DLN: 93493317058144 OMB No 1545-0047

Form **990** 

Department of the Treasury Internal Revenue Service

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

foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS

generally cannot redact the information on the form ► Information about Form 990 and its instructions is at <a href="www.IRS.gov/form990">www.IRS.gov/form990</a>

A For the 2013 calendar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-2014 C Name of organization
ASSOCIATION FOR RESEARCH ON NON-PROFIT D Employer identification number B Check if applicable Address change ORGANIZATIONS & VOLUNTARY ACTION Name change Initial return E Telephone number Terminated (317)684-2120 City or town, state or province, country, and ZIP or foreign postal code INDIANAPOLIS, IN  $\,$  46202  $\,$ Amended return Application pending G Gross receipts \$ 882,330 Name and address of principal officer H(a) Is this a group return for SHARIO SIDDIOUI ┌ Yes 🗸 No subordinates? 550 WEST NORTH STREET INDIANAPOLIS, IN 46202 **H(b)** Are all subordinates included? Tax-exempt status If "No," attach a list (see instructions) Website: ► WWW ARNOVA ORG H(c) Group exemption number ▶ K Form of organization 
✓ Corporation 
☐ Trust 
✓ Association 
☐ Other ► L Year of formation 1971 M State of legal domicile DC Summary Briefly describe the organization's mission or most significant activities ASSOCIATION FOR RESEARCH ON NONPROFIT ORGANIZATIONS AND VOLUNTARY ACTION (ARNOVA) IS A LEADING INTERDISCIPLINARY COMMUNITY OF PEOPLE DEDICATED TO FOSTERING THROUGH RESEARCH AND EDUCATION THE CREATION, APPLICATION, AND DISSEMINATION OF KNOWLEDGE ON NONPROFIT ORGANIZATIONS, PHILANTHROPY, CIVIL SOCIETY, AND VOLUNTARY ACTION ARNOVA IS THE US - BASED, NATIONAL AND INTERNATIONAL ASSOCIATION THAT CONNECTS SCHOLARS, TEACHERS, AND PRACTICE LEADERS INTERESTED IN RESEARCH ON NONPROFIT ORGANIZATIONS, VOLUNTARY ACTION, PHÍLANTHROPY, AND CIVIL SOCIETY ARNOVA IS A NEUTRAL, OPEN FORUM COMMITTED TO STRENGTHENING THE RESEARCH ABOUT AND HELPING BETTER PRACTICE IN THESE Activities & Governance 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . 4 15 4 Number of independent voting members of the governing body (Part VI, line 1b) . 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) . 5 O **6** Total number of volunteers (estimate if necessary) . . . . . 6 135 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 . 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 158,334 580,520 Revenue 184,860 177,878 Program service revenue (Part VIII, line 2g) . . . Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 1,792 1,381 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 117,907 122,551 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 462.893 882,330 12) . 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 129,523 201,177 Expenses 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . 0 Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright 6,079$ b 17 501,592 396,358 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . 631,115 597,535 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 -168,222 284,795 ን ው Beginning of Current **End of Year** Year 20 Total assets (Part X, line 16) . . 1,050,051 1,324,598 49,806 59,964 21 Total liabilities (Part X, line 26) . . . . . 990.087 1,274,792 22 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge \*\*\*\*\* 2014-11-13 Signature of officer Sign Here SHARIQ SIDDIQUI EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name AMANDA MEKO CPA Preparer's signature P01062615 Paid Firm's name F GREENWALT CPAS INC Firm's EIN > 35-1489521 Preparer Firm's address ▶ 5342 W VERMONT STREET Phone no (317) 241-2999 Use Only INDIANAPOLIS, IN 46224

