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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

	FOI THE	ZU 15 Calem	idar year, or lax year beginn	mig Jul I	, 2015, and e	iding Jun		1 2016				
В	Check if a	ipplicable	C Name of organization CLUE	B FOR GROWTH			D Employer iden	tification number				
	Addr	ress change	Doing business as				20-4681	603				
	Nam	ne change	Number and street (or P O box i	loom/suite	E Telephone num	ber						
	Initia	al return	2001 L STREET, NW	Ī	6	00	(202) 9	55-5500				
	Final	return/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal code								
	Ame	ended return	WASHINGTON		DC 200	36	G Gross receipts	\$8,518,914.				
	\vdash	lication pending	F Name and address of principal of	fficer			a group return for sub-					
	□		DAVID MCINTOSH 2001 I. ST	. NW STE. 600 WASHINGTO	ON DC 200	36 H(b) Are all	subordinates included	17 Yes No				
<u> </u>	Tay-ex	cempt status	501(c)(3) X 501(c) (4		47(a)(1) or 52		attach a list (see insti	ructions)				
<u>.</u> _					47(0)(1) 01 132		exemption number	•				
<u> </u>			W.CLUBFORGROWTH.O		1							
K		f organization	X Corporation Trust	Association Other	L Year of fo	rmation 200	6 M State of I	egal domicile DC				
		Summar										
			be the organization's mission		- 			NWIDE NONPROFIT				
9			HIP ORGANIZATION D									
퍨	-		RIMARILY THROUGH LE		ENT, ISSUE	_ADVOCACY	,_RESEARCH,	AND MAY ENGAGE				
ē	-		OTHER LAWFUL PURPO									
Activities & Governance	l .	Check this bo	ox F I If the organization opting members of the governing	discontinued its operations of	•			I 7				
৺			dependent voting members of					6				
es			r of individuals employed in ca		•			21				
ΞΞ	1		r of volunteers (estimate if nec					6				
4ct			ed business revenue from Par					0.				
_	1		business taxable income from	• •			<u> </u>	0.				
_							Prior Year	Current Year				
	8 0	Contributions	and grants (Part VIII, line 1h)			<u> </u>	5,193,627.	8,192,407.				
2			vice revenue (Part VIII, line 2g	•			3,133,021.	0,102,107.				
Revenue	1	-	ncome (Part VIII, column (A), I	•								
2			ie (Part VIII, column (A), lines	-			165,000.	326,507.				
			e – add lines 8 through 11 (m				5,358,627.	8,518,914.				
							1,100,000.	0,310,311.				
			rants and similar amounts paid (Part IX, column (A), lines 1-3)									
			er compensation, employee be				1,995,107.	2 221 060				
es	10 0					∵.⊢—	1,993,107.	2,321,969.				
Expenses	16a P		fundraising fees (Part IX, colu		ED···I	 	emo 24 F., *, SS, /UT(2007	27. Tan 46 to 0				
ă	ьт	Total fundrais	sıng expenses (Part IX, colum	in (D), line 25)	8 66) 13	32.						
w	1 47 (Other expens	ses (Part IX, column (A), lines	11a-11d 11f-24e)			4,040,741.	6,555,353.				
	18 T	Total expense	es. Add lines 13-17 (must equ	ual Part 🔯 column (A) line 2	劉 ふ .		7,135,848.	8,877,322.				
	19 F	Revenue less	s expenses. Subtract line 18 fi	rom line 12			1,777,221.	-358,408.				
8							ing of Current Year					
	20 T	Total assets ((Part X, line 16)	OGDEN	, 🔍 📜		2,562,066.	2,203,658.				
Age	11		es (Part X, line 26)			 	0.	0.				
9	1		r fund balances. Subtract line	21 from line 20								
200				21 Irom line 20	· · · · · · · · ·	<u>: : : </u>	2,562,066.	2,203,658.				
		Signatu					 					
			eclare that I have examined this return, in irer (other than officer) is based on all in			the best of my know	wledge and belief, it is	true, correct, and				
			Tarrid M. H. T.	90			5/2/201					
٠.		Signatu	ure of officer				3 E 201.	<i>T</i>				
Si	gn	J. O.g.	A 1	Tarin Daga		<u>~</u>	, , , ,					
He	ere		Z	TOSH PRESI	DENT	·						
			or print name and title	/								
		Pπnt/Type p	preparer's name	Preparer's signature	Date		Check X if	PTIN				
Pa	iid	ROBER	T E. LANE	1 (2M, 5. 1	05/	02/17	self-employed	P01622353				
Ρı	eparer		Lane & Compan	y, CPAs								
	e Only				Suite 425		Firm's EIN 52	2-1738520				
Washington					20006			2) 463-6500				
Washington DC 20006 May the IRS discuss this return with the preparer shown above? (see instructions)							,	X Ves No				

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2015)

	m 990 (2015) CLUB FOR GROWTH	20-4681603	Page 2
Par	rtill Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	· · · · · · · · · · · · · · · · · · ·	📙
1	Briefly describe the organization's mission.		
	CLUB FOR GROWTH IS A NATIONWIDE NONPROFIT MEMBERSHIP OF	RGANIZATION DEDICATED TO	
	PROMOTING PUBLIC POLICIES THAT PROMOTE ECONOMIC GROWTH	PRIMARILY THROUGH LEGISLA	TIVE
	INVOLVEMENT, ISSUE ADVOCACY, RESEARCH, AND MAY ENGAGE	IN ANY OTHER LAWFUL PRUPOS	E
2			_
	Form 990 or 990-EZ?		X No
	If 'Yes,' describe these new services on Schedule O.	_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any p	program services? Yes	X No
	If 'Yes,' describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishments for each of its three largest program service accomplishment in the service accomplishment in th	ogram services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and revenue, if any, for each program service reported.	d allocations to others, the total expenses,	
4 a	a (Code) (Expenses \$ 6,952,366. including grants of \$	0) (Revenue \$	0.)
	SEE ATTACHED STATEMENT A		
		·	
		· 	
		· 	
			
