efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Department of the Treasury

DLN: 93493114004039

OMB No 1545-0047

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private ▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>

Open to Public Inspection

Interna	ıl Revenue	Service	P Information about	Torrit 990 and its instructions is at i	www INS gov	<u>/10/11/550</u>		Inspection
A F	or the 2	<b>017</b> ca		ing 10-01-2017 , and ending 09	9-30-2018			
	ck ıf applı		C Name of organization The Foundation of the Federal Bar			D Employ	er identif	ication number
	ldress cha ime chand	-	Association	52-074	1814			
	ime chang itial returr		Doing business as					
	al return/te					E Telepho	ne number	-
	nended re plication p		Number and street (or P O box if mail 1220 North Fillmore Street No 444	I is not delivered to street address) Roor	n/suite			
ШΑμ	iplication p	benuing	City or town, state or province, countr	y and ZIP or foreign postal code		(5/1) 2	181-9100	
			Arlington, VA 22201	,,a		<b>G</b> Gross re	eceipts \$ 7	02.074
			F Name and address of principal	officer	H(a) I	s this a group re	•	,
			Stacy King 1220 North Fillmore Street No 444	1		subordinates?		□Yes <b>☑</b> No
			Arlington, VA 22201	T		Are all subordina ncluded?	tes	☐ Yes ☐No
I Ta	x-exempt	status	<b>✓</b> 501(c)(3)	nsert no )		f "No," attach a	list (see	instructions)
J W	ebsite:	► http	//www fedbar org/Foundation asp:	x	H(c) (	Group exemption	number	<b>&gt;</b>
					1. 1/2		M Chat	
<b>K</b> For	m of orgar	nızatıon	Corporation Trust Associa	ation ☐ Other ►	L Year or	formation 1954	M State	of legal domicile DC
Pa		Sumr						
			cribe the organization's mission or i	most significant activities ation, advance the science of jurispi	rudence and	facilitate the adr	ministrati	on of justice, and
e C			ovements in the practice of federal		- dacrice and	racinitate the dar	mm ser der	on or justice, and
ğ.								
/em	_							
	2 Ch	eck this	box $\blacktriangleright$ $\square$ if the organization disc	ontinued its operations or disposed	of more than	25% of its net a		1
<b>&gt;</b> 5	1			body (Part VI, line 1a)			3	12
Activities & Governance	1			he governing body (Part VI, line 1b) ndar year 2017 (Part V, line 2a) .			5	12
3	1		• •	ssary)			6	12
AC	1		·	/III, column (C), line 12			7a	0
	1			Form 990-T, line 34			7b	0
						Prior Year		Current Year
Qı	<b>8</b> Co	ntributi	ons and grants (Part VIII, line 1h)			233,	786	167,748
Ravenue	<b>9</b> Pro	ogram s	ervice revenue (Part VIII, line 2g)		0	(		
R	1		nt income (Part VIII, column (A), lii	•		24,	992	56,770
	1		enue (Part VIII, column (A), lines 5				796	243
				equal Part VIII, column (A), line 12	2)	261,		224,761
	1		d sımılar amounts paıd (Part IX, co aıd to or for members (Part IX, colı			191,	0	184,440
۰,	1	-	· · · · · · · · · · · · · · · · · · ·	efits (Part IX, column (A), lines 5–1	o)		0	
56			nal fundraising fees (Part IX, colum	, , , , , , , , , , , , , , , , , , , ,	°'		0	
Expenses			using expenses (Part IX, column (D), line					
Ā	1		enses (Part IX, column (A), lines 1	· -		63,	343	54,999
	<b>18</b> To	tal expe	enses Add lines 13–17 (must equal	l Part IX, column (A), line 25)		254,	899	239,439
	<b>19</b> Re	venue l	ess expenses Subtract line 18 fron	n line 12		6,	675	-14,678
Se3					Begir	ining of Current \	/ear	End of Year
Net Assets or Fund Balances	20 To	tal asse	ts (Part X, line 16)			1,072,	167	1,081,211
AB			ities (Part X, line 26)			1,0,2,	0	3,020
F E	1		or fund balances Subtract line 21			1,072,	167	1,078,191
Pa	rt II	Signa	ture Block				l	
				ed this return, including accompany Declaration of preparer (other than				
	nowledg		, it is true, correct, and complete	beclaration of preparer (other than	officer ) is ba.	sed off all illionin	acion or	Willelf preparer has
	11	\				2010 04 22		
Sign	,	Signatu	re of officer			2019-04-22 Date		
Here		Stacy K	ing Executive Director					
			print name and title					
			int/Type preparer's name	Preparer's signature	Date		PTIN	
Pai	d	<u> </u>	rı A Collingsworth	Lorı A Collingsworth	2019-04-17	self-employed	P0063981	<del>y</del>
	parer		m's name Rogers & Company PLLC			Firm's EIN ► 58		
Use	Only		m's address ► 8300 Boone Boulevard Su	uite 000		Phone no (703)	893-0300	
		_	Vienna, VA 22182					, П.,
May t	ne IRS c	liscuss	this return with the preparer shown	n above? (see instructions)			<u> </u>	∕es □No

Form	990 (2017	7)					Page <b>2</b>
Par	tiiii S	tatement	of Program Service	Accomplis	hments		
		heck if Sched	lule O contains a respon	se or note to a	any line in this Part III		🗹
1	Briefly de	escribe the or	rganization's mission		•		
			esearch and education, e of federal law	advance the s	cience of jurisprudence	and facilitate the administration of j	ustice, and foster
2	Did the o	rganization u	undertake any significan	t program serv	vices during the year w	hich were not listed on	
	the prior	Form 990 or	990-EZ?				☐ Yes ☑ No
	If "Yes,"	describe thes	se new services on Sche	dule O			
3	Did the o	rganization d	ease conducting, or ma	ke significant i	changes in how it condi	ucts, any program	
	services?	٠					🗌 Yes 🗹 No
	If "Yes,"	describe thes	se changes on Schedule	0			
4	Section 5	501(c)(3) and		s are required	to report the amount of	largest program services, as measu of grants and allocations to others, th	
4a	(Code		) (Expenses \$	67,000	including grants of \$	67,000 ) (Revenue \$	)
	See Addıtı	onal Data					,
4b	(Code		) (Expenses \$	21,582	ıncludıng grants of \$	21,582 ) (Revenue \$	)
	See Addıtı	onal Data					
4c	(Code		) (Expenses \$	5,000	including grants of \$	5,000 ) (Revenue \$	)
	See Addıtı	onal Data					
	See Addı	tional Data T	able				
4d	Other pro	ogram servic	es (Describe in Schedul	•			
	(Expense	es \$	95,949 inclui	ding grants of	\$ 90,8	358 ) (Revenue \$	)
4e	Total pr	ogram serv	ice expenses ▶	189,5	31		

or X as applicable

**Checklist of Required Schedules** 

Yes

Page 3

No

Nο

No

Nο

Nο

Nο

Nο

Νo

Nο

No

Nο

Form **990** (2017)

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . .