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

Form	990 (2013)				Page <b>2</b>
Par		n <b>ent of Program Servic</b> Schedule O contains a respo	ce Accomplishments onse or note to any line in this Part III		
EDU PHIL ASS ORG	OVA IS A LEAD CATION THE CR ANTHROPY, CI DCIATION THA ANIZATIONS, V	REATION, APPLICATION, A VIL SOCIETY, AND VOLUN T CONNECTS SCHOLARS, ' /OLUNTARY ACTION, PHIL	COMMUNITY OF PEOPLE DEDICATED IND DISSEMINATION OF KNOWLEDG TARY ACTION ARNOVA IS THE US- FEACHERS, AND PRACTICE LEADERS ANTHROPY, AND CIVIL SOCIETY AF RCH ABOUT AND HELPING BETTER P	E ON NONPROFIT ORGANIZ, BASED, NATIONAL AND INT SINTERESTED IN RESEARCH RNOVA IS A NEUTRAL, OPEN	ATIONS, ERNATIONAL ON NONPROFIT
2	the prior Form 9	ation undertake any significa 990 or 990-EZ? ibe these new services on Sc	nt program services during the year whi	ch were not listed on	┌ Yes ┌ No
3	Did the organize services?		ake sıgnıfıcant changes ın how it conduc	ets, any program	┌ Yes ┌ No
4	expenses Sect	tion 501(c)(3) and 501(c)(4)	accomplishments for each of its three l organizations are required to report the ach program service reported		•
4a	ORGANIZATIONS, ORGANIZATIONS	WHILE PROVIDING NONPROFIT PR	400,856 including grants of \$  IED INTERESTS, HELPING SCHOLARS GAIN INSIGNORESSIONALS WITH CONNECTIONS TO RESEARCH IZENS AND COMMITTEES PRINCIPAL ACTIVITIES GROUPS	H THEY CAN USE TO IMPROVE THE W	ORK OF THEIR
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
<b>4</b> c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)

4d	Other program services (Describe in	n Schedule O)			
	(Expenses \$	including grants of \$	) (Revenue \$	)	
4e	Total program service expenses ►	400,856			

Part IV Checklist of Required Schedu	Part IV	Checklist of	Required	Schedules
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			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V^{\bullet}$	10	Yes	
L1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule $E$	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
L5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and $IV$	16		No
L7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
L8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule $H$	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than $$5,000$ of grants or other assistance to any domestic organization or government on Part IX, column (A), line $1^{\circ}$ If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Νo
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νo
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form 990 (2013)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 32			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
С	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\cdot$ .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
ь	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Νo
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c		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
	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	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		F	orm <b>990</b>	(2013)

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI . . . . . . . . . . . . . . . . . . Section A. Governing Body and Management **1a** Enter the number of voting members of the governing body at the end of the tax 1a 15 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 Enter the number of voting members included in line 1a, above, who are 15 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Yes supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Νo 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Yes Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Each committee with authority to act on behalf of the governing body? . . . . . . . . . . . . . . . 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 . . . . . . . . . . . . Nο **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? . . . . . . . . . . . . . . . 10a Nο **b** If "Yes." did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . 12a 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 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes Yes Did the organization have a written whistleblower policy? . . 13 14 14 Did the organization have a written document retention and destruction policy? . . . . . . . . . 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? a The organization's CEO, Executive Director, or top management official . . . . . . . . . . . . . . 15a Yes 15b Yes 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 16a Νo **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 Section C. Disclosure 17 List the States with which a copy of this Form 990 is required to be filed►IN 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 

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

interest policy, and financial statements available to the public during the tax year