			
			-
			-
			-
		-	
	b (Code:) (Expenses \$ including grants of \$) (Revenue \$	
40	b (Code:) (Expenses \$ including grants of \$) (Revenue \$	
4 0	c (Code) (Expenses \$ including grants of \$) (Revenue \$)
			.
	• '		
4 0	d Other program services. (Describe in Schedule O.)		
) (Revenue \$	
	e Total program service expenses ► 6, 952, 366.		
DAA	A TEEA0103 10/13/15	Form	990 (2015)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		
2	1s 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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		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, 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, Part VI	11 a	Х	
١	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If Yes,' complete Schedule D, Part VII	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	11f		Х
12	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	Х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		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 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
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If Yes,' complete Schedule G, Part III.	19		х

	A. M.		Yes	No
20 a	Did the organization operate one or more hospital facilities? If 'Yes', complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		Х
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	х	
24 :	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		X
l	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		
25	a 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
1	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		26		Х
27	The state of the s	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If Yes, complete Schedule N, Part I	31		Х
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		х
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		х
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	Х	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		X_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If Yes, complete Schedule R, Part V, line 2	36		
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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X	

zai	Statements Regarding Other IRS Fillings and Tax Compilance			
	Check if Schedule O contains a response or note to any line in this Part V	· · · ·	Yes	No
	5 4 4	, C. 244	765	NO
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	3.23		- 4
	, Elliot tile tilatings of total visit 25 months of 25 mo			
(Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 с	X	
2 8	a 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 21			
ı	o If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	\$ 1 2.75		
3 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ı	to If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4 :	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)?	4 a		х_
1	o 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)			
5 :	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
ı	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6	a 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?	6 a	Х	
ı	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	х	
7	Organizations that may receive deductible contributions under section 170(c).	3.3		
	a 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?	7 a		
1	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 was required to file			
	Form 8282?	7с		
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		<u> </u>
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	1000		OLAL CO
	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		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			7
	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:			
	a Gross income from members or shareholders	6,323		
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		ļ
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	SECT	36%	
	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	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		122	143
	which the organization is licensed to issue qualified health plans	† 🖫	1,43	
	c Enter the amount of reserves on hand	14 a	1 × 1 × 1 × 1	X
	b If 'Yes.' has it filed a Form 720 to report these payments? If 'No.' provide an explanation in Schedule O	14 b	+	+-"
	DILLIES, LIES IL DIEG A L'UTILLIA DE L'EDOLL LIESE DAVINGILLS IL 110. DI UVIUE ALL EXPIANALIONI IL DUNGULIE COMMANDA COMMANDA COMMANDA			

Form 990 (2015) CLUB FOR GROWTH Page 6 20-4681603 Partivial 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. Section A. Governing Body and Management Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ Did the organization delegate control over management duties customanly performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents Х 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Х 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х 8 a a The governing body?.................. 8 b Χ 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Х 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 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 Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Х to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12 c Х X 13 X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 a Х a The organization's CEO, Executive Director, or top management official 15 b Х 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 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 17 List the states with which a copy of this Form 990 is required to be filed > 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. Another's website X Upon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the lax year

State the name, address, and telephone number of the person who possesses the organization's books and records 20

THE ORGANIZATION 20036

2001 L STREET, NW; WASHINGTON TEEA0106 10/12/15

(202) 955-5500 Form 990 (2015)

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

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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
(A) Name and Title	(B) Average	Pos than	both	an of	t che	ck more persor and a	e n	(D) Reportable compensation from	(E) Reportable	(F) Estimated amount of other
		or director		officer Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount or other compensation from the organization and related organizations
(1) FRAYDA LEVIN	1.00	١								
DIRECTOR	0.50	X						0.	0.	0.
(2) HOWARD RICH	1.00	,,						_		
DIRECTOR	0.50							0.	0.	0.
_(3) JERRY HAYDEN	1.00							0	^	•
DIRECTOR	0.50	^	-					0.	0.	0.
_(4)_KEN_BLACKWELL	1.00	X						0.	0	0
DIRECTOR (5) CURIS CUCCOLA	1.00	<u> </u>	\vdash		-		_	0.	0.	0.
_(5)_CHRIS_CHOCOLA	0.50	x			ļ			0.	0.	0.
(6) JACKSON STEPHENS, JR.	1.00	-		\vdash				0.	0.	<u></u>
CHAIRMAN/VICE PRESIDENT	0.50	Х		х		. 1		0.	0.	0.
	40.00			-	<u> </u>	H			· · · · · ·	
PRESIDENT	2.00	Х		х				372,450.	0.	28,137.
(8) ADAM ROZANSKY	40.00									
CFO/TREASURER	2.00			Х	Î			135,000.	0.	6,913.
(9) ANDY ROTH	40.00									_ .
SECRETARY/VP OF GOVT. AFFAIRS	2.00	1	ł	Х	ł	l		147,560.	0.	470.
(10) CHUCK PIKE	40.00									
EXECUTIVE VICE PRESIDENT	2.00	L			Х		_	251,260.	0.	6,428.
(11) KRISTIN COBB	40.00									-
VP OF DEVELOPMENT	2.00					X	_	163,458.	0.	<u>5,3</u> 93.
(12) DOUG SACHTLEBAN	40.00	1	i	ŀ	ł		l		!	
COMMUNICATIONS DIRECTOR	2.00	<u> </u>	<u> </u>		<u> </u>	X	_	105,413.	0.	30,902.
<u>(13)</u>	<u> </u>		1		1					
	 	lacksquare	<u> </u>	_	L_	<u> </u>	<u> </u>			
(14)	-				1					
	1	1	J	<u> </u>]	<u> </u>	J	<u> </u>		