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . . . . .

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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 . . . . . . . . . . . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right 6 7

8

9

10

11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

17

18

19

Yes

Yes

Yes

23

29

31

36

IV	Checklist of Required Schedules	(continued)	)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Part IV Checklist of Required Schedules (continued)			
		Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

204	the digulization operate one of more hospital facilities. If Test, complete serieure H	20a		N
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	Yes	

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

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,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . . . . . 🥞

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . . . . . . . . .

Yes

Νo

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Νo

Nο

Nο

Nο

Nο

Nο

Nο

Yes

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

Yes

Yes

Form 990 (2017)

	990 (2017)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 3  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
L	this return	2ь		
D	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-20		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country ►			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	2. 100, to line but of 50, and the organization metorin 0000°1°	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6</b> a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
02	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
а		4 l		
	Gross income from other sources (Do not net amounts due or paid to other sources			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
b		12a		
ь .2а	against amounts due or received from them )	12a		
b L2a b	against amounts due or received from them )	12a		
b l.2a b	against amounts due or received from them )			
b .2a b .3	against amounts due or received from them )	12a		
2a b 3 a	against amounts due or received from them )			
b.2a b.3 a b c	against amounts due or received from them )			No

orm	990 (2017)			Page <b>6</b>
Par	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions		nse to li	
_	Check if Schedule O contains a response or note to any line in this Part VI			<b>✓</b>
Se	ction A. Governing Body and Management	- 1	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12		res	140
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	<b>8</b> a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	: Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	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 taxable entity during the year?	16a		No
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?	16b		
Se	ction C. Disclosure	'		
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records  Stacy King Executive Director 1220 North Fillmore Street No 444 Arlington, VA 22201 (571) 481-9100			

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

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

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

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

<b>(A)</b> Name and Title	(B) Average hours per week (list any hours		ne b	ox, ι n of	t ch unle: ficei	ss pers	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	₹	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) Jeanette M Bazıs	1 00	Х		x				0	0	0
President	0 00	^		Ĺ				0	0	0
(2) Henry M Quillian Vice President	0 50	Х		×				0	0	0
(3) Juanıta B Sales Lee	0 50							_		_
Treasurer	0 00	Х		X				0	0	0
(4) James R Hammerschmidt Secretary	0 50	Х		х				0	0	0
(5) Sharon O'Grady	0 50									
Historian and Fellows Chair	0 00	Х		X				0	0	0
(6) Carl P Gilmore	0 50							_	_	_
Director	0 00	Х						0	0	0
(7) Col Winston M Haythe Director	0 50	Х						0	0	0
(8) Martha Hardwick Hofmeister Director	0 50	Х						0	0	0
(9) Hon Pamela Mathy	0 50									
Director	0 00	Х						0	0	0
(10) Sheri H Mecklenburg Director	0 50	Х						0	0	0
(11) Nestor Mendez Director	0 50							0	0	0
	0 00 0 50									
(12) Matthew Moreland Director		Х						0	0	0
(13) Stacy King	0 00 2 00									
Executive Director	42 00			х				0	185,083	20,454
							1	1	l	I

compensation from the organization ▶ 0

Part VII

**(F)** Estimated

Page 8

	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	than c	ne b	ox, ι in of	t che unle: ficer	and a	son	Rep comp fro organiz	(D) cortable censation m the zation (W-		n d (W-	(F) Estimated amount of othe compensation from the organization ar		
		for related organizations below dotted line)	Institutional Trustee Individual trustee or director		Office	Key employee	Highest compensated emptovee	Former	2/105	99-MISC)	2/1099-MISC	-)	relati organiza	ed	
												$\perp$			
												+			
												+			
	Sub-Total						<u> </u>					$\bot$			
С	Total from continuation sheets to P	· · · · · · · · · · · · · · · · · · ·		•	•	•	•			0	185,0	83		20,454	
2	Total number of individuals (including of reportable compensation from the			e list	ed a	bove	e) who	rec	eived mo	ore than \$	100,000				
3	Did the organization list any <b>former</b>	officer director	or trust	مم لاء	ev e	mnle	0.000	or hi	ahest co	mnensate	d employee on	_	Yes	No	
•	line 1a? If "Yes," complete Schedule			•			• •	•	• •	• •	• • •	3		No	
4	For any individual listed on line 1a, is organization and related organization individual										m the	4	Yes		
5	Did any person listed on line 1a recei services rendered to the organization					,			-		dividual for	5		No	
S	ection B. Independent Contract	ors													
1	Complete this table for your five high from the organization Report compe											mpens	sation		
	Name a	(A) and business addre	ess							Des	(B) cription of services	$\Box$	(C Compen		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

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

Part '			espanse or note to a	ny line in this Part VII	т		П
	CHECK II SCHEDUR	e O Contains a i	esponse of note to a	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
10	1a Federated campaign	ns	1a		revenue		312-314
Contributions, Gifts, Grants and Other Similar Amounts	<b>b</b> Membership dues .		1b	_			
5 10 10	<b>c</b> Fundraising events	[	1c	_			
. <u>Ş</u>	<b>d</b> Related organization	ns	1d	_			
<u>≅</u> . ₹	e Government grants (co	ontributions)	1e	_			
ns. Sim	<b>f</b> All other contributions,			-			
ë S	and similar amounts no above	ot included	<b>1f</b> 167,748	3			
tributio Other	g Noncash contributio						
Contr and (	"" " — —		_				
<u>ة</u> ك	h Total.Add lines 1a-1	f	<b>•</b>	167,748			
пe			Busine	ess Code			
ven	2a 						
ą.	b ————						
ΜCέ	с —						
₹	d						
'an	G						
Program Service Revenue	<b>f</b> All other program ser			•	•		
Ь	<b>gTotal.</b> Add lines 2a-2f		<u> </u>				
	<b>3</b> Investment income (in similar amounts) .			er ▶ 27,17	8		27,178
	4 Income from investme			<b>&gt;</b>			
	<b>5</b> Royalties			<b>•</b>			
		(ı) Real	(II) Personal				
	<b>6a</b> Gross rents						
	<b>b</b> Less rental expenses			_			
	c Rental income or (loss)						
	ا <b>d</b> Net rental income or	r (loss)		.			
		(ı) Securitie	s (II) Other				
	<b>7a</b> Gross amount from sales of	499	,698				
	assets other than inventory		,				
	<b>b</b> Less cost or			_			
	other basis and sales expenses	470	,106				
	C Gain or (loss)	29	,592				
	<b>d</b> Net gain or (loss) .		•	29,59	2		29,592
	<b>8a</b> Gross income from fu (not including \$	undraising even of					
Other Revenue	contributions reporte	d on line 1c)					
₹ V	See Part IV, line 18		a 7,4				
Ä	<b>b</b> Less direct expenses		<b>b</b> 7,2				241
her	c Net income or (loss)  9a Gross income from ga			24	-3	_	24:
ŏ	See Part IV, line 19						
			a				
	<b>b</b> Less direct expenses		b				
	c Net income or (loss)		ctivities	_			
	10aGross sales of invent returns and allowance						
			a[				
	<b>b</b> Less cost of goods s	old	b				
	C Net income or (loss)						
	Miscellaneous  11a	Kevenue	Business Code	=			
	<del></del>						
	b		_				
	U						
	С						
	I All C						
	d All other revenue .	114					
	e Total. Add lines 11a-						
	12 Total revenue. See	Instructions .		224,76	1	0	0 57,01 Form <b>990</b> (2017
							Form 900 (201)

