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EXTENDED TO SEPTEMBER 15, 2016

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

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

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

<u>A I</u>	For the	$= 2014$ calendar year, or tax year beginning $NOV \perp$, 2014 and 0	ending (2015	
В	Check if applicabl	C Name of organization		D Employer identifi	cation number
	Addre:	FRIENDS OF FALUN GONG INC.		_	
	Name chang	Doing business as		13-4	145670
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r
	Final return	24 W. RAILROAD AVE. PMB 124		(201) 568-2620
	termin ated			G Gross receipts \$	2,687,066.
	Amend	TENAFLY, NJ 07670		H(a) Is this a group re	eturn
	Application	F Name and address of principal officer. ALAN APPER	<u> </u>	for subordinates	? Yes X No
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
T	Tax·ex	empt status X 501(c)(3)	or 527	If "No," attach a	list (see instructions)
J	Websit	te: N/A		H(c) Group exemptio	n number
K	Form of	organization: X Corporation	L Year	of formation: 2000	A State of legal domicile: NY
	art I	Summary			
- do	1	Briefly describe the organization's mission or most significant activities TO HI	EIGHTE	N THE PUBLI	C
Activities & Governance		AWARERNESS AS TO THE PERSECUTION BY THE (CHINES	SE COMMUNIST	PARTY
rna	2	Check this box if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as	ssets.
o Ve	3	Number of voting members of the governing body (Part VI, line 1a)		3	3
ڻ مح	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	3
es 2	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	0
ξ	6	Total number of volunteers (estimate if necessary)		6	0
(cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)		3,104,802.	2,658,507.
Ĭ.	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,060.	232.
Œ	111	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and the		83.	-4,783.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, countre (A), line 12)		3,105,945.	2,653,956.
	13	Grants and similar amounts paid (Part IX, column (A), linesٍ، ا[-3]	1921	1,508,532.	1,381,461.
	14	Benefits paid to or for members (Part IX, column (A), line SEP 1 9 2016		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	Ý -	0.	0.
ğ	b	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>		<u> </u>
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,288,905.	1,474,322.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,797,437.	<u>2,855,783.</u>
	19	Revenue less expenses. Subtract line 18 from line 12		308,508.	<u>-201,827.</u>
Net Assets or	2		Be	ginning of Current Year	End of Year
Set	20	Total assets (Part X, line 16)		1,280,437.	1,149,053.
A Pu	21	Total liabilities (Part X, line 26)		<u> </u>	70,443.
칕	22	Net assets or fund balances Subtract line 21 from line 20		1,280,437.	<u>1,078,610.</u>
	art II	Signature Block		<u>-</u>	
	•	lities of perjury, I declare that I have examined this return, including accompanying schedule:			y knowledge and belief, it is
true	e, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich prepare	r has any knowledge.	
		Signature of officer		1 1 1 S	///
Sig		, · · · · ·		Date	
He	re	ALAN ADLER, DIRECTOR Type or print name and title		-	
				Date / Check	PTIN
D-'	٠	Print/Type preparer's name Preparer's signature	N 344	4/1/11	
Pai		WARREN L. KOLB	M	7/// self-employ	
	parer	Firm's name J. L. HOCHBERG LLC		Firm's EIN	35-2320221
USE	Only	Firm's address > 900 MAIN STREET		Dh / 2	01 \ 242 0169
_		HACKENSACK, NJ 07601		Phone no. (2	
		RS discuss this return with the preparer shown above? (see instructions)			
432	001 11-0	₉₇₋₁₄ LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2014)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

the prior Form 990 or 990-EZ? 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? If "Yes," describe these changes on Schedule O	
Briefly describe the organization's mission. TO HEIGHTEN THE PUBLIC AWARENESS AS TO THE PERSECUTION BY THE CHINESE COMMUNIST PARTY COMMITED AGAINST FOLLOWERS OF FALUN GONG Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experi	•
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4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exper	Yes X No
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exper	
•	
revenue. Il anv. for each program service reported	nses, and
1 462 024	<u> </u>
4a (Code) (Expenses \$	FSS OF
THE OPPRESSION AND PERSECUTION OF FOLLOWERS OF THE SPIRITUAL PRA	
FALUN GONG BEING COMMITTED BY THE CHINESE COMMUNIST PARTY	CII CD
	_
615 000	
4b (Code) (Expenses \$ 615,000. Including grants of \$ 615,000.) (Revenue \$	
DRAGON SPRINGS BUDDHIST INC - SUPPORT NON PROFIT RELIGION, SPIRI	TUAL
DEVELOPEMENT.	
4c (Code) (Expenses \$600,000. Including grants of \$600,000. (Revenue \$)
FEI TIAN ACADEMY OF ARTS -SUPPORT EDUCATIONAL INSTITUTION B25	
(SECONDARY/HIGH SCHOOL)	
	