►SHARIQ SIDDIQUI 441 WEST MICHIGAN STREET INDIANAPOLIS, IN 46202 (317) 684-2120

Part VII

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

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

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

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

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

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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more pers	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) FRANCIE OSTROWER PRESIDENT	1 00	х		Х				0	0	(
(2) NUNO S THEMUDO	1 00	х		х				0	0	(
SECRETARY (3) DWIGHT BURLINGAME	1 00	×		х				0	0	(
TREASURER (4) ALAN ABRAMSON	1 00	Х		Х				0	0	(
PRESIDENT-ELECT (5) ANGELA BIES	1 00	х						0	0	(
DIRECTOR (6) JOANNE CARMAN	1 00	х						0	0	
DIRECTOR (7) HECTOR CORDERO-GUZMAN	1 00	Х						0	0	(
DIRECTOR (8) CHAO GUO	1 00	х						0	0	
DIRECTOR (9) JUDITH MILLESEN	1 00	х						0	0	
DIRECTOR (10) JOHN RONQUILO	1 00	Х						0	0	
DIRECTOR (11) JESSICA SOWA	1 00	х						0	0	
DIRECTOR (12) MARK SIDEL DIRECTOR	1 00	х						0	0	(
(13) DAVID SUAREZ DIRECTOR	1 00	х						0	0	
(14) LEHN BENJAMIN DIRECTOR	1 00	х						0	0	1
(15) JOHN MCNUTT	1 00	х						0	0	,
DIRECTOR (16) SHARIQ SIDDIQUI	40 00			х				5,730	89,655	18,156
EXECUTIVE DIRECTOR (17) THOMAS H JEAVONS	40 00			Х				20,446	0	(
FORMER EXECUTIVE DIRECTOR										Form <b>990</b> (2013

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

	(A) Name and Title A verage hours per week (list any hours			than son is	one bot	not bo tha	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		(F Estim amount o compen from	ated of other sation
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099 MISC)	) -	organiz and re organiz	lated
(18)	KATHA KISSMAN	40 00											
INTE	RIM EXECUTIVE DIRECTOR				X				70,716	<u> </u>	0		0
TIVIL	RIM EXECUTIVE DIRECTOR			$\vdash$	$\vdash$	+	+						
					_	<u> </u>							
			1		-	-	-	-					
						$\vdash$							
			<u> </u>		-		<del>                                     </del>			-			
1b	Sub-Total						<u> </u>  ≱-				$\top$		
C	Sub-Total			•	•		<u> </u>				+		
d				•	•		┢┞		96,892	89,65	55		18,156
2	Total number of individuals (including			lieta	e be	hove	e) who	rec					
_	\$100,000 of reportable compensation				cua	DO V	c) wiic	7 166	erved more than				
										г		Yes	No
3	Did the organization list any <b>former</b> of on line 1a? <i>If "Yes," complete Schedule</i>	•		e, ke	y en	nplo	yee, o	r hig	ghest compensate	ed employee			ı
_	• •			•	•	•	•	• •		· · · ·	3		No
4	For any individual listed on line 1a, is organization and related organization:									om tne			
	ındıvıdual										4		No
5	Did any person listed on line 1a recei	ve or accrue com	pensat	tıon f	rom	any	unrel	lated	d organization or i	ndividual for			
	services rendered to the organization	? If "Yes," comple	te Sche	edule	J for	suc	ch pers	son			5		No
												l	
S	ection B. Independent Contrac	tors											
1	Complete this table for your five high- compensation from the organization	•										tay year	
	compensation from the organization	(A)	tion io	i tile	Cale	illua	ii yeai	enc		(B)	1	(C	
	Name and	d business address							Descript	ion of services		Comper	
											$\dashv$		
											耳		
	Total number of independent contracto	rs (including but	not lim	uted .	to +	1050	liete	d ab	ove) who receive	d more than	$\dashv$		
_	. Star maniper of mucpendent contracto	thicluding but		LCU	יט נו		・・・・・コレビリ	น นบเ	, vviio ieceive	4O.C LIIGII	- 1		

