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2014

OMB No. 1545-0047

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 www.irs.gov/form990.

Open to Public Inspection

_	Α	For t	he 2014 calei	ndar year, or tax year begi	nning 11/01	, 2014,	and ending	10/3	31		, 2015	
	В	Check	if applicable:	C					D Employ	er ident/	ification number	
		\prod_{A}	ddress change	FIREARMS POLICY	COALITION	TNC		- 1	47-	2460	415	
		\vdash	ame change	970 RESERVE DRIV		}	E Telephone number					
		124	•	ROSEVILLE, CA 9	1							
		\vdash	nitial return	1.052.1222, 611 3.	,,,,			1	(85	5) 3	72-7522	
		LJF"	nal return/terminated	į.				1				
			mended return						G Gross r			
		A	pplication pending	F Name and address of princip	al officer.		н	(a) is this a	group retur	n for sut	oordinates? Yes X No	
				}			H	(b) Are all	subordinates attach a list	include	d? Yes No	
•	ī	Tax-	exempt status	501(c)(3) X 501(c) (△) ✓ (insert)	no.) 4947(a)(1) or	527	11 140, 4	attach a list	(see ins	aructions)	
•	-			WW.FIREARMSPOLICY		111111111111		(c) Group s	exemption n	ımher 🖿		
	ĸ		n of organization	X Corporation Trust		Other > L	Year of formation	```			egal domicile: DE	
					Association C	other -	rear or formation	2014	1111	state of t	egal domiche. DE	
ł	Pa		Summa	ry		6 2 4 2 4 2 4 2 2 2 2			5555		·	
	ŀ	1		ribe the organization's mis-								
	શ્રો		CONSTITU	UTION OF THE UNIT	ED STATES	AND THE PEOPL	E'S RIGH	ITS, P	KIATT	GES	AND	
	듦		IMMUNIT.	IES DEEPLY ROOTED	IN THIS N	ATION'S HISTO	RY_AND_1	RADIT	TON' F	SPEC	TYTTA THE	
	팄		INALIEN	ABLE, FUNDAMENTAL	, AND INDI	VIDUAL RIGHT	TO KEEP	AND B	EAR AF	<u>MS.</u>		
	8	2		ox ► If the organization							sets.	
	2	3		oting members of the gove						3	5	
	S	4		ndependent voting member						4	<u>5</u> 5	
	쁦	5		er of individuals employed i						5		
	릙	6		er of volunteers (estimate in						6	0	
රා	,ĕ∣	7a		ted business revenue from						7a	0.	
0	Activities & Governance	b	Net unrelate	d business taxable income	from Form 990-	T, line 34				7b	0.	
								Pr	rior Year		Current Year	
0	اه	8		s and grants (Part VIII, line				 			231,091.	
JUN 3 (5	9		vice revenue (Part VIII, lin								
\leq	Se l	10		ncome (Part VIII, column (<u></u>				
=	œ	11		ue (Part VIII, column (A), I								
Α.		12	Total revenu	ie – add lines 8 through 1	(must equal Pa	rt VIII, column (A), lii	ne 12)				231,091.	
SCANNED	}	13	Grants and	similar amounts paid (Part	IX, column (A), I	ines 1-3)		<u> </u>				
Ž	}	14	Benefits paid	d to or for members (Part	X, column (A), li	ne 4)		}				
2	ł	15	Salaries, oth	ner compensation, employe	e benefits (Part	IX, column (A), lines	5-10)				47,990.	
K	se	16a		fundraising fees (Part IX,							248.	
\aleph	ë			_ ,		•						
() pa	Expenses			ising expenses (Part IX, co			6,023.	 				
	-	17	Other expen	ses (Part IX, column (A), I	ines 11a-11d, 11	f-24e)					168,509.	
	- {	18	Total expens	ses. Add lines 13-17 (must	equal Part IX, c	Jumn (A) [the [25] 1.	/FÐ				216,747.	
		19	Revenue les	s expenses. Subtract line	18 from line 12.	ILULIV	LU				14,344.	
-	8 6					15	S	Beginning	g of Curren	t Year	End of Year	
	흥	20	Total assets	(Part X, line 16)		MAY. 2.5	2N16191	·		0.	14,344.	
	at Asset nd Balan	21	Total liabilitie	es (Part X, line 26)		<u> </u>				0.	0.	
	ž.[]			r fund balances. Subtract I	1	00				0.		
ſ					ine 21 nominie	P-CCDEN.	<u></u>	}		0.1	14,344.	
	Pa			re Block				<i></i>				
	Under	penal lete Di	ties of perjury, I d eclaration of prep	leclare that I have examined this rel arer (other than officer) is based on	urn, including accompa	anying schedules and staten th preparer has any knowled	nents, and to the dge	e best of my	knowledge	and beli	et, it is true, correct, and	
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	٠.		Signati	ure of officer				Date	7-16	<u>- Zo</u>	10	
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			Print/Type	preparer's name	Preparer's signature		Date	11	Check _	J., I	PTIN	
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]		A 95678				Phone no	(916		
ĩ	May	the I	RS discuse #	his return with the prepare		(con instructions)			none no	1316	. X Yes No	
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		LOL	raperwork h	Reduction Act Notice, see	uie separate inst	เนเนอกระ	TEEAO	113L 05/28	5/14		Form 990 (2014).	