	· · · · · · · · · · · · · · · · · · ·
4d Other program services (Describe in Schedule O)	
(Expenses \$ 166,461. including grants of \$ 166,461.) (Revenue \$	
4e Total program service expenses ▶ 2,844,695.	
	orm 990 (2014)

Porm 990 (2014) FRIENDS OF F Part IV Checklist of Required Schedules

 Is the organization required to complete Schedule B, Schedule of Contributors? 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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect 	3 4	X	X
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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		<u>X</u>
during the tax year? If "Yes," complete Schedule C, Part II			
5 Is the organization a section 501(c)(4) 501(c)(5) or 501(c)(6) organization that receives membership dues assessments or	5		_X_
	5		
similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III			_X_
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space,	ı		
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	В		_X_
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	9		_ <u>X</u> _
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	0		<u> </u>
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			
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		ĺ	
	1a		<u> </u>
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
r de la companya de	1b		<u>X</u>
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	1c		<u> </u>
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			
	1d		<u>X</u> _
	1e		<u> </u>
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
	1f		<u>X</u>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	_		v
Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year?	2a		<u> </u>
	2b		х
	3		X
	ta		X
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			
, , ,	4b	ł	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	-		
	5	1	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	_		
	6	ł	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		$\neg \neg$	
	7		<u>X</u>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	\dashv		
	8		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	\neg		
	9		<u>x</u>
· · · · · · · · · · · · · · · · · · ·)a		X
	Ъ		
	orm \$	990 (2014)

Pa	t IV Checklist of Required Schedules (continued)			<u> </u>
			Yes	No
- 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		1	
	Schedule K. If "No", go to line 25a	24a		Х
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	1	X
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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			l
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			ĺ
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			l
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		_X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			l
	contributions? If "Yes," complete Schedule M	30		X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			İ
	If "Yes," complete Schedule N, Part I	31_		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		_X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			ı
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			ı
	If "Yes," complete Schedule R, Part V, line 2	36		<u> X</u>
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	L	<u> </u>
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	1 20	v	

Form **990** (2014)

rai	Check if Schedule O contains a response or note to any line in this Part V			\Box
	Check in Contraction of Contraction of Proceedings in Contraction of Proceedings in Contraction of Contraction		Yes	No
12	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 29		res	NO
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	ı İ		
·	(gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		_42	
	filed for the calendar year ending with or within the year covered by this return 2a 0			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	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		х
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		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	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		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d]		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			l
	sponsoring organization have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.			l
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	-	
10	Section 501(c)(7) organizations. Enter		i	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			
11	Section 501(c)(12) organizations. Enter	- 1		
a	Gross income from members or shareholders 11a			
þ	Gross income from other sources (Do not net amounts due or paid to other sources against			
40	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	\dashv	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 2	- 1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		-	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans Enter the amount of reserves on hand			
C	Enter the amount of reserves on hand Did the engage ration receive any payments for indeer tapping convices during the tay year?	44		- V
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a	-	<u> </u>
D	in Tes, Tias it filed a Form 720 to report these payments: If 190, provide all explanation in schedule O	14b	agn /	(004.4)