\$100,000 of compensation from the organization 🗠

		Check if Schedule O contains a respon	ise or note to any lin	e in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded fror tax under sections 512-514
s s	1a	Federated campaigns 1a					
ant Mu	ь	Membership dues 1b	83,675				
ةِ قِ	c	Fundraising events 1c					
ar /	d	Related organizations 1d					
S,E	e	Government grants (contributions) <b>1e</b>					
iğ iğ	f	All other contributions, gifts, grants, and <b>1f</b>	496,845	i			
Contributions, Giffs, Grants and Other Similar Amounts	_	similar amounts not included above  Noncash contributions included in lines		ļ			
를 <del>할</del>	g	1a-1f \$					
3 ಕ	h	Total. Add lines 1a-1f	1 1 1 E	580,520			
e.			Business Code				
Ke L	2a	CONFERENCE FEES	900099	161,878	161,878		
22	Ь	MANAGING EDITOR STIPEN	900099	16,000	16,000		
M C A	C .						
Ē	d e						
Ē	f	All other program service revenue					
Program Service Revenue		. 5	L .				
	g 3	Total. Add lines 2a-2f  Investment income (including dividen		177,878			
		and other similar amounts)		1,381			1,:
	4	Income from investment of tax-exempt bond	` · · · . H	121 426			121
	5	Royalties	(u) Parsanal	121,436			121,
	6a	(ı) Real	(II) Personal				
	ь	Less rental					
	_ c	expenses Rental income					
	d	or (loss)  Net rental income or (loss)					
	7a	(i) Securities Gross amount from sales of	(II) O ther				
	ь	assets other than inventory Less cost or other basis and					
		sales expenses Gain or (loss)					
	l d	Net gain or (loss)					
	1	Gross income from fundraising	· · · · · · ·				
Other Revenue		events (not including  \$ of contributions reported on line 1c) See Part IV, line 18					
ř		a					
₽ E	ь	Less direct expenses <b>b</b>					
Ó		Net income or (loss) from fundraising Gross income from gaming activities See Part IV, line 19	events 🛌				
	ь	a Less direct expenses b					
	1	Net income or (loss) from gaming acti	vities				
	10a	Gross sales of inventory, less returns and allowances .					
	ь	Less cost of goods sold b					
	1	Net income or (loss) from sales of inve	entory 🛌				
		Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS	900099	1,115	1,115		
	Ь						
	c	All all an array					
	d	All other revenue					ļ

882,330

178,993

12 Total revenue. See Instructions . . . . .

	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All			olete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	( <b>A</b> ) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	120,313	89,400	27,285	3,628
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	62,878	47,819	13,225	1,834
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	17,986	12,510	4,885	591
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	165		165	
С	Accounting	56,296		56,296	
d	Lobbying	,		·	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	23,110	15,902	7,182	26
14	Information technology	11,195	6,010	5,185	20
15	Royalties	11,193	0,010	3,103	
16	•	11,970	1,458	10,512	
17	Occupancy	20,835		6,028	
	Travel	20,835	14,807	6,028	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	150011	150.044		
19	Conferences, conventions, and meetings	158,041	158,041		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	11,645		11,645	
23	Insurance	4,521		4,521	
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)				
а	CONFERENCE SCHOLARSHIPS	34,786	34,786		
b	DEVELOPMENT	26,892		26,892	
c	DIVERSITY INITIATIVE	18,118	18,118		
d	TELEPHONE/FAX/COPIER	7,879		7,879	
e	All other expenses	10,905	2,005	8,900	
25	Total functional expenses. Add lines 1 through 24e	597,535	400,856	190,600	6,079
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2013) Page **11 Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X  $\,$  .  $\,$ (B) (A) End of year Beginning of year 678,705 668,762 1 1 2 Savings and temporary cash investments . . . 279.533 2 280.014 290,000 3 3 Pledges and grants receivable, net . . . . . 4 18,103 4 16,021 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets 6 7 7 5 472 8 Inventories for sale or use . . . . 8 25,801 9 9 36 567 Prepaid expenses and deferred charges . . . . . . 10a Land, buildings, and equipment cost or other basis Complete 40,777 Part VI of Schedule D 10a 35.615 10b 5.162 b Less accumulated depreciation . . . . 14.624 10c 27,813 28.072 11 11 Investments—publicly traded securities . . . . . 12 Investments—other securities See Part IV, line 11 . . 12 13 13 Investments—program-related See Part IV, line 11 . . . 14 14 15 15 1,050,051 16 1,324,598 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . 22,986 16,557 17 17 18 18 19 36,978 19 33,249 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . 23 24 Unsecured notes and loans payable to unrelated third parties . . . . 24 Other liabilities (including federal inco 25