PärtVIII Section A. Officers, Directors, Tru	(B)			(C		50, 0	Ĭ		iponoutou zi	inployees (commuted)
(A) Name and title	Average hours per week	box,	not ch unles cer an	s per d a d	nore i son is irecto	than on s both a r/truste	e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	(list any hours for related organiza - tions below dotted line)	individual trustee or director	nstitutional trustee	Officer	key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)					-				-	
(16)							1		 	
(17)							1			
(18)							-			
(19)										
(20)							+		1	
(21)							\dashv			
(22)							\dashv			
(23)				-						
(24)										
(25)		-								
1 b Sub-total						¹	>	1,175,141.		0. 78,243.
d Total (add lines 1b and 1c)	<u>.</u>				• •		_	1,175,141.		0. 78,243.
2 Total number of individuals (including but not limited from the organization ► 6	d to those	listed	abo	ve)	who	rece	ived	d more than \$100,	000 of reportable	compensation
Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such in										Yes No
4 For any individual listed on line 1a, is the sum of repute the organization and related organizations greater the such individual	han \$150	,000?	If 'Y	es' (and com	other plete	cor Sch	mpensation from hedule J for		4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or	ompensa	tion fr	om a	any i						
Section B. Independent Contractors 1 Complete this table for your five highest compensate										i
compensation from the organization Report compe	nsation fo	r the	cale	nda	ryea	ar end	ing	with or within the	organization's tax	
(A) Name and business addre	ess			_				Description of) of services	(C) Compensation
RED SEA LLC 4550 MONTGOMERY AVE.				ME				CONSULTING AN		976,977.
CREATIVE RESPONSE CONCEPTS 2850 EISENHOWER AVE. BASSWOOD RESEARCH 4550 MONTGOMERY AVE.			<u>A</u>	VA ME		2231 2081		PR AND DIGITA POLLING/AN		163,735. 177,040.
2 Total number of independent contractors (including	but not lie	mitad	4 - 4					1		

Pan	Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII								
	u'				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	b c d	Federated campaigns . Membership dues Fundraising events Related organizations . Government grants (contributions)	1b						
ontribution ond Other	g	All other contributions, gifts, gr similar amounts not included a Noncash contributions included Total Add lines 1s, 1f	bove 1 f d in lines 1a-1f . 5	5					
Program Service Revenue a	2 a b c d e f	Total. Add lines 1a-1f .		Business Code	8,192,407.				
Pro	g 3	Total. Add lines 2a-2f . Investment income (inclu							
	4 5	other similar amounts) . Income from investment Royalties	oond proceeds						
	c p	b Less. rental expenses c Rental income or (loss).							
	7 a	Gross amount from sales of assets other than inventory Less cost or other basis	(i) Secunties	(II) Other					
	d	and sales expenses Gain or (loss)							
Other Revenue		Gross income from fundr (not including. \$ of contributions reported See Part IV, line 18	on fine 1c)	a	files and the second				
Othe	c	Less: direct expenses . Net income or (loss) from Gross income from gami	n fundraising e ng activities	vents ▶					
	•	See Part IV, line 19 Less direct expenses . Net income or (loss) from		b ties · · · · · · ·			集 学		
	l	Gross sales of inventory and allowances Less cost of goods sold		a b					
	<u> </u>	Net income or (loss) from		, 					
	<u> </u>	Miscellaneous Revenu		Business Code			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
	11 a	REIMBURSEMENTS FROM	RELATED ORG	900099	326,507.	326,507.	0.	0.	
	1	All other revenue							
	I	Total. Add lines 11a-11d			326,507.			;	
	12	Total revenue. See insti	ructions	. . -	8,518,914.	326,507.	0.	<u> </u>	

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to any line in this Part IX									
	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			1 1						
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				<i>5</i> 4.					
5	Compensation of current officers, directors, trustees, and key employees	1,070,592.	540,542.	287,775.	242,275.					
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	1,020,414.	515,207.	274,287.	230,920.					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)		313/137.	2,1,20.	23073201					
9	Other employee benefits	129,862.	65,567.	34,907.	29,388.					
10	Payroll taxes	101,101.	51,046.	27,176.	22,879.					
11	Fees for services (non-employees)									
а	Management									
b	Legal	154,137.	47,522.	106,615.	0.					
c	: Accounting	28,790.	0.	28,790.	0.					
d	Lobbying									
е	Professional fundraising services See Part IV, line 17			A 1880 图理图14						
f	Investment management fees									
·	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,051,135.	4,033,042.	0.	18,093.					
13	Office expenses	86,202.	20,616.	55,329.	10 257					
14	Information technology		49,391.	140,406.	10,257.					
15	Royalties	226,667.	49,391.	140,406.	36,870.					
	Occupancy	220,175.	105 422	62.206	50 456					
16 17	Travel	90,779.	105,433. 34,311.	62,286.	52,456.					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	90,779.	34,311.	0.	56,468.					
19	Conferences, conventions, and meetings	778,526.	775,378.	3,148.	0.					
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	2,000.	958.	566.	476.					
23	Insurance	18,633.	0.	_ 18,633.	0.					
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)									
a	RESEARCH AND POLLING	699,131.	699,131.	0.						
t	PRINTING AND PUBLICATION	146,861.	8,639.	0.	138,222.					
c	MEMBERSHIP APPEALS	24,921.	0.	0.	24,921.					
C	REGISTRATIONS	9,831.	0.	9,831.	0.					
•	All other expenses	17,565.	5,583.	9,075.	2,907.					
25	Total functional expenses. Add lines 1 through 24e	8,877,322.	6,952,366.	1,058,824.	866,132.					
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 In following SOP 98-2 (ASC 958-720)									
BAA			`	 	Farm 000 (2015)					