	990 (2014) FRIENDS OF FALUN GONG INC. 13-414!			<u>age 6</u>
Par	tVI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	i "No" r	espon	ise
				[TE]
Soot	Check if Schedule O contains a response or note to any line in this Part VI			X
Seci	ion A. Governing Body and Management			Γ
10	Enter the number of voting members of the governing body at the end of the tax year	3	Yes	No
	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	4		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
		3		1
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	4		
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	ļ
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		<u> </u>
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	37	-
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	<u> </u>
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	40	v	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Δ_	-
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	40-		v
13	Did the organization have a written whistleblower policy?	12c		X
14	Did the organization have a written document retention and destruction policy?	14		X
	Did the process for determining compensation of the following persons include a review and approval by independent	14		
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		x
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100		1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
_	taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			_
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			ľ
	exempt status with respect to such arrangements?	16b		İ
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶NY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website X Another's website X Upon request Other (explain in Schedule O)			

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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: ► TAXPAYER - (201) 568-2620

14 W. RAILROAD AVE. PMB 124, TENAFLY, NJ 07670

Form **990** (2014)

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FRIENDS OF FALUN GONG INC.

13-4145670

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

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

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

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

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

(A)	(B)			(()			(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than			than	one	Reportable	Reportable	Estimated
	hours per	box, unless person is both an officer and a director/trustee)		nours per box, a		box, unless person is both an		compensation	compensation	amount of
	week		, Ci &		Cotto	7,4,43	100,	from the	from related organizations	other
	(list any hours for	direct				Ļ		organization	(W-2/1099-MISC)	compensation from the
	related	90	stee			sate		(W-2/1099-MISC)	(***271033*141100)	organization
	organizations	trast	al trus		yee	mpe		(11 2) 1000 111100)		and related
	below	ga l	ution	<u></u>	oldm	stco	₅₅	n		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Form			
(1) DR. TERRI MARSH	0.00									
DIRECTOR		Х						0.	0.	0
(2) ALAN ADLER	0.00	_								_
DIRECTOR	0.00	Х				ļ	ļ	0.	0.	0
(3) PAULINA WERTHER	0.00	x						0.	0.	•
DIRECTOR		Λ		-		-		0.		0
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		<u> </u>	<u> </u>							

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\$100,000 of compensation from the organization

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

Form 990 (2014)

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	nlete all columns. All oth	er organizations must on	molete column (A)	
0001	Check if Schedule O contains a respon			impiete column (A).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,381,461.	1,381,461.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
9	section 401(k) and 403(b) employer contributions) Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
''	Management				
b	Legal				
c	Accounting	2,500.		2,500.	
d					
e	Professional fundraising services. See Part IV, line 17				-
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	201,537.	201,537.		
13	Office expenses	5,759.		5,759.	
14	Information technology				<u> </u>
15	Royalties				
16	Occupancy	42,719.	42,719.		
17	Travel	29,381.	28,910.	471.	·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	7.060	7.000		
19	Conferences, conventions, and meetings	7,069.	7,069.		
20	Interest Payments to affiliates				<u></u>
21 22	Depreciation, depletion, and amortization				
23	Insurance	2,165.		2,165.	
24 24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line	2,103.		2,103.	-
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а		1,182,999.	1,182,999.	•	
b	BANK SERVICE CHARGES	118.		118.	
C		75.		75.	
d					
e		2 055 702	2 944 605	11 000	
<u>25</u>	Total functional expenses. Add lines 1 through 24e	2,855,783.	2,844,695.	11,088.	0.
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 Add to the transport of the control of t				

13-41451

Par	tΧ	Balance Sheet	_		
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	56,462.	1	47,055.
	2	Savings and temporary cash investments	992,330.	2	877,361.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	153,000.	4	90,443.
	5	Loans and other receivables from current and former officers, directors,		-	
		trustees, key employees, and highest compensated employees Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under	· · · · · · · ·		·······
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
s		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	35,873.	8	64,177.
	9	Prepaid expenses and deferred charges	42,772.	9	60,173.
		Land, buildings, and equipment cost or other	···		
		basis. Complete Part VI of Schedule D			
	Ь	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	9,844.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,280,437.	16	1,149,053.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Ø	22	Loans and other payables to current and former officers, directors, trustees,			
iţie		key employees, highest compensated employees, and disqualified persons.			
Liabilities	Ì	Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	70,443.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	70,443.
		Organizations that follow SFAS 117 (ASC 958), check here ▶			
es S		complete lines 27 through 29, and lines 33 and 34.			
SE.	27	Unrestricted net assets		27	
3ak	28	Temporarily restricted net assets		28	· · · · · · · · · · · · · · · · · · ·
Ē	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ X			
þ	1	and complete lines 30 through 34.	_		_
ëets	30	Capital stock or trust principal, or current funds	0.		0.
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	1,280,437.	_	1,078,610.
Z	33	Total net assets or fund balances	1,280,437.		1,078,610.
	34	Total liabilities and net assets/fund balances	1,280,437.	34	1,149,053.