Part IX Statement of Europianal Expanses				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all col	lumns All other orga	inizations must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	165,040	165,040		
2 Grants and other assistance to domestic individuals See Part IV, line 22	19,400	19,400		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
<b>10</b> Payroll taxes				
11 Fees for services (non-employees)				
a Management	29,300		29,300	
<b>b</b> Legal				
c Accounting	6,900		6,900	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	4,861		4,861	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	243		243	
12 Advertising and promotion				
13 Office expenses	2,759		2,759	
<b>14</b> Information technology				
15 Royalties				
<b>16</b> Occupancy				
17 Travel	4,693		4,693	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	5,543	5,091	452	
<b>20</b> Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	700		700	
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				
<u>b</u>				
C				
d				
e All other expenses	222.422	100 501	10.000	_
25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	239,439	189,531	49,908	0
Check here ► ☐ If following SOP 98-2 (ASC 958-720)				

1

2

3

20

26

27

28

29

31

32

33

34

Fund Balances

Assets or 30

Net

End of year

Page **11** 

30,593 6,020

45,862

986.476

12,260

3,020

3,020

913,220

164.971

1,078,191

1.081.211

Form **990** (2017)

1.081,211

## Check if Schedule O contains a response or note to any line in this Part IX .

Cash-non-interest-bearing										
Savings and temporary cash investments										

Pledges and grants receivable, net . . . Accounts receivable, net .

(A)

Beginning of year

34,380

11.026

62,808

1

2

3

4

5

6

8 9

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

0

867,182

204.985

1,072,167

1.072.167

938.860

25.093

1,072,167

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 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

4 II of Schedule L . . . . . . . Part II of Schedule L Notes and loans receivable, net .

Assets

Inventories for sale or use .

Prepaid expenses and deferred charges .

10a basis Complete Part VI of Schedule D

Less accumulated depreciation 10b Investments—publicly traded securities .

10a Land, buildings, and equipment cost or other 11 12

Investments—other securities See Part IV, line 11 . Investments—program-related See Part IV, line 11 .

13

Intangible assets . . . . . Other assets See Part IV, line 11 . . . . . **Total assets.**Add lines 1 through 15 (must equal line 34) . . .

14 15 16 17 Accounts payable and accrued expenses

18 Grants payable . . . 19

Deferred revenue . . . Tax-exempt bond liabilities . . . . . . Escrow or custodial account liability Complete Part IV of Schedule D

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 .

21 Liabilities 22 23 24

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . 25 and other liabilities not included on lines 17-24)

Other liabilities (including federal income tax, payables to related third parties, Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 .

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

complete lines 27 through 29, and lines 33 and 34.

Unrestricted net assets

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

☐ Both consolidated and separate basis

2c

3a

3b

Yes

No

Form 990 (2017)

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Consolidated basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

### Additional Data

Software ID:

Software Version:

**EIN:** 52-0741814

Name: The Foundation of the Federal Bar

Form 990 (2017)

Form 990, Part III, Line 4a:

Association

Minnesota Donor Advised Fund This donor advised fund was established by the Foundation of the Federal Bar Association in conjunction with the Association's chapter Distributions from the fund are made at the Foundation's discretion and must be in line with the Foundation's mission

Form 990, Part III, Line 4b:

Chapter Community Outreach Grants The Foundation provides funding to support community service or outreach/pro bono projects that involve FBA chapter participation Projects must address the need for legal services in the community or fall under any component of the Foundation's mission Grant applications are accepted twice during

Projects flust address the fleet for legal services in the community of an united any component or the Foundation's fiscal year (June 15th and December 15th). Currently the maximum grant amount is \$10,000 and the number of grants awarded each year will be

dependent upon available funding and the number and quality of applications. All chapters are encouraged to apply

# Form 990, Part III, Line 4c: Ilene and Michael Shaw Public Service Awards Made possible by the generous contributions of Ilene and Michael Shaw, the Federal Bar Association each year seeks to recognize the many public service programs sponsored by FBA chapters nationwide. Designed to assist and encourage members in providing service to their communities,

the Ilene and Michael Shaw Public Service Award not only gives needed funds to continue such worthwhile efforts, but also provides \$5,000 of seed money to plan and implement public service programs. The Ilene and Michael Shaw Young Lawyer Public Service grant enables FBA chapters to provide service to the public through the development and implementation of public service projects and pro-bono law-related services. In order to encourage an increased and continued commitment to public service responsibility by young lawyers, these projects must be administered under the auspices of a chapter Younger Lawyers Committee.