Form 990 (2015) CLUB FOR GROWTH
Part X: Balance Sheet

28 Temporarily restricted net assets			Check if Schedule O contains a response or note to an	y line	in this Part X	<u> </u>		<u> </u>
2 Savings and temporary cash investments						(A) Beginning of year		(B) End of year
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4550(11)), part oxinity and the section 4550(10), and contributing section 4550(10),		1	Cash - non-interest-bearing			2,544,437.	1	2,186,511.
1		2	Savings and temporary cash investments				2	
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and injuhest compensated employees. Complete Part IV of Schedule L. 5)	3			3			
Standard other receivables from current and former officers, directors		4	Accounts receivable, net				4	1,518.
section 4958(f)(1), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501c(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L		5	Loans and other receivables from current and former offic trustees, key employees, and highest compensated empl Part II of Schedule L	ers, c oyees	lirectors, :. Complete		5	
Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schedule D 159,878 0, 10c 0, 11 Investments – publicity traded secuntes 11 Investments – publicity traded secuntes 11 Investments – program-related. See Part IV, line 11 12 Investments – program-related. See Part IV, line 11 13 Investments – program-related. See Part IV, line 11 12 13 Investments – program-related. See Part IV, line 11 13 14 Intangible assets 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		6	section 4958(f)(1)), persons described in section 4958(c), employers and sponsoring organizations of section 501(c)	, and contributing oluntary employees'		6		
10 a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 159,878 0. 10c 0.	2	7	Notes and loans receivable, net			7		
10 a Land, buildings, and equipment cost or other basis.	Se	8	Inventories for sale or use				8	
b Less accumulated depreciation 10b 159,878 0 10c 0	As	9	Prepaid expenses and deferred charges				9	
b Less accumulated depreciation 10b 159,878 0 10c 0 11 Investments - publicly traded secunities 11 12 Investments - other secunities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 3,167 14 1,167 15 Other assets. See Part IV, line 11 14,462 15 14,462 16 Total assets. Add lines 1 through 15 (must equal line 34) 2,562,066 16 2,203,658 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 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 25 26 Total liabilities not included on lines 17-24). Complete Part IX of Schedule D 25 26 Total liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities and foliow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. 2,300,791 27 2,203,658 29 29 Permanently restricted net assets 29 29 20 20 20 20 20 20		10 a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10 a	159,878.			
11 Investments — publicly traded secunities 11 12 Investments — other secunities. See Part IV, line 11 12 13 Investments — other secunities. See Part IV, line 11 13 13 14 Intrangible assets 3,167, 14 1,167.	İ					0.	10 c	0.
12 Investments — other secunties. See Part IV, line 11 13 Investments — program-related. See Part IV, line 11 13 14 Intangble assets 3,167, 14 1,167. 15 14,462, 15			•		<u>,</u>	<u></u>	11	
13 Investments - program-related. See Part IV, line 11 14 Intangible assets 3, 167, 14 1,167. 15 Other assets. See Part IV, line 11 14,462. 15			Investments – other securities. See Part IV, line 11				12	
14 Intangible assets 3, 167. 14 1, 167. 15 Other assets. See Part IV, line 11 14, 462. 15 14, 46		13					13	
15 Other assets. See Part IV, line 11	- 1						_	1 167
16								
17 Accounts payable and accrued expenses 17 18 19 19 19 19 19 19 19	- 1	16						
18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 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 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 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 31 Retained earnings, endowment, accumulated income, or other funds 32 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 32 (2,562,066, 33) 2,203,658.	\neg		Accounts payable and accrued expenses			273027000.		
20 Tax-exempt bond liabilities	- 1	18					18	
21 Escrow or custodial account liability Complete Part IV of Schedule D	Ì	19	Deferred revenue				19	
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 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 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 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Xand complete lines 27 through 29, and lines 33 and 34. Unicretricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34. Capital stock or trust principal, or current funds Retained earnings, endowment, accumulated income, or other funds Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Loans and other payables to related third parties. 23 24 25 Check here And Complete lines 27 through 29 Capital stock or trust principal, or current funds 30 Capital stock or trust principal, or current funds 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 25 Complete Part II of Schedule D 26 Capital stock or trust principal, or current funds 31 Retained earnings, endowment, accumulated income, or other funds 27 Total net assets or fund balances 28 Capital stock or fund balances Capital stock or fund balances	- 1	20	Tax-exempt bond liabilities				20	
23 Secured mortgages and notes payable to unrelated third parties	တ္မ	21	Escrow or custodial account liability Complete Part IV of	Sche	edule D		21	
23 Secured mortgages and notes payable to unrelated third parties	iabiliti	22	Loans and other payables to current and former officers, key employees, highest compensated employees, and di Complete Part II of Schedule L	dırect squal	ors, trustees, fied persons.		22	
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. 26 Total liabilities. Add lines 17 through 25	-	23	Secured mortgages and notes payable to unrelated third	partie	s		23	
Organizations that follow SFAS 117 (ASC 958), check here \(\times \)	ł	24	Unsecured notes and loans payable to unrelated third pa	rties			24	
Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets		25	Other liabilities (including federal income tax, payables to and other liabilities not included on lines 17-24). Complet	relate e Par	ed third parties, t X of Schedule D		25	
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		26	Total liabilities. Add lines 17 through 25		<u> </u>	0.	26	0.
27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here □ and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 2,300,791. 27 2,203,658. 261,275. 28 29 30 31 32 32 33 30 31 31 32 32,203,658.	,			here	► X and complete	W 7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
Temporarily restricted net assets	ğ		•					
28 Temporarily restricted net assets	ě	27				2,300,791.	27	2,203,658.
Permanently restricted net assets	3a	28				261,275.	28	
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	핗	29	•				29	
30 Capital stock or trust principal, or current funds	Ē			, che	ck here ►			
Paid-ın or capital surplus, or land, building, or equipment fund	g	30	Capital stock or trust principal, or current funds				30	
32 Retained earnings, endowment, accumulated income, or other funds	3						31	
33 Total net assets or fund balances	Ą		• • • • • • • • • • • • • • • • • • • •				+	
	e		_			2,562,066		2,203,658
34 Total liabilities and net assets/fund balances	z					1	_	2,203,658.