	990 (2014) FRIENDS OF FALUN GONG INC.	13-	4145670	Pag	ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,653	3,9	<u>56.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	_2	2,855	7	83.
3	Revenue less expenses. Subtract line 2 from line 1	3	-201	. , 8	27.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,280	, 4	37 .
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,		_		
	column (B))	10	1,078	3,6	10.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			- 1	
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	·			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Aud	Int		
	Act and OMB Circular A-133?		3a		_ <u>X</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	lit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (2014)

- SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

van	ne of	the organization							identification number
				<u>UN GONG INC.</u>					<u>3-4145670 </u>
Pa	rt I	Reason for Public (Charity Status (A	All organizations must co	mplete th	is part) Se	e instructions		
Πhe	orgar	ızatıon ıs not a prıvate found	ation because it is: (For lines 1 through 11, c	heck only	one box)			
1	\sqsubseteq	A church, convention of chi	urches, or association	on of churches described	d in sectio	n 170(b)(1)(A)(i).		
2		A school described in secti	on 170(b)(1)(A)(ii). (Attach Schedule E)					
3	\square	A hospital or a cooperative	hospital service orga	anızatıon described in s e	ection 170	(b)(1)(A)(ii	i).		
4		A medical research organization	ation operated in co	njunction with a hospital	described	ın sectio	n 170(b)(1)(A)	(iii). Enter	the hospital's name,
		city, and state	_						
5		An organization operated for	or the benefit of a co	llege or university owner	d or operat	ted by a go	overnmental u	nıt describ	ed in
		section 170(b)(1)(A)(iv). (C	omplete Part II)						
6		A federal, state, or local gov	ernment or govern <mark>n</mark>	nental unit described in :	section 17	⁷ 0(b)(1)(A)	(v).		
7		An organization that normal	lly receives a substa	intial part of its support f	rom a gov	ernmental	unit or from th	ne general	public described in
		section 170(b)(1)(A)(vi). (Co	omplete Part II)						
8		A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Part	t II)				
9	\mathbf{x}	An organization that normal	lly receives (1) more	than 33 1/3% of its sup	port from	contribution	ons, members	hip fees, a	nd gross receipts from
		activities related to its exem	npt functions - subjec	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of	ts support	from gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) from	om busine	sses acqu	red by the or	ganization	after June 30, 1975
		See section 509(a)(2). (Cor	nplete Part III)						
10	Щ	An organization organized a	and operated exclus	ively to test for public sa	fety See :	section 50	9(a)(4).		
11		An organization organized a	and operated exclus	ively for the benefit of, to	perform t	the functio	ns of, or to ca	rry out the	purposes of one or
		more publicly supported or	ganızatıons describe	ed in section 509(a)(1) o	r section :	509(a)(2)	See section 5	09(a)(3). C	Check the box in
	_	_ines 11a through 11d that	describes the type o	of supporting organizatio	n and com	iplete lines	11e, 11f, and	l 11g	
а	L_	Type I. A supporting orga	ınızatıon operated, s	supervised, or controlled	by its sup	ported org	janization(s), t	ypically by	giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority o	of the direc	ctors or truste	es of the s	upporting
		organization. You must c	•						
b	· L.	☐ Type II. A supporting organization.	•				•		•
		control or management o	., .		ame perso	ons that co	introl or mana	ge the sup	ported
	_	organization(s) You mus	•						
C	:	☐ Type III functionally inte	•					ly integrate	ed with,
		its supported organization							
d	I L	☐ Type III non-functionally						_	• •
		that is not functionally int	•	• ,	•		•	an attent	iveness
	_	requirement (see instruct							
е	• ∟	☐ Check this box if the orga					Type I, Type	II, Type III	
		functionally integrated, or	• •	nally integrated support	ing organi	zation			
f		er the number of supported o	•	- d (-)					
9		vide the following information (i) Name of supported	(ii) EIN	(iii) Type of organization	(ıv) Is the o	rganization	(v) Amount of	monetary	(vi) Amount of
		organization	, ,	(described on lines 1-9	listed i	n vour	support	•	other support (see
				above or IRC section	Yes	No	Instructi	ons)	Instructions)
				(see instructions))	100				·
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						<u> </u>			
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LHA For Paperwork Reduction Act Notice, see the Instructions for