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code 5.000 ) (Revenue \$ (Expenses \$ 5.000 including grants of \$ Kintner Public Service Scholarship The Public Service Scholarship provides \$5,000 as assistance to a graduating high school senior planning to

lattend a four year college or university. At least one of the parents (or guardians) of the student must be a current federal government attorney or federal judge and member of the Federal Bar Association

including grants of \$ (Code (Expenses \$ (Revenue \$ Moot Court Competition The Foundation provides financial support to the Thurgood Marshall Memorial Moot Court Competition, sponsored by the

Federal Bar Association's Younger Lawyers Division

### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code including grants of \$ (Expenses \$

Elaine R "Boots" Fisher Award This award is intended to stimulate, encourage, and recognize exemplary community, public and charitable service by members of the FBA. The Foundation makes an annual charitable contribution of \$1,000 to an organization for which an FBA member has performed outstanding public service

) (Revenue \$

including grants of \$ (Code (Expenses \$ 5.091 ) (Revenue \$ The Fellows program was established in 2001 to provide recognition to individuals who have demonstrated exceptional commitment to and

leadership within both the Federal Bar Association and the legal community. Each Fellow makes a personal commitment to financially support the work of the Foundation. These charitable contributions support the Foundation's many programs and initiatives, including Chapter Community Outreach Grants, scholarships, research, education and awards

### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Expenses \$

law student attending an ABA accredited law school

(Code

Judicial Research and Education From time to time, the Foundation provides support for the conduct of research, programs, and education relating to the federal courts and federal jurisprudence. This program provides funding and other support for analytical research and educational programs and activities on a broad range of subject matters, including the history and role of the federal court system and the judiciary, the structure and operation of the courts, the independence of the judiciary, federal jurisprudence, and the relevance of the rule of law to society

(Code ) (Expenses \$ 5,000 including grants of \$ 5,000 (Revenue \$ )

The Robert A McNew Law Student Scholarship This new scholarship promotes the practice of federal law by awarding a scholarship of \$5,000 to a

including grants of \$

(Revenue \$

# Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code ) (Expenses \$ 8,800 including grants of \$ 8,800 ) (Revenue \$ ) Diversity Grant Supports educational, community service, or outreach projects or programs with a diversity focus that involve FBA Chapter,

(Code ) (Expenses \$ 56,658 including grants of \$ 56,658) (Revenue \$ )
The Hurricane Disaster Fund supports FBA Chapters, Sections, Divisions, and Members - and local legal and other organizations working to provide legal services to impacted communities in the aftermath of Harvey, Irma, Jose, and Maria A committee will administer the fund and make

Section, Division, or member participation. Interested groups are encouraged to apply

sure applications meet the eligibility and evaluation criteria

### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code including grants of \$

12.000

) (Expenses \$

bring students a hands-on learning experience and empower communities. The program is an initiative for FBA chapters to work with their local courts in order to make an impact within communities across the nation. The Foundation of the Federal Bar Association will provide funding for participating chapters and sections to conduct community outreach programs with the local federal courts Planned events included "schoolhouse to courthouse" events for middle school and high school students to observe courtroom proceedings, high school mock trials, tours of various agencies, and the opportunities to observe live court procceedings

Sponsorship of FBA National Community Outreach Project. This program is a defining legal education community outreach program designed to

12,000 ) (Revenue \$

(Code including grants of \$ (Expenses \$ ) (Revenue \$ Northern District of California Chapter Donor Advised Fund. This donor advised fund was established by the Foundation of the Federal Bar Association in conjunction with the Association's chapter Distributions from the fund are made at the Foundation's discretion and must be in line

with the Foundation's mission

## Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code ) (Expenses \$ 3,400 including grants of \$ 3,400 ) (Revenue \$ )

Civics Essay Contest Hundreds of Middle School and High School students from around the country competed in the Inaugural Civics Essay Contest The topic of this year's contest was "What does an Impartial Judiciary Mean to Me?"

efil	e GR	APHIC prii	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493114004039
SC	H <b>ED</b> m 99	ULE A		Public (	Charity Staturganization is a sect	ion 501(c)(3) o empt charitable	organization or trust.	ort	2017
	ŕ	f the Treasury	<b>▶</b> Inf	ormation abou	► Attach to Form It Schedule A (Form	990 or 990-EZ		ictions is at	Open to Public
Interna Nam	ıl Reven e of th	nue Service he organiza			<u>www.irs.g</u>	ov/form990.		Employer identific	Inspection ation number
Assoc		on of the Feder	аі ваг					52-0741814	
	rt I				us (All organization			See instructions.	
	organiz		•		it is (For lines 1 thro	- '			
1		·		•	sociation of churches				
2		A school de	scribed in <b>se</b>	ection 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
3		A hospital o	r a cooperat	ive hospital ser	vice organization desc	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).	
4			esearch orga and state _	inization operat	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5		(b)(1)(A)	( <b>iv).</b> (Compl	ete Part II )	t of a college or unive				ped in <b>section 170</b>
6	Ш	•	·	-	governmental unit de				
7	<b>✓</b>	section 17	0(b)(1)(A)	<b>(vi).</b> (Complete	•			ınıt or from the genera	al public described in
8		A communi	ty trust desc	ribed in <b>sectior</b>	170(b)(1)(A)(vi)	(Complete Part I	Ι)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				ege or university or a
10		from activit	ies related to income and	o its exempt fur unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (k implete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
11		An organiza	ition organiz	ed and operated	dexclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	l organizations (	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>i09(a)(1)</b> or <b>se</b> d	ction 509(a)(2	). See <b>section 509(</b> a	
а		<b>Type I.</b> A so	upporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting on t of the sup	organization sup porting organiza	ervised or controlled i				
С		Type III f	ınctionally		and C. supporting organizatio ons) You must com				ted with, its
d		Type III n functionally	on-function	nally integrate The organizatio	<b>d.</b> A supporting organi n generally must satis	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	` '
e		Check this	oox if the org	ganization recei	et IV, Sections A and ved a written determin	nation from the II		pe I, Type II, Type II	. functionally
f	Enter			ion-functionally d organizations	integrated supporting	OIGAIIIZALION			
g				-	ipported organization(	s)			
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
				<u> </u>					
Tota	I								

instructions

Page 2

III. If the organization fa	ails to qualify ur	nder the tests lis	ted below, plea	se complete Pari	: III.)					
Section A. Public Support										
Calendar year	(2) 2012	(b) 2014	(a) 2015	(4) 2016	(a) 2017	(f) Total				