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Forn	1 990 (2015) CLUB FOR GROWTH	-4681603	F	Page 12
Pai	T≹XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	· · <u>· ·</u> · ·	$\dots \square$
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	8,518,	914.
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	8,877,	322.
3	Revenue less expenses. Subtract line 2 from line 1	. 3	-358,	408.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	2,562,	066.
5	Net unrealized gains (losses) on investments	. 5		
6	Donated services and use of facilities			
7	Investment expenses			
8	Pnor period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1		
	column (B))	. 10	2,203,	<u>658.</u>
Ha	TEXIL Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII			للنبذ
			Yes	No No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2 :	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed or	a		
	separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis			
ı	b Were the organization's financial statements audited by an independent accountant?		2 b X	1
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate			44.44
	basis, consolidated basis, or both			
	Separate basis X 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 a review, or compilation of its financial statements and selection of an independent accountant?		2 c	х
	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 Sinç Audit Act and OMB Circular A-133?	le 	3 a	Х
!	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	audit		1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u>.</u> <u>.</u>	3 b	
BAA			Form 990	(2015)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2015

2015

OMB No 1545-0047

Open to Public Inspection

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

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

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

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

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

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

•	sy Tax) (see instructions), the Section 501(c)(4), (5), or (6) orga							
	of organization			Employer identifica	ation number			
CLU	JB FOR GROWTH			20-468160	3			
Par	t I-A Complete if the or	rganization is exempt under section	on 501(c) or is a	section 527 organi	zation.			
1		ganization's direct and indirect political campa						
2	Political expenditures				3,663,527.			
3	Volunteer hours				0			
Par	t I-B Complete if the or	rganization is exempt under section	on 501(c)(3).					
1		e tax incurred by the organization under secti						
2	•	e tax incurred by organization managers unde						
3	If the organization incurred a s	section 4955 tax, did it file Form 4720 for this	year?		· · · L Yes No			
4 a	a Was a correction made?				· · · Yes No			
	If 'Yes,' describe in Part IV.							
Par	t I-C Complete if the o	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3).				
1	Enter the amount directly expe	ended by the filing organization for section 52	7 exempt function acti	vities ► \$	3,663,527.			
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities							
3								
4	Did the filing organization file I	Form 1120-POL for this year?			· · · Yes X No			
5	organization made payments amount of political contribution	and employer identification number (EIN) of all For each organization listed, enter the amount is received that were promptly and directly de action committee (PAC). If additional space is	nt paid from the filing of	organization's funds. Also political organization, suc	enter the			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0			
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								

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

Schedule C (Form 990 or 990-EZ) 2015

Partili-A Complete if section 501	the organizatior (h)).	n is exempt under se	ction 501(c)(3) and	filed Form 5768 (election under
	· · · · · · · · · · · · · · · · · · ·	s to an affiliated group (and	l list in Part IV each affilia	ated group member's nar	me,
		share of excess lobbying ex		g	-,
. —	· · · · · · · · · · · · · · · · · · ·	ed box A and 'limited contro	•		
(The term	Limits on Lobbyin	ng Expenditures	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	<u>·</u>				
		slative body (direct lobbying			
• • •	-	1b)	· ·		
d Other exempt purpose e	•	·			
e Total exempt purpose ex	penditures (add lines	1c and 1d)			
		nt from the following table in			
If the amount on line 1e, col		The lobbying nontaxable			
Not over \$500,000		20% of the amount on line 1e		4.	
Over \$500,000 but not over \$*	1,000,000	\$100,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over	\$17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
—	•	line 1f)			
h Subtract line 1g from line	e 1a If zero or less, e	nter -0			<u> </u>
i Subtract line 1f from line	1c. If zero or less, en	ter -0			
		line 1h or line 1i, did the or			· · · Yes No
(Som	ne organizations that	-Year Averaging Period U made a section 501(h) el	ection do not have to c		
		s below. See the instruction	<u></u>	 ·	<u> </u>
	Τ	, g.			
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	B. T.				
f Grassroots lobbying expenditures					
ВАА				Schedule C (Fon	m 990 or 990-EZ) 2015

Dart III R	Complete	if the or	ganization i	ie ovomn	t under section	501(c)(3) and	hae NOT	filed Form	5768
@41,L-11,ED.2-3	Combiere	in this or	gamzanom	is exemp	it under Section	i so itelist and	i ilas NO i	med rom	3700
	(election	under se	ction 501(h	1)).					

_		(a	1)		(b)	
	each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description he lobbying activity.	Yes	No	Ar	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	A STATE OF S				
	a Volunteers?				***	
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1.42		
	c Media advertisements?					
	d Mailings to members, legislators, or the public?		_			
	e Publications, or published or broadcast statements?					
	f Grants to other organizations for lobbying purposes?					
	g Direct contact with legislators, their staffs, government officials, or a legislative body?					
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	i Other activities?					
	j Total. Add lines 1c through 1	4	Q. 5. 7.			
2	a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	-11.500000		2.4	42.5	32-17 A
	b if 'Yes,' enter the amount of any tax incurred under section 4912	- 5	- CE			a desirable distinguishment and
	c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		34,434,000		V. 75	- 100
Pa	irt III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	. or			
*****	section 501(c)(6).	(-/(-/	,			
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	. <u></u> .		3		X
Pa	(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	(c)(5) Part	, or s III-A,	section line 3, i	501(c) s	_
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	a Current year		2 a	İ		
	b Carryover from last year		2 b			
	c Total		2 c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