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

13

Schedule A (Form 990 or 990-EZ) 2014

Cabadula	A /Farm	000 0-	000 EZ\ 004 4	
Schedule	A (Norm	990 or	990-E7) 2014	ļ.

	art II Support Schedule for	Organizations	Described in	Sections 170	(h)(1)(Δ)(iv) an	d 170/b)/1)/A)/	yi) Page 2
	(Complete only if you checke						
	fails to qualify under the tests				on railed to quality	didei i ait iii. Ii ti	ie organization
Sa	ction A. Public Support			····,			
		(-) 2010	(b) 2011	(=) 2012	(4) 2012	(-) 0014	(O Total
	endar year (or fiscal year beginning in) Gifts, grants, contributions, and	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
•	membership fees received (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-					-	
-	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
·	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						<u> </u>
5	The portion of total contributions						
_	by each person (other than a						
	governmental unit or publicly		ĺ				
	supported organization) included						
	on line 1 that exceeds 2% of the		Ì				
	amount shown on line 11,						
	column (f)	L					
6	Public support. Subtract line 5 from line 4						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties			1		1	
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital					İ	
	assets (Explain in Part VI)					 	
	Total support. Add lines 7 through 10	L	<u> </u>		L	-	<u> </u>
	Gross receipts from related activities,	•	•	6		12	
13	First five years. If the Form 990 is fo	-	s first, second, thi	ra, tourth, or titth t	ax year as a section	on 501(c)(3)	. ┌┐
Se	organization, check this box and stor		rcentage	 			
	Public support percentage for 2014 (column (fl)		14	%
15	Public support percentage from 2013			colariir (i))		15	%
	a 33 1/3% support test - 2014. If the	•	·	on line 13, and line	14 is 33 1/3% or		
	stop here. The organization qualifies	-					▶ □
	o 33 1/3% support test - 2013. If the		_		d line 15 is 33 1/39	% or more, check t	his box
	and stop here. The organization qua	•				o or more, emeant	▶□
17:	a 10% -facts-and-circumstances tes				e 13, 16a. or 16b.	and line 14 is 10%	or more.
•••	and if the organization meets the "fac	_	-				•
	meets the "facts-and-circumstances"						▶ □
ı	o 10% -facts-and-circumstances tes					17a, and line 15 is	10% or
	more, and if the organization meets t	_					
	organization meets the "facts-and-cire						

Schedule A (Form 990 or 990-EZ) 2014

13-41451

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

Schedule A (Form 990 or 990-EZ) 2014 FRIENDS OF FALUN GONG INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