	ÌII. If the organization fa	ils to qualify und	er the tests liste	d below, please	complete Part	III.)		
S	ection A. Public Support			•	•			
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e)	2017	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and					(0)		
	membership fees received (Do not include any "unusual grant")	224,401	88,133	149,549	233,786		167,748	863,617
2	Tax revenues levied for the							
	organization's benefit and either paid							
	to or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge	224 401	88,133	149,549	233,786		167 749	863,617
	<b>Total.</b> Add lines 1 through 3	224,401	00,133	149,549	233,700		167,748	663,617
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							260,635
	line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)							
6	Public support. Subtract line 5 from							602.002
	line 4							602,982
S	ection B. Total Support							
	Calendar year	(a)2013	<b>(b)</b> 2014	(c)2015	(d)2016	(e)?	2017	(f)Total
	(or fiscal year beginning in) ▶	<u> </u>			, ,	(0)2		
7	Amounts from line 4	224,401	88,133	149,549	233,786		167,748	863,617
8	Gross income from interest,							
	dividends, payments received on	29,343	41,417	35,289	23,005		27,178	156,232
	securities loans, rents, royalties and	, i	·	,	r		· 1	
9	income from similar sources							
9	Net income from unrelated business activities, whether or not the							
	business is regularly carried on							
10	Other income Do not include gain or							
	loss from the sale of capital assets							
	(Explain in Part VI )							
11	Total support. Add lines 7 through							1,019,849
	10							1,015,045
12	Gross receipts from related activities, e	etc (see instruction	ıs)			12		59,616
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth t	ax year as a secti	on 501(	(c)(3) orgar	nization,
	check this box and stop here						▶□	
	ection C. Computation of Public						· · · · <u> </u>	-
	Public support percentage for 2017 (lin		_	lumn (f))		14		59 120 %
	Public support percentage for 2016 Sch			(.,,		_		
					4.4 22	15		61 480 %
16a	<b>33 1/3% support test—2017.</b> If the				14 is 33 1/3% or	more, c	neck this b	
	and <b>stop here.</b> The organization qualif							▶ ☑
b	<b>33 1/3% support test—2016.</b> If the	e organization did r	ot check a box on	line 13 or 16a, ar	nd line 15 is 33 1/3	3% or m	nore, check	this
	box and <b>stop here.</b> The organization	qualifies as a publi	cly supported orga	nızatıon				▶ □
17a	10%-facts-and-circumstances test				13, 16a, or 16b,	and line	14	
_, 4	is 10% or more, and if the organization							
	in Part VI how the organization meets t	the "facts-and-cırcı	ımstances" test Ti	ne organization qu	ualifies as a public	ly supp	orted	
	organization							ightharpoons

b 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly ightharpoonssupported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,	)	
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6 ) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
Ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI )						
13	Total support. (Add lines 9, 10c,						
14	11, and 12)  First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and <b>stop here</b>			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	<b>016</b> Schedule A, I	Part III, line 17			18	
	<b>331/3% support tests—2017.</b> If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the	·			
	determination				
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b in Part I, answer (b) and (c) below				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				