5 Taxable amount of lobbying and political expenditures (see instructions)

Pt I-A Line 1 POLITICAL EXPENDITURES INCLUDED EXPRESS ADVOCACY, ELECTIONEERING COMMUNICATIONS, AND A FIELD REPRESENTATIVE PROGRAM.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public

	CLUB FOR GROWTH			20-4681603
Par	Organizations Maintaining Done	or Advised Funds or Oth	er Similar Fun	ds or Accounts.
<u> </u>	Complete if the organization answ	ered 'Yes' on Form 990, F	Part IV, line 6.	
		(a) Donor advised f	funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor are the organization's property, subject to the or	r advisors in writing that the asseganization's exclusive legal cont	ets held in donor ad	vised funds
6	Did the organization inform all grantees, donors, for charitable purposes and not for the benefit of impermissible private benefit?	the donor or donor advisor, or f	or any other purpos	se conferring
Par	I Conservation Easements.			
	Complete if the organization answ	ered 'Yes' on Form 990, F	Part IV, line 7.	
1	Purpose(s) of conservation easements held by t	he organization (check all that a	pply)	
	Preservation of land for public use (e.g., rec	reation or education)	Preservation of	a historically important land area
	Protection of natural habitat		Preservation of	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization last day of the tax year.	held a qualified conservation co	ontribution in the for	
				Held at the End of the Tax Year
	Total number of conservation easements			
	Total acreage restricted by conservation easem			
(Number of conservation easements on a certifie	d historic structure included in (a	a)	· 2c
C	Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, and n	ot on a historic	. 2d
3	Number of conservation easements modified, tratax year ►	ansferred, released, extinguishe	d, or terminated by	the organization during the
4	Number of states where property subject to con-	servation easement is located >		_
5	Does the organization have a written policy regard and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring	, inspecting, handling of violation	ns, and enforcing co	onservation easements during the year
7	Amount of expenses incurred in monitoring, insp ▶\$	pecting, handling of violations, a	nd enforcing conse	rvation easements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(μ)?	line 2(d) above satisfy the requir	rements of section	170(h)(4)(B)(i) · · · · · · · · · · Yes
9	In Part XIII, describe how the organization repoindled, if applicable, the text of the footnote to conservation easements.	ts conservation easements in its the organization's financial state	s revenue and expe ments that describe	nse statement, and balance sheet, and es the organization's accounting for
Par	Organizations Maintaining Colle Complete if the organization answ	ections of Art, Historical vered 'Yes' on Form 990, I	Treasures, or Part IV, line 8.	Other Similar Assets.
1 8	If the organization elected, as permitted under S art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its financial	neld for public exhibition, educati	ion, or research in f	atement and balance sheet works of urtherance of public service, provide,
1	If the organization elected, as permitted under Shistorical treasures, or other similar assets held following amounts relating to these items	for public exhibition, education,	or research in furth	erance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, In			
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, amounts required to be reported under SFAS 1	historical treasures, or other sir 16 (ASC 958) relating to these it	nilar assets for final ems.	ncial gain, provide the following
	Revenue included on Form 990, Part VIII, line 1			
1	Assets included in Form 900, Part Y			► ¢

Part III Organizations Mainta	ining Collec	ctions of A	rt, Historic	cal Treasures, or	Other Similar Ass	sets (co	<u>ntinue</u>	<u>əd)</u>
3 Using the organization's acquisition items (check all that apply):	n, accession, ai	nd other recor	ds, check any	of the following that a	are a significant use of it	s collectio	n	
a Public exhibition		d	Loan or e	xchange programs				
b Scholarly research		е	Other _					
c Preservation for future general	tions							
4 Provide a description of the organic Part XIII	zation's collecti	ons and expla	in how they fo	urther the organization	n's exempt purpose in			
5 During the year, did the organization to be sold to raise funds rather than	n to be maıntaıı	ned as part of	the organizati	ion's collection?		Yes		No
Escrow and Custodia line 9, or reported an a	I Arrangem mount on Fo	ents. Com orm 990, Pa	plete if the art X, line 2	organization ansv 1.	wered 'Yes' on Forn	1 990, P 	art IV	,
1 a Is the organization an agent, truste on Form 990, Part X?						Yes		No
b If 'Yes,' explain the arrangement in	Part XIII and c	complete the fo	ollowing table:	:				
						Amount		
c Beginning balance								
d Additions during the year								
e Distributions during the year								
f Ending balance								
2 a Did the organization include an am b If 'Yes,' explain the arrangement in						_		No
Part V Endowment Funds. C	omplete if the	o organiza	tion answe	red 'Ves' on Form	2 000 Part IV line	10		
Fact V Lindowillelit Fullds. C	(a) Current y		(b) Prior year	(c) Two years back			ur years	hack
1 a Beginning of year balance	(a) Current y	cai (D) Filor year	(c) Two years back	(u) Thice years back	(6)10	ui years	DUCK
b Contributions	}					+		
								
c Net investment earnings, gains, and losses								
d Grants or scholarships			 		-	 		
e Other expenditures for facilities and programs			·			-		
f Administrative expenses						 		
g End of year balance	of the overent v	l lass and balan		olumn (a)) hald as:		<u> </u>		
2 Provide the estimated percentage	•	rear end balar	ice (iirie 1g, ci	Diumin (a)) neiu as.				
 a Board designated or quasi-endowr b Permanent endowment ► 	- Nem		6					
c Temporarily restricted endowment	· · · · · · · · · · · · · · · · · · ·	Q.						
The percentages on lines 2a, 2b, a		ough 100%						
•		•						
3 a Are there endowment funds not in organization by:	the possession	of the organi	zation that are	e held and administer	ed for the	Г	Yes	No
(i) unrelated organizations						. 3a(i)	103	- -
(ii) related organizations						- ``+		
b If 'Yes' on line 3a(ii), are the relate								
4 Describe in Part XIII the intended	•	•				. 35	1	<u> </u>
Part VI Land, Buildings, and			downent rune					_
Complete if the organization	• •		on Form 99	0, Part IV, line 11	a. See Form 990, F	art X, li	ne 10	·
Description of property		(a) Cost or oth (investm		(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) B	look va	lue
1 a Land								
b Buildings								
c Leasehold improvements	ŀ							
d Equipment	t t			<u> 159,878.</u>	159,878.			0.
e Other								
Total. Add lines 1a through 1e. (Column	ı (d) must equa	l Form 990, P	art X, column	(B), line 10c.)		Ļ <u> </u>		0.
BAA					Sche	dule D (Fo	om 990	ე) 2015