qualify under the te		elow, please com	plete Part II)				
Section A. Public Suppo	ort						
Calendar year (or fiscal year begir	nning in) 🖊	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions	s, and						
membership fees received	(Do not						
ınclude any "unusual gran	ts ")		1294779.	178,283.	3104802.	2658507.	7236371.
2 Gross receipts from admiss merchandise sold or service formed, or facilities furnish any activity that is related organization's tax-exempt	ces per- led in to the						
3 Gross receipts from activit	ies that						
are not an unrelated trade iness under section 513	or bus-						
4 Tax revenues levied for the ization's benefit and either or expended on its behalf	· 1						
5 The value of services or far furnished by a government the organization without cl	tal unit to				_		
<u> </u>	· ·		1294779.	178,283.	3104902	2658507.	7236371.
6 Total. Add lines 1 through7a Amounts included on lines	1		1234113.	170,203.	_3104002.	2030307.	12303/1.
3 received from disqualifie	d persons						0.
b Amounts included on lines 2 and 3 from other than disqualified person exceed the greater of \$5,000 or 1% amount on line 13 for the year	s that					ļ	0.
c Add lines 7a and 7b							0.
8 Public support (Subtract line 7c	from line 6)						7236371.
Section B. Total Suppor							
Calendar year (or fiscal year begin	nning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	, ,	• •	1294779.	178,283.	3104802.	2658507.	7236371.
10a Gross income from interes dividends, payments recei securities loans, rents, roy and income from similar so	ved on alties						, = 0 0 0 7 2 0
b Unrelated business taxable ind (less section 511 taxes) from acquired after June 30, 1975							
c Add lines 10a and 10b 11 Net income from unrelated activities not included in lii whether or not the busines regularly carried on	ne 10b,						
or loss from the sale of cal assets (Explain in Part VI)	pital						
13 Total support. (Add lines 9, 10c,			1294779.	178,283.	3104802.	2658507.	7236371.
14 First five years. If the Form		the organization					
check this box and stop h	ere	_			•	.,,,	•
Section C. Computation	n of Publi	ic Support Pe	ercentage				
15 Public support percentage	for 2014 (I	ine 8, column (f) o	divided by line 13, c	olumn (f))	-	15	100.00 %
16 Public support percentage	from 2013	Schedule A, Par	t III, line 15				100.00 %
Section D. Computation							
17 Investment income percer	ntage for 20	14 (line 10c, colu	mn (f) divided by lin	e 13, column (f))		17	.00 %
18 Investment income percer						18	%
19a 33 1/3% support tests - 2	2014. If the	organization did	not check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1	
more than 33 1/3%, check b 33 1/3% support tests - 2							▶ X
line 18 is not more than 33		_			•	•	and
20 Private foundation. If the				·		•	
432023 09-17-14	- year nearlo	5.6 0					0 or 990-EZ) 2014

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 Organization	Section A.	All Supp	ortina O	rganizations	
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- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- 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.
- 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
- 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
- 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
- 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)? 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.
- 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).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- 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.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - 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.)

	Yes	No
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3c		
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9c		
10a		
10b		
990 or 99	M-F7	2014

	dule A (Form 990 or 990 EZ) 2014 FRIENDS OF FALUN GONG I			13-4145670 Page 6
Par				<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualifying			ructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E	
Secti	on 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		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
а	Average monthly value of securities	1a	· · · · ·	
b	Average monthly cash balances	1b	· -	
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d	 -	
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3	<u> </u>	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6_	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly-integrate	ed Type III supporting or	ganization (see
	instructions)		-	

Schedule A (Form 990 or 990-EZ) 2014

Sche	dule A (Form 990 or 990 EZ) 2014 FRIENDS OF FA	LUN GONG INC.		13-4145670 Page 7
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6_	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	е	
	(provide details in Part VI) See instructions.			
9_	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(iı)	(iii)
C4	ion E. Diotribution Allocations (one instructions)	Excess Distributions	Underdistributions	Distributable
Sect	ion E - Distribution Allocations (see instructions)		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014			
a				
b				
c				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i_	Carryover from 2009 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D,			
	line 7: \$			
a	Applied 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			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

nedule A (Fo	orm 990 or 990-EZ) 2014 FRIEN	IDS OF FA	<u>LUN GONG</u>	<u>INC.</u>	<u>13-41456</u>	70 Pag
art VI S	upplemental l	Information.	Provide the expla	nations required	by Part II, line 10,	Part II, line 17a or 17b, and Part III,	line 12
—,— Al	lso complete this p	part for any additi	ional information.	(See instruction	is)		
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432028 09-17-14

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

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

2014

OMB No 1545-0047

Open to Public Inspection

% ⊠ **Employer identification number** 13-4145670 (h) Purpose of grant or assistance Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) ö Ö ٥. ö Ö Ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed 46,000, (d) Amount of cash grant 000 3,782, 615,000 000 009 8,010 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable GONG INC Enter total number of other organizations listed in the line 1 table FRIENDS OF FALUN General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? #PH3G - LONG ISLAND CITY, NY 11377 1 (a) Name and address of organization EASTERN US BUDDHA'S STUDY FALUN DAFA ASSOC. - 4-74 48TH AVENUE DRAGON SPRINGS BUDDHIST INC. HUMAN RIGHTS LAW FOUNDATION GLOBAL CENTER FOR QUIT CCP CUDDEBACKVILLE, NY 12729 FEI TIAN ACADEMY PF ARTS CUDDEBACKVILLE, NY 12729 or government 1615 L STREET NW #1100 ASIAN ARTS FOUNDATION 140 GALLEY HILL ROAD 2059 CAMDEN AVE #293 140 GALLEY HILL ROAD WASHINGTON, DC 20036 Name of the organization SAN JOSE, CA 95124 FLUSHING NY 11354 40-48 MAIN STREET Partl Part a