c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use			
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

```
defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct  The organization satisfied the Activities Test. Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Qualified set-aside amounts (prior IRS approval require			
Other distributions (describe in <b>Part VI</b> ) See instructio			
Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to wh details in <b>Part VI</b> ) See instructions	sive (provide		
Distributable amount for 2017 from Section C, line 6			
Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2017		
	Other distributions (describe in Part VI) See instruction  Total annual distributions. Add lines 1 through 6  Distributions to attentive supported organizations to whole details in Part VI) See instructions  Distributable amount for 2017 from Section C, line 6  Line 8 amount divided by Line 9 amount  Section E - Distribution Allocations (see	Other distributions (describe in Part VI) See instructions  Total annual distributions. Add lines 1 through 6  Distributions to attentive supported organizations to which the organization is respondetails in Part VI) See instructions  Distributable amount for 2017 from Section C, line 6  Line 8 amount divided by Line 9 amount  Section E - Distribution Allocations (see (i))	Other distributions (describe in Part VI) See instructions  Total annual distributions. Add lines 1 through 6  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions  Distributable amount for 2017 from Section C, line 6  Line 8 amount divided by Line 9 amount  Section E - Distribution Allocations (see (i) Underdistributions

details in <b>Part VI</b> ) See instructions							
9 Distributable amount for 2017 from Section C, line 6							
10 Line 8 amount divided by Line 9 amount							
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017				
1 Distributable amount for 2017 from Section C, line 6							
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions							
3 Excess distributions carryover, if any, to 2017							
а							
<b>b</b> From 2013							

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
<b>b</b> From 2013			
c From 2014			
<b>d</b> From 2015			
e From 2016			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			

Schedule A (Form 990 or 990-EZ) (2017)

i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. . . . . . **b** Excess from 2014. . . . . c Excess from 2015. . . . . **d** Excess from 2016. . . . . e Excess from 2017. . . . .

instructions)

See instructions

3j and 4c 8 Breakdown of line 7

## **Additional Data**

instructions)

### Software ID: Software Version:

**EIN:** 52-0741814

Name: The Foundation of the Federal Bar Association

Page 8

Schedule A (Form 990 or 990-EZ) 2017 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

## **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.

DLN: 93493114004039 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

Name of the organization **Employer identification number** The Foundation of the Federal Bar Association 52-0741814 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) 67,000 Aggregate value of grants from (during year) 67,000 8,787 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ✓ Yes □ No. Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ✓ Yes □ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2017

Par	t III	Organizations Maintaining Col	lections of Art, F	listori	cal T	reas	ures, or	Other:	Similar A	ssets (	'continued)
3		the organization's acquisition, accession (check all that apply)	n, and other records,	check	any of	the fo	ollowing ti	hat are a	sıgnıfıcant	use of it	s collection
а		Public exhibition		d		Loar	or excha	inge prog	rams		
b		Scholarly research		е		Othe	er				
c		Preservation for future generations									
4	Provide Part	de a description of the organization's col KIII	lections and explain	how the	ey furtl	her th	e organız	atıon's ex	empt purp	ose in	
5		g the year, did the organization solicit o s to be sold to raise funds rather than to							ılar	□ Y	es 🗆 No
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		m 990	, Part	IV,	ıne 9, or	reporte	d an amo	unt on	Form 990, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermed	ıary for	contri	butior	ns or othe	r assets i	not	□ <b>Y</b>	es 🗆 No
b	If "Y∈	es," explain the arrangement in Part XIII	and complete the fo	llowing	table		Γ		-	Amount	
c	Begin	ining balance					Ī	1c			
d	Addıt	ions during the year					Ī	1d			
е	Dıstrı	butions during the year					[	1e			
f	Endın	ng balance					[	1f			
2a	Did th	ne organization include an amount on Fo	rm 990, Part X, line	21, for	escrov	v or cı	ustodial a	ccount lia	bility?		es 🗆 No
b	If "Ye	es," explain the arrangement in Part XIII	Check here if the ex	vnlanati	ion has	s heer	nrovideo	l in Part )	(III		
	art V	Endowment Funds. Complete if									·· <u> </u>
			(a)Current year		rior yea				(d)Three ye		(e)Four years back
<b>1</b> a	Beginn	ing of year balance									
b	Contrib	outions									
С	Net inv	estment earnings, gains, and losses									
d	Grants	or scholarships									
е		expenditures for facilities ograms									
f	Admını	strative expenses									
g	End of	year balance									
2 a		de the estimated percentage of the curre d designated or quasi-endowment <b>&gt;</b>	ent year end balance	(line 1	g, colu	mn (a	a)) held as	5			
b	Perm	anent endowment 🟲									
С	Temp	orarily restricted endowment <b>&gt;</b>									
	The p	ercentages on lines 2a, 2b, and 2c shou	ld equal 100%								
3а	orgar	here endowment funds not in the posses nization by nrelated organizations	sion of the organizat	ion that	t are h	eld ar	nd admini	stered for	the	্র	Yes No
b	(ii) r	elated organizations  s' on 3a(ii), are the related organization	ns listed as required (	 on Sche	 Idule R					3	a(ii)
4		ribe in Part XIII the intended uses of the	· ·			•	•			· ∟	
Pa	rt VI	Land, Buildings, and Equipmen	nt.								
		Complete if the organization ansv	vered "Yes" on For								
	Descri	ption of property (a) Cost or oth (investme		or other	basis (	other)	(c) Accı	umulated d	epreciation		(d) Book value
1a	Land										
b	Buildin	gs									
С	Leaseh	old improvements					1				_
		nent					1				
	Other						1				
		lines 1a through 1e (Column (d) must e	qual Form 990, Part .	X, colur	nn (B)	, line	10(c)).	. 1	<b>&gt;</b>		0

	See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)		(b) Book value		(c) Method of va or end-of-year	
	al derivatives					
2) Closely- 3)Other	held equity interests	_				
<b>4</b> )						
3)						
E)						
))						
≣)						
·)						
G)						
٦)						
otal. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12 )	•				
art VIII	Investments—Program Related.  Complete if the organization answered 'Yes' on Form 9	990, P	art IV, lı	ne 11c. See Fo	rm 990, Part )	(, line 13.
	·		ook value	•	(c) Method of va or end-of-year	aluation
L)					or cha or year	TIATROC VAIAC
2)						
3)						
4)						
5)						
5)						
7)						
B)						
9)						
otal. (Colum	nn (b) must equal Form 990, Part X, col (B) line 13 )					
Part IX	Other Assets. Complete if the organization answered 'Yes'	on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
	Other Assets. Complete if the organization answered 'Yes'  (a) Description	on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	art X, line 15  (b) Book value
-)		on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
1)		on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
1) 2) 3)		on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
2)		on Form	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
2) 3) 1) 5)		on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
3)		on For	n 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
(i) (i) (ii) (iii)		on For	n 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
(i) (i) (ii) (ii) (iii)		on For	n 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(a) Description		m 990, Pa			
1) 2) 3) 4) 5) 7) 33) 9)	imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer					(b) Book value
1) 2) 3) 4) 5) 7) 3) otal. (Colu	(a) Description		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 8) otal. (Colu	imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 8) Part X	(a) Description  Imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.  (a) Description of liability		es' on Fo			(b) Book value
2) 3) 5) 6) 7) 8) Part X) Federal (2)	(a) Description  Imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.  (a) Description of liability		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 6) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 7) 7) 7) 8) 7) 8) 8) 8)	(a) Description  Imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.  (a) Description of liability		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 6) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 7) 7) 7) 8) 7) 8) 8) 8)	(a) Description  Imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.  (a) Description of liability		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 6) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 7) 6) 7) 6) 7) 6) 7) 8) 6) 7) 8) 8) 8) 8)	(a) Description  Imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.  (a) Description of liability		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 6) 7) 6) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 8) 6) 8) 8) 8) 8) 8) 8)	(a) Description  Imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.  (a) Description of liability		es' on Fo			(b) Book value