Partivil Investments — Other Securities. Complete if the organization answered "	Yes' on Form 990.	Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)	<u>. </u>	
(D) (E)		
(F)		<u> </u>
<u>C</u>	-	
(H)		
(1)		
Total (Column (b) must equal Form 990, Part X, column (B) line 12) ▶		美国企业的
Part VIII Investments - Program Related.	Ves' on Form 990	Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)	(0) 00000	
(2)		
(3)		
(4)		
(5)		
(7)		
(8)		-
(10)		
Total (Column (b) must equal Form 990, Part X, column (B) line 13) ▶	-	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
Part IX Other Assets.		
	Yes' on Form 990, scription	Part IV, line 11d. See Form 990, Part X, line 15.
(1)	scription	(b) Book Value
(2)		
(3)		
(4)		
(7)	·	
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B)	line 15.)	· · · · · · · · · · · · · · · · · · ·
Other Liabilities. Complete if the organization answered 'Yes' on I	Form 990 Part IV line 1	11e or 11f See Form 990 Part X line 25
(a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3) (4)		
(5)		
(6)		
(7)		
(8)		
<u>(9)</u>		
(10)		
Total (Column (b) must equal Form 990, Part X, column (B) line 25)		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foo		ancial statements that reports the organization's liability for uncertain
tax positions under FIN 48 (ASC 740) Check here if the text of the footnote		

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	29 <u>2</u>
b Donated services and use of facilities	
c Recoveries of pnor year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII)	
c Add lines 4a and 4b	4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Total Total Total and of and 40. (This must oqual total 500, Tarti, mo 12.)	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	
	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	Return.
Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	Return.
Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	Return.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	Return.
Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	Return.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	Return.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	Return.
Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	Return.
Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	Return.
Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2 b Prior year adjustments 2 c c d Other losses 4 d Other (Describe in Part XIII.) 2 e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b 4 b Other (Describe in Part XIII.) 4 b Other (Describe in Part XIII.) 4 4 b	Return. 1 2 e 3
Reconciliation of Expenses per Audited Financial Statements With Expenses per I Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	Return. 1 2e 3

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

SCHEDULE J (Form 990)

Compensation Information

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

CLUB FOR GROWTH

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

Open to Public Inspection

Schedule J (Form 990) 2015

Employer identification number

20-4681603

aj	til Questions Regarding Compensation				
				Yes	No
1 :	a Check the appropriate box(es) if the organization provided any VII, Section A, line 1a. Complete Part III to provide any relevant	of the following to or for a person listed on Form 990, Part information regarding these items		•	
	First-class or charter travel	Housing allowance or residence for personal use		. 1	
	Travel for companions	Payments for business use of personal residence	•		
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees	1	*	
	Discretionary spending account	Personal services (e.g , maid, chauffeur, chef)			ų.
ı	b if any of the boxes on line 1a are checked, did the organization reimbursement or provision of all of the expenses described about 10 percentage.		1 b		
	·		9.45	<i>2</i> 4 3 .	3.5
2	Did the organization require substantiation pnor to reimbursing trustees, and officers, including the CEO/Executive Director, required to the control of the		2		
3	Indicate which, if any, of the following the filing organization use CEO/Executive Director Check all that apply. Do not check any establish compensation of the CEO/Executive Director, but exp	boxes for methods used by a related organization to			
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	X Form 990 of other organizations	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Se or a related organization:	ection A, line 1a with respect to the filing organization			
	a Receive a severance payment or change-of-control payment?		4 a	ĺ	Х
ı	b Participate in, or receive payment from, a supplemental nonqua	alified retirement plan?	4 b		Х
(c Participate in, or receive payment from, an equity-based compe	ensation arrangement?	4 c		Х
	If 'Yes' to any of lines 4a-c, list the persons and provide the app	olicable amounts for each item in Part III.			
	Only section 501(c)(3) 501(c)(4), and 501(c)(29) organization				
5	contingent on the revenues of:				
	a The organization?		5 a		X
١	b Any related organization?		5 b		X
	If 'Yes' to line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did contingent on the net earnings of	I the organization pay or accrue any compensation			
	a The organization?		6a		Х
	b Any related organization?		6 b		Х
	If 'Yes' on line 6a or 6b, describe in Part III.		1.70		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did payments not described on lines 5 and 6? If 'Yes,' describe in F		7		×
8	Were any amounts reported on Form 990, Part VII, paid or accito the initial contract exception described in Regulations section	n 53,4958-4(a)(3)?			
	If 'Yes,' describe in Part III		8		Х
9		presumption procedure described in Regulations	9		

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

Schedule J (Form 990) 2015 CLUB FOR GROWTH
||Parity | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

		(B) Breakdown of	Breakdown of W-2 and/or 1099-MISC compensation	: compensation			7 (1)	
(A) Name and Title		(I) Base compensation	(II) Bonus and incentive compensation	(III) Other reportable compensation	and other deferred compensation	(D) Nontaxable benefits	(E) Otal of columns(B)(i)-(D)	(r) Compensation in column (B) reported as deferred on prior Form 990
DAVID MCINTOSH	ε	372,450.	0	0	0	28,137.	400,58	0 0
1 PRESIDENT	E	0	0	0	0	- 1		0
CHUCK PIKE	ε !	211,260.	- 40,000		0 1	6 <u>, 428.</u>	- 257,68	·0
CE PRESIDENT			- 1 0	0 0	0 0	٦ (-	
KRISTIN COBB 3 VP OF DEVELOPMENT	€ €	$-\frac{143}{458}$.	<u>20</u> -0 <u>00</u>	0	O	54343-	- <u>158,851.</u>	- 0 0 - 0
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ВАА			TEEA4102 10/12/15	2			Schedule.	Schedule J (Form 990) 2015

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

Schedule J (Form 990) 2015

TEEA4103 10/12/15

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.