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule  D		25	
Total liabilities. Add lines 17 through 25	59,964	26	49,806
Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
Unrestricted net assets	795,065	27	869,801
Temporarily restricted net assets	175,847	28	385,816
Permanently restricted net assets	19,175	29	19,175
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		30	
Paid-in or capital surplus, or land, building or equipment fund		31	

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances . . . . . . . . . . .

26

27 28 29

30 31 32

33

34

Assets or Fund Balances

볼

1,274,792

1.324.598

32

33

34

990,087

1.050.051

Part XI	Form 990
Reconcilliation	(2013)
of	
Z	

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О
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N

	Check if Schedule O contains a response or note to any line in this Part XI $\cdot$		
μ .	Total revenue (must equal Part VIII, column (A ), line 12)....................................	1	882,330
2	Total expenses (must equal Part IX, column (A), line 25)	2	597,535
ω	Revenue less expenses Subtract line 2 from line 1	ω	284,795
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $\cdot$ .	4	990,087
G	Net unrealized gains (losses) on investments	5	-90
0	Donated services and use of facilities	6	
7	Investment expenses	7	
<b>∞</b>	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O )	9	0
10	Net assets or fund balances at end of year $$ Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,274,792
ă	art XIII Financial Statements and Reporting		

-「Cash ▼ Accrual 「Other

Were the organization's financial statements compiled or reviewed by an independent accountant?

2a

2 0

2Ь

Yes

2a

a separate basis, consolidated basis, or both If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on Separate basis Consolidated basis igcaps Both consolidated and separate basis

σ Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both

▼ Separate basis Consolidated basis ☐ Both consolidated and separate basis

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

Şα As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

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

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

σ

ЗЬ Şα 20 Yes 2 0

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## **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

# **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

► Information about Schedule A (Form 990 or 900-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