1) 2) 3) 4) 5) 6) 7) 6) 8) Part X  1) Federal ( 2) 3) 4) 5)	(a) Description  Imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.  (a) Description of liability		es' on Fo			(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) otal. (Colu	(a) Description  Imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.  (a) Description of liability		es' on Fo			(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9)  otal. (Colu Part X  1) Federal 1  2) 3) 4) 5) 7)	(a) Description  Imn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.  (a) Description of liability		es' on Fo			(b) Book value

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Page 4

239.439

Schedule D (Form 990) 2017

5

Schedule D (Form 990) 2017

Part XI

5

Part XIII

See Additional Data Table

Return Reference

**Supplemental Information** 

а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a					4,861			
b	Other (Describe in Part XIII )	4b								
С	Add lines <b>4a</b> and <b>4b</b>							4c		4,861
5	Total revenue Add lines ${f 3}$ and ${f 4c.}$ (This must equal Form 990, Part I, line 12 )							5		224,761
Par	XII Reconciliation of Expenses per Audited Financial Statem	nents	W	ith	Exp	oer	ises per F	letur	n.	
	Complete if the organization answered 'Ves' on Form 000 Pari	+ T\/ 1		. 17-						

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements . . . . . 241,785 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . . . 2a 2b 

2c

2d Other (Describe in Part XIII ) . . . . . . 7,207 d

Add lines 2a through 2d . . 2e 7,207

3 234,578 3 Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . 4a 4,861 4b b

Add lines **4a** and **4b** . . . . . . . . . . . . . 4c 4,861

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

Explanation

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Page <b>5</b>		Schedule D (Form 990) 2017
	ormation <i>(continued)</i>	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2017

## **Additional Data**

Software Version: **EIN:** 52-0741814 Name: The Foundation of the Federal Bar

Supplemental Information

Software ID:

Association

Return Reference Part X, Line 2

Explanation Management evaluated the Foundation's tax positions and concluded that that there are no s ignificant uncertain tax positions that qualify for either recognition or disclosure in th e accompanying financial statements

pplemental Information					
Return Reference	Explanation				
Part XI, Line 2d - Other Adjustments	Fundraising event expenses 7,207				

Su

Supplemental Information	
Return Reference	Explanation
Part XII, Line 2d - Other Adjustments	Fundraising event expenses 7,207

s

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLI	N: 934931140	04039
Schedule I (Form 990)		Governments	Other Assistan	s in the Unite	d States		0	47	
Department of the Treasury Internal Revenue Service			ation answered "Yes,"  ▶ Attach to Form le I (Form 990) and its	າ 990.				Open to Public Inspection	
Name of the organization The Foundation of the Federal Association	Bar						yer identific 41814	ation number	
	mation on Grants								
the selection criteria use  Describe in Part IV the c	ed to award the grants organization's procedu	or assistance? res for monitoring the u	se of grant funds in the U	nited States				✓ Yes	□ No
			and Domestic Governme ditional space is needed	ents. Complete if the o	rganization answered "Yes	" on Form 990, I	Part IV, line	21, for any recip	ient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descrij noncash as:		(h) Purpose o or assistance	f grant
(1) See Addıtıonal Data									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
		-	s listed in the line 1 table				<b>•</b>		7
For Paperwork Reduction Act No				Cat No 50055			Sch	edule I (Form 990	) 2017

Page **2** 

Schedule I (Form 990) 2017

(6) FFBA Civics Essay Contest 3,400 O N/A N/A (6)

requesting entity. Some grants awardees are required to submit a follow-up report.

Schedule I (Form 990) 2017

Part I, Line 2

Part II, line 1, Column (h)

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

organizations working to provide legal services to impacted communities in the aftermath of Harvey, Irma, Jose, and Maria

(7) Part IV **Return Reference** Explanation

Before any grant is approved, the Foundation performs a review of the specific grant request and conducts an assessment on the needs and purpose/mission of the

Chapter Community Outreach Grants Chapter Community Outreach Grants provide funding to support community service projects and pro bono activities that involve FBA chapter participation. National Community Outreach Grants. National Community Outreach Grants provide funding for FBA chapters to work with their local courts. in order to make an impact within communities across the nation. Moot Court Competition Sponsorship. Moot Court Competition Sponsorship- Funding from the Foundation of the Federal Bar Association to sponsor the Younger Lawyers Division of the Federal Bar Association's Annual Thurgood Marshall Memorial Moot Court Competition in Washington, D C. The Ilene and Michael Shaw Young Lawyer Public Service grant. The Ilene and Michael Shaw Young Lawyer Public Service grant. enables FBA chapters to provide service to the public through the development and implementation of public service projects and pro-bono law-related services. The Robert A McNew Law Student Scholarship This new scholarship promotes the practice of federal law by awarding a scholarship of \$5,000 to a law student attending an ABA accredited law school Hurricanes Disaster Fund Hurricanes Disaster Grants support FBA Chapters, Sections, Divisions, and Members - and local legal aid and other

## **Additional Data**

## Software Version: **EIN:** 52-0741814 Name: The Foundation of the Federal Bar Association Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (c) IRC section if applicable or assistance organization grant cash (book, FMV, appraisal, non-cash assistance or government assistance other)

## Bay Area Legal Services Inc 59-1171886 501(c)(3) 16,658 N/A N/A 1302 North 19th Street Suite

- Hurricane Disaster Fund 400
- N/A 41-0909036 501(c)(3) 6,000 N/A MN Chapter Grant toward the funding of

legal representation for

low-income immigrants as they work to achieve

cıtızen status

- Tampa, FL 33605 Immigrant Law Center of Minnesota
- 450 N Syndicate Suite 200 St Paul, MN 55104

Software ID:

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-2722664 501(c)(3) 25.000 IN/A LatinoJustice PRLDEF- Avuda N/A Hurricane Disaster Fund Legal Huracan Maria

99 Hudson St 14th Fl New York, NY 10013

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

Louisiana Civil Justice Center 20-4478544 501(c)(3) 15.000 IN/A Hurricane Disaster Fund N/A 601 St Charles Avenue New Orleans, LA 70130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 41-1412710 501(c)(3) 9.000 N/A IN/A MN Chapter Grant Mid-Minnesota Legal Assistance toward assisting low-430 1st Avenue N income clients litigate matters in federal court.

Diversity Grant

Minneapolis, MN 55401 including in connection with enforcing federal housing rights

N/A Minnesota Chapter Federal Bar 41-1383195 501(c)(6) 14.500 N/A Chapter Community Outreach Grant/

Association

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

200 S 6th Street Suite 4000

Minneapolis, MN 55402

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Oregon Chapter Federal Bar 93-0965011 501(c)(6) 5.000 N/A IN/A Ilene and Michael Shaw Association Federal Bar Association 200 SW Market St Suite 1900 Younger Lawyer Public

N/A

IN/A

5.500

Service Award

Chapter Community

Outreach Grant/ Nat'l

Comm Outreach Grant

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

501(c)(6)

Portland, OR 97201

1303 Blanding Street

Columbia, SC 29201

Bar Association

South Carolina Chapter Federal

57-1185711

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization arant cash non-cash assistance or assistance or government other) assistance Southern Minnesota Regional 41-1316151 501(c)(3) 5.000 N/A IN/A MN Chapter Grant Legal Services towards promoting and 55 5th Street E Suite 1000 supporting legal Saint Paul, MN 55101 education and research in the practice of federal law

rights abuses living in

N/A The Advocates for Human 36-3292374 501(c)(3) 6,000 N/A MN Chapter Grant Riahts toward the funding of 330 South Second Avenue Ste legal services for survivors of human

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

800 Minneapolis, MN 55401

efil	e GRAPHIC pi	int - DO NOT PROCESS As Fil	ed Dat	a -	DLN: 934	19311	L4004	039
Sch	edule J	Compe	nsat	ion Information	OM	1B No	1545-0	0047
`	n 990)	Complete if the organization  ▶ Complete if the organization	mpenson ansv  Attack	Trustees, Key Employees, and Higl ated Employees vered "Yes" on Form 990, Part IV, n to Form 990. I (Form 990) and its instructions i	line 23.		)17	
•	tment of the Treasurv al Revenue Service			.gov/form990.	sat		ectio	
The	me of the organiza Foundation of the F				Employer identificat	ion nu	ımber	
	ociation				52-0741814			
Pa	rt I Questi	ons Regarding Compensation						
1a		piate box(es) if the organization provide ection A, line 1a Complete Part III to pr					Yes	No_