2015 Open to Public

Department of the Treasury Internal Revenue Service

Pt VI, Line 19

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization 20-4681603 CLUB FOR GROWTH THE CHIEF FINANCIAL OFFICER AND INDEPENDENT ACCOUNTANT PREPARE THE 990, WHICH IS THEN REVIEWED BY AT LEAST TWO KEY EMPLOYEES OR OFFICERS. Pt VI, Line 11b TO ENSURE THE ORGANIZATION OPERATES IN A MANNER CONSISTENT WITH ITS EXEMPT PURPOSE AND DOES NOT ENGAGE IN ACTIVITIES THAT COULD JEOPARDIZE ITS TAX EXEMPT STATUS, PERIODIC REVIEWS ARE CONDUCTED. THE PERIODIC REVIEWS SHALL, AT A MINIMUM, INCLUDE THE FOLLOWING SUBJECTS: a) WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE, BASED ON COMPETENT SURVEY INFORMATION, AND THE RESULT OF ARM'S LENGTH BARGAINING. b) WHETHER PARTNERSHIPS, JOINT VENTURES, AND ARRANGEMENTS WITH MANAGEMENT ORGANIZATIONS CONFORM TO THE ORGANIZATION'S WRITTEN POLICIES, ARE PROPERLY RECORDED, REFLECT REASONABLE INVESTMENT OR PAYMENTS FOR GOODS AND SERVICES, FURTHER EXEMPT PURPOSES AND DO NOT RESULT IN INUREMENT, IMPERMISSIBLE PRIVATE BENEFIT OR IN AN EXCESS BENEFIT Pt VI, Line 12c TRANSACTION. THE PRESIDENT'S SALARY IS DETERMINED BY THE BOARD, AS WELL AS STUDYING OTHER FORM 990'S AND PUBLIC DOCUMENTS. Pt VI, Line 15a EMPLOYEES' COMPENSATION IS DETERMINED BY STUDYING OTHER FORM 990'S AND PUBLIC DOCUMENTS, AS WELL AS INFORMATION FROM PROFESSIONAL ASSOCIATIONS, THEN PRESENTED TO AND APPROVED BY THE BOARD. Pt VI, Line 15b

AVAILABLE UPON REQUEST.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

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

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

CLUB FOR GROWTH

Department of the Treasury Internal Revenue Service Name of the organization

OMB No 1545-0047 2015

Open to Public

Employer identification number

20-4681603

(g) Sec 512(b)(13) controlled entity? Schedule R (Form 990) 2015 ŝ × × (f)
Direct controlling
entity Yes Part IIs Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had CLUB FOR GROWTH CLUB FOR GROWTH (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (**d)** Total income N/AN/A(d) Exempt Code section TEEA5001 06/01/15 (c)
Legal domicile (state or foreign country) 527 527 (c) Legal domicile (state or foreign country) (b) Primary activity 20 200 one or more related tax-exempt organizations during the tax year. (b) Primary activity BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. POLITICAL POLITICAL ACTIVITY ACTIVITY (a) (a) Name, address, and EIN (if applicable) of disregarded entity (1) CLUB FOR GROWTH-PAC SEPERATE SEGREGATED FUND

2001 L STREET, NW

WASHINGTON, DC 20036 1 | 1 | 1 | (a) Name, address, and EIN of related organization CLUB_ FOR_GROWIH ACTION 2001 L STREET, NW MASHINGTON, DC 20036 20-8404170 27-3167202 1 | 1 | 1 | ন্ত্ৰ Ξ 9 3 3 ල

Schedule R (Form 990) 2015 CLUB FOR GROWTH

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

						\ 		1		L		19
(a) Name, address, and EIN of related organization	(b) Primary activity d	(c) Legal domicile (state or foreign	(d) Direct controlling entity		come Share of total sted, income Itax	of total me	(g) Share of end-of-year assets	(n) Disproportonate tionate allocations?	Code V-UBI amount in box 1S? 20 of Schedule K-1 (Form	General or General or x managing le partner?	•	(K) Percentage ownership
	. 0	country)		512-514)			i	Yes	No 1065)	Yes	å	
(1)		:										
(2)									:			
(3)				:								
		-										
Parkily Identification (Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization a line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	zations T e related	axable as	a Corporatio	n or Trust C a corporation	omplete if or trust d	the organiza uring the tax	tion answ year.	is a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, lions treated as a corporation or trust during the tax year.	orm 990,	Part IV	,
(a) Name, address, and EIN of related organization	of related organization	(briman)	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp,		(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership		(I) Sec 512(b)(13) controlled entity?
				country)	enuty	or trus	()				Yes	S S
(1)											· <u>-</u> ·	
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(2)												
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(3)	1 1											
	1 1 1 1 1 1 1 1 1 1											
												
BAA				TEEA	TEEA5002 06/01/15					Schedule R (Form 990) 2015	₹ (Form	990) 2015

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Predominant income (related, unrelated, cycluded from 13x under	Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
			sections 512-514)	Yes No			Yes No		Yes No	
(1)										
									_	
(2)										
									-	
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							_			
				-						_
(8)										
ВАА			TE	TEEA5004 06/01/15				Schedu	Schedule R (Form 990) 2015	990) 2015

Part VIII Supplemental Information
Provide additional information for responses to questions on Schedule R (see instructions).