	990 (2014) FIREARMS POLICY COALITION INC	47-246041	.5 P	age 2
(Par	Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III			X
1	Briefly describe the organization's mission:			
	SEE SCHEDULE O			
	Did the organization undertake any significant program services during the year which were not listed on the price	or		
_	Form 990 or 990-EZ?		Yes X	No
	If 'Yes,' describe these new services on Schedule O		ies V	110
3	Did the organization cease conducting, or make significant changes in how it conducts, any program sei	rvices?	Yes X	No
•	If 'Yes,' describe these changes on Schedule O.	cos	ics N	110
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported.	ices, as measure is to others, the t	ed by expensional expens	ses. es,
4 a		Revenue \$)
	THE CORPORATION UNDERTAKES EFFORTS TO PROTECT AND DEFEND THE CONS	STITUTION C	F THE	
	UNITED STATES AND THE PEOPLE'S RIGHTS ENSHRINED THEREIN, INCLUDIN	NG (BUT NOT	LIMITE	<u> </u>
	TO) THROUGH DIRECT AND GRASSROOTS LEGISLATIVE, REGULATORY, AND JU			
	EDUCATION, OUTREACH, AND TECHNOLOGY.			
4 b	(Code:) (Expenses \$ including grants of \$) (R	tevenue \$)
				
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	(Code:) (Expenses 4			<u> </u>
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				- - -
			- -	
اء ۾	Other assessment (December of Schoolule O.)			
4 d	Other program services (Describe in Schedule O.)		`	
A -	(Expenses \$ including grants of \$) (Revenue \$)	
BAA	Total program service expenses ► 90,053. TEEA0102L 05/28/14		Form 990 ((2014)

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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		Х
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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	整		
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		Х
	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>	11 b		Х
	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
	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	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	<u> </u>	X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		
	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
	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		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

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Part W Checklist of Required Schedules (continued) Yes No 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 Х 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 Х 22 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J 23 Х 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part L 25b Х 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 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III..... Х 27 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): X a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х 28b Schedule L, Part IV X 28c X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes.' complete Schedule M.... 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M Х 30 $\overline{\mathbf{X}}$ Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If 'Yes,' complete Schedule R, Part I X 33 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. Х X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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

Note. All Form 990 filers are required to complete Schedule O BAA Form 990 (2014)

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI...