Open to Public Inspection

		i <b>e organ</b> i I FOR RES	IZATION EARCH ON NOI	N-PROFIT					Employer	dentiri	cation n	umber	-
			UNTARY ACTIO						23-73780	21			
Pa	rt I	Reas	on for Pu	blic Charity Sta	<b>tus</b> (All org	ganızatıons	must com	plete this p	art.) See ır	struct	ons.		
The	organı	zatıon ıs	not a privat	te foundation becaus	eitis (Forl	ınes 1 throu	gh 11, check	k only one bo	x )				
1	Γ	A chur	ch, conventi	on of churches, or a	ssociation of	churches de	escribed in <b>s</b>	ection 170(b	)(1)(A)(i).				
2	Γ	A scho	ol described	in <b>section 170(b)(1</b>	. <b>)(A)(ii).</b> (At	tach Schedu	le E)						
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descrı	bed in <b>sectio</b>	n 170(b)(1)	(A)(iii).				
4	Γ	A medi	cal research	n organization opera	ted ın conjun	ction with a	hospital des	cribed in <b>sec</b>	tion 170(b)(	1)(A)(i	ii). Ente	r the	
	_			ty, and state									_
5	J	_		erated for the benefi	_	or universit	y owned or o	perated by a	government	al unit	describe	ed in	
	_			<b>A)(iv).</b> (Complete P	•								
6	<u>_</u>			local government o	-				* * * * *				
7	Г	_		at normally receives		•	support from	a governme	ntal unit or fi	om the	general	public	3
8	$\vdash$			on 170(b)(1)(A)(vi). described in <b>sectio</b> i			nlete Dart II	τ \					
9	, V			at normally receives					utions mam	hore bun	foos ar	d aroa	
9	١٠			ities related to its e									55
		•		oss investment inco	•	-			. ,				
		•		ganization after June				•		cax) II o	ili busili	C33C3	
10	$\vdash$	•		ganized and operated	•			•	•				
11	<u>'</u> -	-		ganized and operated ganized and operated						0 60 551	out the	nurno	sos of
11	,			ly supported organiz									
			•	bes the type of supp			. , .	•	. ,. ,			-/(-/-	
		a	Type I	<b>b</b>	┌ Type II	I - Functiona	ally integrate	ed <b>d</b> $\Gamma$ 7	Гуре III - No	n-funct	ionally	ıntegra	ated
e	Γ	•	-	ox, I certify that the	_						•	•	
				on managers and ot	her than one	or more pub	licly support	ed organizat	ions describ	ed in se	ction 50	09(a)(	1) or
f			1509(a)(2)	received a written d	etermination	from the IR	Sthatitisa	Type I Type	II orTvne	III sun	nortina	organı	zation
-			this box					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,		p = 1 g	o. g	
g			-	2006, has the organ	zation accep	ted any gift	or contributi	on from any	of the				
			ng persons?									-	<del></del>
	(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  11g						11g(i)	Yes	No				
							11g(ii)		<del>                                     </del>				
	<b>–</b>						11g(iii)		-				
h Provide the following information about the supported organization(s)													
n		Piovide	tile lollowii	ig illiorillation about	the Support	eu organizati	on(s)						
	i) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is	he	(v) Did you	ı notıfv	(vi) Is	he	(	vii) An	nount of
•	suppor		(,	organization	organizati		the organi	•	organizati		`	-	etary
O	rganiza	zation (described on col (i) listed in in col (i) of your						col <b>(i)</b> organized supp					
				lines 1 - 9 above	your gove	-	suppor	ቲ?	ın the U	S?			
				or IRC section (see	docume	nt ′							
				instructions))						1			
			I	,,	Yes	l No	Yes	No	Yes	No	I		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	oction 7 ti abite oupper c	_								
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2	013	(f) Total		
1	Gifts, grants, contributions, and									
	membership fees received (Do not									
	include any "unusual grants ")									
2	Tax revenues levied for the									
_	organization's benefit and either									
	paid to or expended on its									
2	behalf The value of services or facilities						$\overline{}$			
3	furnished by a governmental unit to									
	the organization without charge									
4	<b>Total.</b> Add lines 1 through 3									
5	The portion of total contributions									
	by each person (other than a governmental unit or publicly									
	supported organization) included on									
	line 1 that exceeds 2% of the									
	amount shown on line 11, column									
6	(f) <b>Public support.</b> Subtract line 5 from									
	line 4									
Section B. Total Support										
Cale	endar year (or fiscal year beginning	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> 2	013	<b>(f)</b> Total		
7	in) ► A mounts from line 4									
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources									
9	Net income from unrelated									
_	business activities, whether or not									
	the business is regularly carried									
10	on Other income Do not include gain									
-0	or loss from the sale of capital									
	assets (Explain in Part IV )									
11	<b>Total support</b> (Add lines 7 through									
12	10) Gross receipts from related activiti	es. etc. (see insti	ructions)			12				
13	·		•	third fourth or f	ifth tax vear as a		() organ	zation check		
this box and stop here										
S	ection C. Computation of Pub									
14	Public support percentage for 2013		•	11, column (f))		14				
15	Public support percentage for 2012	Schedule A, Par	t II, line 14			15				
16a	33 1/3% support test—2013. If the	•		•	ne 14 is 33 1/3%	or more,	check th	_		
h	and <b>stop here.</b> The organization qua <b>33</b> 1/3% <b>support test—2012.</b> If the				and line 1E ic 22	1/20/- 05 5	noro ch	► F		
U	box and <b>stop here.</b> The organization				allu lille 15 is 55	1/370 01 1	iore, cir	eck tills ▶□		
17a	10%-facts-and-circumstances test-				ie 13, 16a, or 16l	b, and line	e 14	•		
	is 10% or more, and if the organiza									
	in Part IV how the organization mee	ets the "facts-and	1-cırcumstances"	test The organiz	zation qualifies as	a public	y suppo	orted ►		
ь	organization 10%-facts-and-circumstances test-	<b>–2012.</b> If the oras	anization did not o	heck a box on lir	ne 13, 16a. 16b. d	or 17a. ar	nd line	F-1		
_	15 is 10% or more, and if the organ	nization meets the	e "facts-and-circu	ımstances" test,	check this box ai	nd <b>stop h</b>	ere.			
	Explain in Part IV how the organiza	tion meets the "fa	acts-and-circums	tances" test The	e organization qua	alıfıes as	a public	· —		
18	supported organization <b>Private foundation.</b> If the organizat	uon did not check	a hov on line 12	16a 16b 17a 4	or 17h chack this	hav and	500	▶		
10	rivate roundation. If the organizations	.ion ala not check	. a DUX UII IIIIE 13,	10a, 10D, 1/a, (	or 170, CHECK CHIS	טוום גטט פ	566	▶□		