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

Schedule I (Form 990) (2014)

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Schedule I (Form 990) FRIENDS OF FALUN GONG INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	OF FALUN Ger Assistance to Go	GONG INC.	nizations in the Ur	nited States (Sche	dule I (Form 990), Pa	1	3-4145670 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NJ FALUN DAFA BUDDHA'S STUDY ASSOCIATION - P.O. BOX 7175 - NEW YORK, NY 10150		,	1,310,	0			
CLASSICAL ARTS FOUNDATION 942 LINDEN AVENUE SO.SAN FRANCISCO, CA 94080	:		10,000.	0			
FALUN DAFA ASSOCIATION OF SAN FRANCISCO - 2978 BRIONA COURT - SAN JOSE, CA 95124	distribution of the state of th		468,	0			
. 64.			36,010,	0			
LUN PER:			3,000.	0.			
] 559			2,000.	0			
THE PEOPLES INC 20210 EMERALD CLIFF LANE RICHMOND, TX 77407		1		0			
WISCONSIN FALUN DAFA ASSOCIATION 6916 PARK RIDGE DRIVE MADISON, WI 53919			47,000,	0			
HE GENG 1145 MIRAMAR WAY #59 SUNNYVALE, CA 94086			3,601.	0			
							Schedule I (Form 990)

Schedule I (Form 990) (2014) (f) Description of non-cash assistance, (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant 27 (b) Number of recipients (a) Type of grant or assistance 432102 10-15-14

Page 2

13-4145670

Schedule I (Form 990) (2014) FRIENDS OF FALUN GONG INC.

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

FRIENDS OF FALUN GONG INC.

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

▶ Attach to Form 990 or 990-EZ. Department of the Treasury Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** FRIENDS OF FALUN GONG INC. 13-4145670 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: COMMITTED AGAINST FOLLOWERS OF FALUN GONG. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: HUMAN RIGHTS LAW FOUNDATION-DONATION INCLUDING GRANTS OF \$ 3,000. EXPENSES \$ 3,000. REVENUE \$ 0. GLOBAL CENTER FOR QUIT CCP- ADVOCATER TO ASSIST INDIVIDUALS WHO WANT TO QUIT THE CHINESE COMMUNIST PARTY AND END PERSECUTION OF FALUN GONG **FOLLOWERS EXPENSES \$ 44,020.** INCLUDING GRANTS OF \$ 44,020. REVENUE \$ 0. EASTERN US BUDDHA'S STUDY FALUN DAFA ASSOCIATES-EDUCATIONAL EXPENSES \$ 46,000. INCLUDING GRANTS OF \$ 46,000. REVENUE \$ 0. MID-USA FALUN DAFA ASSOCIATION INCLUDING GRANTS OF \$ 3,000. EXPENSES \$ 3,000. REVENUE \$ 0. WISCONSIN FALUN DAFA ASSOCIATION-DONATION **EXPENSES \$ 47,000.** INCLUDING GRANTS OF \$ 47,000. REVENUE \$ 0. SUN YEN PROMATIONS INTERNATIONAL EXPENSES \$ 2,000. INCLUDING GRANTS OF \$ 2,000. REVENUE \$ 0. N J FALUN DAFA BUDDHA'S STUDY ASSOCIATION SUPPORT EDUCATION INCLUDING GRANTS OF \$ 1,310. 1,310. REVENUE \$ 0.

432211 08-27-14

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

Schedule O (Form 990 or 990-EZ) (2014)

THE ORGANIZATION HAS ITS DOCUMENTS AND FINANCIAL INFORMATION AVAILABLE TO

THE PUBLIC ON A NOT FOR PROFIT WEB SITE GUIDESTAR.ORG