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

organization? Îf 'Yes,' complete Schedule R, Part V, line 2

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	m 990 (2014) FIREARMS POLICY COALITION INC	47-2460415			age
P	Statements Regarding Other IRS Filings and Tax Compliance				_
	Check if Schedule O contains a response or note to any line in this Part V				L
				Yes	No
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 6			
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b0			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?	eportable gamıng	1 c		X
2	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				
		2a 8			
	b If at least one is reported on line 2a, did the organization file all required federal employment		2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in	·			
3	Ba Did the organization have unrelated business gross income of \$1,000 or more during the year	ır?	3 a		<u> X</u>
	b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>		3 Ь		
4	a At any time during the calendar year, did the organization have an interest in, or a signature or other francial account in a foreign country (such as a bank account account or attention	er authority over, a	4.		х
	financial account in a foreign country (such as a bank account, securities account, or other f	inancial accounty?	4 a		_
	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 (FDAD)			
_	See instructions for filling requirements for Fillocity Form 174, Report of Foreign Bank and Fillancial 5a Was the organization a party to a prohibited tax shelter transaction at any time during the ta	· · · · · · · · · · · · · · · · · · ·	5.0		X
-	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt	- L-	5 a		$\frac{\Lambda}{X}$
		er transaction:	5 c		
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		36	{	
6	Sa Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a	х	
	b If 'Yes,' did the organization include with every solicitation an express statement that such contribute not tax deductible?	ons or gifts were	6 b	х	
7	Organizations that may receive deductible contributions under section 170(c).				
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and p services provided to the payor?	artly for goods and	7 a		
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b	-	
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v				
	Form 8282?		7 c		
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	_	7 e		
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben	efit contract?	7 f		
	g If the organization received a contribution of qualified intellectual property, did the organization file F as required?	Form 8899	7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the sponsoring			
	organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
	a Did the sponsoring organization make any taxable distributions under section 4966?		9 a		
	${f b}$ Did the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer of the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer of the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or the sponsoring organization make a distribution to a donor, donor advisor, or related personal transfer or the sponsoring organization make a distribution to a donor advisor or the sponsoring organization and the sponsoring organization or the sponsoring organization and the sponsoring organization or the sponsoring or the sponsoring organization or the sponsoring or the sponsoring organization or the sponsoring or the	son?	9 b		
10	Section 501(c)(7) organizations. Enter:				
	a Initiation fees and capital contributions included on Part VIII, line 12	10 a		1	
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b			
11	Section 501(c)(12) organizations. Enter:				
	a Gross income from members or shareholders	11 a	- 1		
	b Gross income from other sources (Do not net amounts due or paid to other sources		H		
	against amounts due or received from them.)	11b	10-		
12	La Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu o	1 has	12a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		12.		
	a is the organization licensed to issue qualified health plans in more than one state?	<u>_</u>	13a		هون
	Note. See the instructions for additional information the organization must report on Schedule	⊌ ∪.			
	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.	13Ь			
	c Enter the amount of reserves on hand	13c			
14	la Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
		1			

14b

Part WI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 5 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. 1 h 5 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х X Did the organization have members or stockholders? ... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8 a X **b** Each committee with authority to act on behalf of the governing body? 86 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes? . . 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13. 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise X to conflicts? 12b . . c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done

SEE SCHEDULE Q Schedule O how this was done 120 13 X 13 Did the organization have a written whistleblower policy? X Did the organization have a written document retention and destruction policy? 14 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? Х a The organization's CEO, Executive Director, or top management official . SEE SCHEDULE O 15 a X 15 b **b** Other officers or key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х 16a taxable entity during the year? . . b if 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. |X| Upon request Own website Another's website 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. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records: 20 KYLE KENNINGTON 970 RESERVE DR STE 111 ROSEVILLE CA 95678 (855) 372-7522

Page 7

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

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

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

- 1 a 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.

employees; and former such persons.	ad areasim					.d oo:		erant afficer disact	or or truston	
Check this box if neither the organization nor any relat	ed organiz	ation	con	(C)	_	ed any	/ CU	Irrent onicer, direct	or, or trustee	
(A) Name and Title	(B) Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099 MISC)	compensation from the organization and related organizations
(1) BRANDON COMBS	30									,
PRESIDENT	0	X	Ш	X	<u> </u>	\sqcup		9,875.	0.	0.
(2) JUSTIN CURTI TREASURER	<u>2_</u>	X	İ	x				0.	0.	0.
(3) ALAN NORMANDY	22									
VICE PRESIDENT	0	X	L.,	Х	<u> </u>			0.	0.	0.
_(4) FRANCISCO CORDOVA	2	X						0.	0.	0.
(5) MICHAEL BORLAND	2	-			\vdash		_		<u></u>	
DIRECTOR	0	X			L			0.	0.	0.
<u></u>										
(8)										
(9)				_						
(10)			-"							
(11)										
(12)				-			-			
(13)										
(14)										
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Part VII Section A. Officers, Directors, 11t	(B)	ney	CIII			alle	u riigilest con	ipensated Emp	Toyees (continuea)		
(A) Name and title		box	Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other		
	week (list any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	employee Key employee	Former Highest compensated	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(15)		1		+	+						
(16)				+	-						
(17)						 		.			
(18)											
(19)											
(20)											
(21)				\top							
(22)											
(23)											
(24)											
(25)											
1 b Sub-total. c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	on A				• • •	V V V	9,875. 0. 9,875.	0. 0. 0.	0. 0.		
2 Total number of individuals (including but not limited from the organization ▶ 0	to those li				no rece	ived					
3 Did the organization list any former officer, direct	or, or tru	stee,	key	emp	loyee	or h	iighest compensat	ed employee	Yes No		
on line 1a? If 'Yes,' complete Schedule J for such 4 For any individual listed on line 1a, is the sum of	reportabl	e cor	npen	satı	on and	d oth	er compensation f	rom	3 X		
the organization and related organizations greate such individual		• •		• •					4 X		
for services rendered to the organization? If 'Yes Section B. Independent Contractors			-						5 X		
Complete this table for your five highest compensation from the organization. Report compensation.	sation for t	epend the ca	dent o denda	cont ar ye	ractor ar end	s tha ling v	vith or within the org	ganization's tax year			
Name and business addr	ess			<u></u>			Description o	f services	(C) Compensation		
				-		_					
	<u> </u>										
Total number of independent contractors (including b \$100,000 of compensation from the organization.)		ted to	thos	e lis	ted ab	ove) v	who received more	than			
BAA	<u> </u>	TEEA0	108L (03/09	/15				Form 990 (2014)		