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	( <b>d)</b> 2012	<b>(e)</b> 20	13	( <b>f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	205,936	471,625	109,038	158,334		580,520	1,525,453
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	219,411	251,571	253,075	222,531		177,878	1,124,466
	business under section 513	219,411	231,371	233,073	222,331		177,070	1,124,400
4	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							
6	the organization without charge <b>Total.</b> Add lines 1 through 5	425,347	723,196	362,113	380,865		758,398	2,649,919
	Amounts included on lines 1, 2,	123,317	, 23, 130	302,113	300,003		730,330	2,013,313
74	and 3 received from disqualified							0
	persons							
b	Amounts included on lines 2 and 3							
	received from other than							
	disqualified persons that exceed							0
	the greater of \$5,000 or 1% of the							
_	amount on line 13 for the year Add lines 7a and 7b							0
8	Public support (Subtract line 7c						-	
٥	from line 6 )							2,649,919
Se	ction B. Total Support			l	·			
Cale	ndar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 20	13	(f) Total
9	in) ► A mounts from line 6	425,347	723,196	362,113	380,865		758,398	2,649,919
10a	Gross income from interest,	,.	,	,	,			
IUu	dividends, payments received on							
	securities loans, rents, royalties	141,916	143,851	134,411	55,463		122,817	598,458
	and income from similar							
	sources							
b	Unrelated business taxable							
	income (less section 511 taxes) from businesses acquired after							
	June 30, 1975							
c	Add lines 10a and 10b	141,916	143,851	134,411	55,463		122,817	598,458
11	Net income from unrelated	,	,	,	,			,
	business activities not included							
	ın lıne 10b, whether or not the							
	business is regularly carried on							
12	Other income Do not include							
	gain or loss from the sale of capital assets (Explain in Part	725	1,220	913	1,688		1,115	5,661
	IV)							
13	Total support. (Add lines 9, 10c,	567,988	060.267	407.427	420.016		002 220	2.254.020
	11, and 12)		868,267	497,437	438,016		882,330	3,254,038
14	First five years. If the Form 990 is f	or the organizatio	n's fırst, second,	thırd, fourth, or f	ifth tax year as a	501(c)(3	3) organ	′ - <del>-</del>
	check this box and stop here	in Commont Da						<u> </u>
	ection C. Computation of Public Support percentage for 2013			12 column (f))		145		01.120.00
	11 1	, ,	, ,	13, Column (1))		15		81 430 %
16	Public support percentage from 201		*			16		79 790 %
	truestment income persontage for				n (f\)	1 1		40.777
17	Investment income percentage for 2				n (r))	17		18 390 %
18	Investment income percentage from					18		20 110 %
19a	<b>33</b> 1/3% support tests—2013. If the						%, and	
	more than 33 1/3%, check this box a						h 22	<b>₩</b> ▼
ь	33 1/3% support tests—2012. If the	•			,			1/3% and line 18

