empowerment strategy. Thus, the organization concentrates on advocacy activities at state and local levels through its initiatives. In addition, they help strengthen Latino participation in the political process through various civic engagement projects. Expenses \$ 1,793,380. including grants of \$ 0. Revenue \$ 5,000.

Return Reference	Explanation
Form 990, Part III, Line 4d, - Education Programs	NCLR's Education component is dedicated to increasing educational opportunities, improving achievement, and promoting equity in outcomes for Latinos throughout the educational pipeline, from early childhood through K-12 education. In keeping with this mission, efforts focus on building the capacity and strengthening the quality of the community-based education sector and informing the broader public education system. Expenses \$ 3,690,596. Including grants of \$ 938,450. Revenue \$ 15,500.

Return Reference	Explanation
Form 990, Part III, Line 4d, - Institute for Hispanic Health Program	The Institute for Hispanic Health (IHH) promotes the health and well-being of Hispanic Americans by reducing the incidence, burden, and impact of health problems in the Hispanic community, so that every Hispanic American has the opportunity and ability to achieve good health and a high quality of life. IHH develops programs in the areas of nutrition and physical activity, chronic disease prevention and management, maternal health, emergency preparedness, and genomics and genetics. Expenses \$ 2,523,904. Including grants of \$ 1,334,500. Revenue \$ 0. Form 990, Part III, Line 4d, - Admin Expenses \$ 0. Including grants of \$ 0. Revenue \$ 2,407.

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	The return is prepared by the organization's public accounting firm, BDO USA, and is reviewed by the organization's Chief Financial Officer and other key executives. The Board reviews and accepts the Form 990 prior to filing with the IRS.

Return Reference	Explanation
	The Conflict of Interest policy is distributed annually by the Board Liaison to Board Members. All are asked to sign and return a statement identifying any conflicting interests. Conflicts are reviewed by the Secretary, who recommends action, if any

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	The Compensation Committee is charged with oversight for determining the adequacy and reasonableness of the compensation and benefits paid to the chief executive. Within this process, the Committee conducts an annual performance evaluation and includes a chief executive compensation analysis study. In carrying out its responsibilities, the committee may rely upon reasoned written opinions of legal counsel and of qualified legal, accounting, compensation, and valuation experts Legal counsel may be in-house or independent.

Return Reference	Explanation
Form 990, Part VI, Section C, Line 19	The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request. The conflict of interest policy is also available under the organization's intranet and there is a summary of the financial statements published in its annual report.

Return Reference	Return Reference Explanation	
•	Additional Information on Average Hours Per Week. The hours shown in Form 990, Part VII, for compensated employees represent the hours recorded in our payroll system. The actual hours worked by the compensated individuals are significantly higher than those shown in Part VII.	

Return Reference	Explanation
Form 990, Part XII, Line 2c	Oversight of audit There have been no changes during the year in the process for oversight of the audit of the financial statements

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION CONTRACT SERVICES TOTAL FEES 1463195

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION CONSULTANTS TOTAL FEES 2717771

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION OTHER TOTAL FEES 569708

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DLN: 93493222011246

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

Name of the organization NATIONAL COUNCIL OF LA RAZA INC **Employer identification number**

86-0212873

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

	3		,	,	
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Raza Community Ventures LLC 1 E WASHINGTON ST 2250 PHOENIX, AZ 85004 52-1954196	see VII	DE	0	3,244,643	RDF

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))	(f) Direct controlling entity		
						Yes	No
(1) Raza Development Fund(RDF) 1 E Washington St 2250 Phoenix, AZ 85004 52-1954196	see VII	DC	501(c)(3)	Line 11a	NCLR		No
(2) Strategic Investment Fund (see VII) 1126 16th St NW	see VII	DE	501(c)(3)	Line 11a	NCLR		No
Washington, DC 20036 52-2268398							

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

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

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

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

circuare					'	age J
Part \	Transactions With Related Organizations Complete if the organization answ	ered "Yes" on Form	n 990, Part IV, lind	e 34, 35b, or 36.		
No	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Ye	s No
1 Durin	g the tax year, did the orgranization engage in any of the following transactions with one or more re	lated organizations li	sted in Parts II-IV?			
a Re	ceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
b Gr	t, grant, or capital contribution to related organization(s)			16	Ye	5
c Gif	t, grant, or capital contribution from related organization(s)			10	Ye	5
d Lo	ans or loan guarantees to or for related organization(s)			10		No
e Lo	ans or loan guarantees by related organization(s)			16	:	No
f Div	idends from related organization(s)			1f		
g Sa	e of assets to related organization(s)			19		No
h Pu	rchase of assets from related organization(s)			1h		No
i Exc	hange of assets with related organization(s)			1 i		No
j Lea	se of facilities, equipment, or other assets to related organization(s)			1j		No
k Le	ase of facilities, equipment, or other assets from related organization(s)			1k	:	No
l Per	formance of services or membership or fundraising solicitations for related organization(s)			11		No
m Per	formance of services or membership or fundraising solicitations by related organization(s)			1n	n	No
n Sha	ring of facilities, equipment, mailing lists, or other assets with related organization(s)			11	ı Ye	5
o Sh	aring of paid employees with related organization(s)			10		No
p Re	imbursement paid to related organization(s) for expenses			1 _p	,	No
q Re	mbursement paid by related organization(s) for expenses			19	Ye	s
				4		
	ner transfer of cash or property to related organization(s)			1r		No
s Ot	ner transfer of cash or property from related organization(s)			1s		No
2 If t	he answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds		
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	ınvolv	ed
		I	l			

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

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

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

Part VII Supplemental Information

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

Return Reference	Explanation
form 990, Schedule R, Part I, Identification of Disregarded Entities	RAZA COMMUNITY VENTURES, LLC PRIMARY ACTIVITY LENDING CAPITAL TO CHARTER SCHOOL REAL ESTATE TRANSACTIONS
·	RAZA DEVELOPMENT FUND (RDF) PRIMARY ACTIVITY SUPPORT ORGANIZATION TO NCLR STRATEGIC INVESTMENT FUND FOR LA RAZA, INC (SIFLR) PRIMARY ACTIVITY SUPPORTS CHARITABLE AND EDUCATIONAL ACTIVITIES FOR NCLR

Schedule R (Form 990) 2014