<u> </u>		Check if Schedule O contains a	response or	note to any	v line in this Part V	TILL		П
			_		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts ts	1 a	Federated campaigns	1a					٩
퉏	b	Membership dues	1 b					
₹ ي	c	Fundraising events .	1 c					
a ii	d	Related organizations	1 d				1	
% E	e	Government grants (contributions) .	1 e					
Contributions, Gifts, Grants and Other Similar Amounts	1	<u></u>		31,091.				
E S		Noncash contributions included in lines 1a-1f:	\$					
	<u> </u>	Total. Add lines 1a-1f		··· •	231,091.	·		
Program Service Revenue	2.		Busin	ess Code]	ļ
8	2 a							
ě.	b							
₹.	C							
8	a							
Tall	e	T. T						
8	1	All other program service revenue.						
<u> </u>	_	Total. Add lines 2a-2f						
	3	Investment income (including dividently similar amounts).	ends, intere	st and				
	4	Income from investment of tax-exe		roceeds ►				
	5	Develting	•	_1				
	,	(i) Real		Personal			· · · · · · · · · · · · · · · · · · ·	
	6.2	Gross rents		- Crooner				•
	-	Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)				- · · · · · · · · · · · · · · · · · · ·		
		(A) See	es (ı) Other		_		
	7 a	Gross amount from sales of assets other than inventory		., •				
	_	, 	 -					
	b	Less: cost or other basis and sales expenses .						
	c	Gain or (loss)						
		Net gain or (loss)		▶				
		. ,						
¥	oa	Gross income from fundraising eve (not including \$	nis	1				
ě		of contributions reported on line 1c	-					
&		See Part IV, line 18	a					
호	ь	Less: direct expenses	. b					
Other Revent		Net income or (loss) from fundraisi	ng events	▶				
		Gross income from gaming activities See Part IV, line 19					-	
		Less: direct expenses	ь					
		Net income or (loss) from gaming a	activities	. •			· · · · · · · · · · · · · · · · · · ·	
					····			
	, v a	Gross sales of inventory, less retur and allowances	. a	ŀ				
	ь	Less: cost of goods sold	ь					
		Net income or (loss) from sales of	inventory	►				
		Miscellaneous Revenue	Busine	ss Code				
	11 a							
	Ь							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		•				
	12	Total revenue. See instructions		•	231,091.	0.	_ 0.	0.

Pant X Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a r				
	not include amounts reported on lines 7b, 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.				
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	8,790.	5,274.	1,319.	2,197.
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.	0.	0.	0.
7	Other salaries and wages	39,200.	16,093.	11,598.	11,509.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	39,200.	10,093.	11,390.	11, 303.
9	Other employee benefits				· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes				
11	· · · · · · · · · · · · · · · · · · ·				
	Managanant	ĺ		'	
	1	20 615	10 006	7 770	
	-	20,615.	12,836.	7,779.	100
	: Accounting	1,075.	100.	875.	100.
	Lobbying.	3,410.	3,410.		
	Professional fundraising services. See Part IV, line 17	248.			248.
	Investment management fees				
	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion				
13	^" T	F2 000	10 666	0 627	22 705
14	Information technology	53,088.	10,666.	8,637.	33,785.
15	Daveltina	· · · · · · · · · · · · · · · · · · ·			
	Royalties				
16	Occupancy	06.000	00 414		C 470
17	Travel	26,893.	20,414.		6,479.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings				
20	Interest [
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses				
	of line 25, column (A) amount, list line 24e expenses on Schedule O.).				
а	COMMUNICATIONS	29,229.	10,565.	50.	18,614.
	TECHNOLOGY	12,108.	6,168.	154.	5,786.
	RENT	10,257.	1,173.	8,082.	1,002.
	BANK/MERCHANT_FEES	4,761.	105.	160.	4,496.
	All other expenses	7,073.	3,249.	2,017.	1,807.
	Total functional expenses. Add lines 1 through 24e.	216,747.	90,053.	40,671.	86,023.
	` <u> </u>	210, 141.	30,033.	40,0/1.	00,023.
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)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year 1 Cash - non-interest-bearing . 2,663. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net . 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.... 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 7 Notes and loans receivable, net . . 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10a 10b b Less: accumulated depreciation 10 c 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 11,681 15 Other assets. See Part IV, line 11 15 16 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 14,344 Accounts payable and accrued expenses. 17 17 18 Grants pavable. 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities . 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. . 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 25 Total liabilities. Add lines 17 through 25 0 26 0. Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets . . 27 28 Temporarily restricted net assets 29 Permanently restricted net assets X Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds... 31 Paid-in or capital surplus, or land, building, or equipment fund. . 32 Retained earnings, endowment, accumulated income, or other funds 32 14,344. 33 Total net assets or fund balances 33 0. 14,344. 34 Total liabilities and net assets/fund balances 0 14,344. BAA Form 990 (2014)