	First-class	or charter travel		Housing allowance or residence for p	personal use			
	_	companions	닏	Payments for business use of persor				
		nification and gross-up payments	님	Health or social club dues or initiation				
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chauf	feur, chef)			
b		kes in line 1a are checked, did the organ Il of the expenses described above? If "I			ent or reimbursement	1b		
2		tion require substantiation prior to reim				2		
	directors, truste	es, officers, including the CEO/Executive	Directo	r, regarding the items checked in line	1a <sup>7</sup>			
3	organization's C	of any, of the following the filing organizated EO/Executive Director Check all that ap d organization to establish compensation	ply Do	not check any boxes for methods				
	Compens	ation committee		Written employment contract				
		ent compensation consultant		Compensation survey or study				
	☐ Form 990	of other organizations		Approval by the board or compensat	tion committee			
4	During the year related organiza	did any person listed on Form 990, Par tion	t VII, Se	ection A, line 1a, with respect to the fi	ling organization or a			
а	Receive a sever	ance payment or change-of-control payr	nent?			4a		No
b		receive payment from, a supplemental		lified retirement plan?		4b		No
c	Participate in, o	receive payment from, an equity-based	compe	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and provide	the ap	olicable amounts for each item in Part	III			
		), 501(c)(4), and 501(c)(29) organi		•				
5		ed on Form 990, Part VII, Section A, line ontingent on the revenues of	1a, dıd	the organization pay or accrue any				
а	The organization	٦٦				5a		No
b	Any related orga					5b		No
	·	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section A, line ontingent on the net earnings of	1a, dıd	the organization pay or accrue any				
а	The organization					6a		No
b	Any related orga					6b		No
_	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section A, line escribed in lines 5 and 67 If "Yes," descr			i	7		No
8		nts reported on Form 990, Part VII, paid litial contract exception described in Reg			escribe	8		No
9	If "Yes" on line 53 4958-6(c)?	3, did the organization also follow the re	buttable	presumption procedure described in	Regulations section	9		
For I	Danarwork Padı	ction Act Notice, see the Instruction	s for F	orm 990 Cat No. 5	0053T Schedule J	/Form	1 990)	2017

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II 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 (A) Name and Title (D) Nontaxable (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (E) Total of columns (F) Compensation in column (B) reported other deferred benefits (B)(i)-(D)(i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 Stacy King (i) 0 0 0 0 Executive Director 170,083 15.000 11,453 9,001 205,537 (ii)

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2017

efile GRAPH	IC print - DO NOT PROCESS	As Filed Data -		DLN	: 93493114004039				
SCHEDUL (Form 990 or EZ)	990- Complete to pro Form 990 o  **Treasury** Information about	vide information fo or 990-EZ or to prov ▶ Attach to Form : Schedule O (Form	on to Form 990 or 9 responses to specific question ide any additional information 990 or 990-EZ. 990 or 990-EZ) and its instructor/form990.	ons on n.	OMB No 1545-0047  2017  Open to Public Inspection				
The Foundation of t Association	hemol Revenue Service lame of the organization he Foundation of the Federal Bar								
Return Reference			Explanation						
Form 990, Part VI, Section A, line 6	The membership of this corporation on of the chartering act (being 146 if nal Council of the Federal Bar Associates of said National Council in good provide for by bylaw or otherwise	ndividuals), the persor ciation for the year cor	ns who are members of the Nation ncurrent and while they are mem	b					

Return Explanation

Form 990,
Part VI,
Section A,
Inne 7a

Return Explanation

line 7b

Form 990,
Part VI,
Section A,

Return Explanation
Reference

line 11b

Form 990,
Part VI,
Section B.

An independent, outside CPA firm prepares the Form 990 Copies of the 990 draft are distributed to the board, providing an opportunity for any board members to ask questions or add
ress any issues before the final form 990 is filed

Return
Reference

Explanation

line 12c

Form 990,
Part VI,
Section B.

To insure compliance with the Foundation Conflict of Interest Policy each member of the Bo ard of Directors will complete a Conflict of Interest Questionnaire annually. The annual questionnaires will be collected and maintained by the Executive Director.

Return Explanation

line 19

Form 990,
Part VI,
Section C.

The Foundation's governing documents and financial statements are available at its headquarters

Return Explanation
Reference

Form 990,
Part XII, Line

The Foundation's Board of Directors is responsible for oversight of the audit, including s election of the independent accountant. The process is consistent with prior years.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data SCHEDULE R | Related

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

## **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 <a href="https://www.irs.gov/form990"><u>www.irs.gov/form990</u></a>.

2017

**DLN: 93493114004039**OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

The Foundation of the Federal Bar Association							52-0	741814				
Part I Identification of Disregarded Entities Comp	lete If the organ	nization answe	ered "Yes	" on Form	990, Part	IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity		<b>(b)</b> Primary ac	tivity	Legal domi or foreign	c) cıle (state country)	(d) Total inc	ome	(e) End-of-year as	ssets	<b>(f</b> Direct co ent	) ntrolling ity	
Part II Identification of Related Tax-Exempt Organ	<b>izations</b> Comple	ete ıf the orga	inization	answered	"Yes" on F	orm 990,	Part I	V, line 34 be	cause	it had one or	more	
related tax-exempt organizations during the tax  (a)  Name, address, and EIN of related organization		(b) nary activity	Legal do	(c) micile (state gn country)	(d Exempt Co			(e) charity status ion 501(c)(3))	Dır	(f) ect controlling entity	Section (13) co	g) n 512(b ontrolled tity?
(1)Federal Bar Association 1220 North Fillmore Suite 444 Arlington, VA 22201	serving th	ar association e federal er & judiciary		DC	501(c)(6)						Yes	No No
52-0182821  (2)Federal Bar Building Corporation 1220 North Fillmore Suite 444  Arlington, VA 22201	Title Holdi	ng Corporation		DC	501(c)(2)							No
52-0806715												
For Paperwork Reduction Act Notice, see the Instructions for	Form 990.		Ca	t No 5013	5Y				Sche	dule R (Form	990) 2	017

(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		Disprop alloca	tions?	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	ral or Piging on	<b>(k)</b> Percenta owners
								Yes	No		Yes	No	
												$\perp$	
												-	
												_	
Identification of Related Organizates because it had one or more related o						ation answ	vered "Yes	" on Fo	orm 99	90, Part IV,	line :	34	
(a)  Name, address, and EIN of related organization	(b) Primary activity	L do (state	(c) egal micile or foreign	Direct	(d) controlling Type entity (C co	(e) e of entity rp, S corp, r trust)	<b>(f)</b> Share of total Income		(g) of end-o year assets	of- Percei owne	ntage	[(13)	(ı) tion 5 ) cont entity
												. I Y∉	es
		со	untry)										
		со	untry)					<u> </u>					
		со	untry)										
		со	untry)									+	
		со	untry)										
		со	untry)									  -  -	
		со	untry)									  -  -  -	

Schedule R (Form 990) 2017		Page	3
Part V Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes I	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a	1	No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b	ľ	No
c Gift, grant, or capital contribution from related organization(s)	1c	ľ	No
d Loans or loan guarantees to or for related organization(s)	1d	ľ	No
e Loans or loan guarantees by related organization(s)	1e	r	No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	<b>1</b> g	ı	No
h Purchase of assets from related organization(s)	1h	ı	No
i Exchange of assets with related organization(s)	1i	ı	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	1	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	1	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m Y	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	1	No
o Sharing of paid employees with related organization(s)	10	ľ	No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q	ľ	No
r Other transfer of cash or property to related organization(s)	1r	-   r	No
s Other transfer of cash or property from related organization(s)	1s		No

,	,,,,	H		<del>                                     </del>
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q	Reimbursement paid by related organization(s) for expenses	1q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(a) Name of related organization  (b) Transaction Amount involved Method of determining am type (a-s)	ount ı	nvolve	d
<b>(1)</b> Fe	ederal Bar Association M 29,300 Agreement- Admin services			

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

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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	01	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner	g l	<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017