TEEA0111L 05/28/14

-orn	1990 (2014) FIREARMS POLICY COALITION INC	7-246	0415		Pa	ige 12
Pa	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	31,0	91.
2	Total expenses (must equal Part IX, column (A), line 25)	2		2	16,7	147.
3	Revenue less expenses. Subtract line 2 from line 1	3			14,3	344.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				0.
5	Net unrealized gains (losses) on investments	. 5				
6	Donated services and use of facilities	6				
7	Investment expenses	7	1			
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			14,3	<u> 344.</u>
ra	Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				Ì	
	in Schedule O.					
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revi	ewed or	n a			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
t	Were the organization's financial statements audited by an independent accountant?			2 b		X
	If 'Yes,' check a box-below to indicate whether the financial statements for the year were audited on a sep	arate				
	basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis					
C	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?	idit,		2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е		3 a		Х
H	of Yes, did the organization undergo the required audit or audits? If the organization did not undergo the required	audit	, ,			
	or such the evaluation of belong the required about of adults? In the organization for including the required	Judit		3 4		

Form **990** (2014)

BAA

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.

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.

OMB No 1545-0047 **2014**

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

FIREARMS POLICY COALITION INC

Employer identification number 47-2460415

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

TO PROTECT AND DEFEND THE CONSTITUTION OF THE UNITED STATES AND THE PEOPLE'S RIGHTS,
PRIVILEGES AND IMMUNITIES DEEPLY ROOTED IN THIS NATION'S HISTORY AND TRADITION,
ESPECIALLY THE INALIENABLE, FUNDAMENTAL, AND INDIVIDUAL RIGHT TO KEEP AND BEAR ARMS.

TO PROTECT, DEFEND, AND ADVANCE THE MEANSAND METHODS BY WHICH THE PEOPLE OF THE UNITED STATE MAY EXERCISE THOSE RIGHTS, INCLUDING, BUT NOT LIMITED TO, THE ACQUISITION, COLLECTION, TRANSPORTATION, EXHIBITION, CARRY, CARE, USE, AND DISPOSITION OF ARMS FOR ALL LAWFUL PURPOSES, INCLUDING, BUT NOT LIMITED TO, SELF-DEFENSE, HUNTING, AND SERVICE IN THE APPROPRIATE MILITIA FOR THE COMMON DEFENSE OF THE REPUBLIC AND THE INDIVIDUAL LIBERTY OF ITS CITIZENS.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE BOARD OF DIRECTORS REVIEWS A COPY OF THE TAX RETURN PRIOR TO FILING AND APPROVED BY THE BOARD MEMBERS PRIOR TO THE FILING OF THE RETURNS.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE BOARD OF DIRECTORS ANNUALLY REVIEWS EACH BOARD MEMBERS ACTIVITIES FOR POTENTIAL

CONFLICTS OF INTEREST.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT
THE BOARD FOLLOWED A PROCESS THAT EXCLUDED THE EXECUTIVE DIRECTOR FROM AN ANALYSIS
OF COMPARABLE COMPENSATION ARRANGEMENTS - BOTH FOR PROFIT AND NON PROFIT - AS WELL
AS AN ANALYSIS OF LIMITED DATA ON HAND FROM DIRECTLY COMPARABLE ORGANIZATIONS. THIS
WAS CONDUCTED OVER THE COURSE OF TWO SEPARATE BOARD MEETINGS WHERE COMPENSATION WAS
OFFICIALLY APPROVED AT THE SECOND MEETING.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE NO DOCUMENTS AVAILABLE TO THE PUBLIC.