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

ocilednie w (Fo	Scheddie W (1911) 230 01 230-65) 5013	Fage
Part IV	Supplemental Information. Provide the explanations required	by Part II, line 10; Part II, line 17a or
	17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	ation. (See instructions).
	Facts And Circumstances Test	
Retu	Return Reference Explanation	

Schedule A (Form 990 or 990-EZ) 2013

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OMB No 1545-0047

## **SCHEDULE D**

Department of the Treasury

(Form 990)

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990)

Open to Public

emai	Revenue Service and its instruct	.ioiis is at <u>www.irs.gov/roriii550</u> .		Inspection
ASS	ne of the organization OCIATION FOR RESEARCH ON NON-PROFIT		Emp	oloyer identification number
	ANIZATIONS & VOLUNTARY ACTION			7378021
Pa	rt I Organizations Maintaining Donor Adv organization answered "Yes" to Form 990		unds	or Accounts. Complete if th
		(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
2	Aggregate contributions to (during year)			
}	Aggregate grants from (during year)			
ļ	Aggregate value at end of year			
,	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	_	or adv	rsed <b>┌ Yes ┌ No</b>
•	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?			
)aı	t II Conservation Easements. Complete if	the organization answered "Ves" to	) Forn	, ,
<u>.</u>	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	anization (check all that apply) or education) Preservation of an Preservation of a c	histor ertifie	rically important land area d historic structure
	easement on the last day of the tax year	r		T
	T-1-1	·		Held at the End of the Year
а	Total number of conservation easements	•	2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified histo	· · ·	2c	
d	Number of conservation easements included in (c) acc historic structure listed in the National Register	quired after 8/17/06, and not on a	2d	
}	Number of conservation easements modified, transferr	red, released, extinguished, or terminate	d by th	ne organization during
	the tax year 🛌			
ļ	Number of states where property subject to conservat	ion easement is located ►		
;	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	lling of	f violations, and <b>Yes No</b>
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easen	nents o	during the year
	<b>•</b>			
,	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	durın	g the year
3	Does each conservation easement reported on line 2(o	d) above satisfy the requirements of sec	tion 1	70(h)(4)(B)(ı) <b>Yes                                   </b>
)	and section 170(h)(4)(B)(II)?  In Part XIII, describe how the organization reports collaboration balance sheet, and include, if applicable, the text of the			nse statement, and
	the organization's accounting for conservation easeme	ents		
	Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	ner Similar Assets.
.a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ets held for public exhibition, education,	or rese	earch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ets held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$
	(ii) Assets included in Form 990, Part X			<b>▶</b> \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		r finan	
а	Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$
	,			

Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Ir</u>	<u>easur</u>	es, or Ot	<u>:ner</u>	Similar	<u>Asse</u>	<b>ts</b> (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, cl	necka	any of t	he follo	wing that a	re a s	significant	use of	ıts	
а	Public exhibition		d	Γ	Loan	or exch	ange progra	ams				
b	Scholarly research		e	$\vdash$	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ollections and expla	ain hov	w the	y furthe	r the or	ganızatıon'	sexe	empt purpo	se in		
5	During the year, did the organization solicit o								lar	_		_
	assets to be sold to raise funds rather than t								" -		Yes	☐ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answered	ı "Ye	s" to Fori	n 990	<u>,                                     </u>	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	edıary	for c	ontribu	tions or	other asse	ets n	ot	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		_					
							_	_		Amou	nt	
C	Beginning balance						<u>_</u>	1c				
d	Additions during the year						_:	1d				
e	Distributions during the year						<u>_</u> :	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?							Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	T Check here if the	e expl	anatio	on has	been pr	ovided in P	art X	III			Γ
Pa	rt V Endowment Funds. Complete											
		(a)Current year		Prior y			o years back				Four y	ears back
1a	Beginning of year balance	20,449			20,245		20,125		19,	175		19,175
b	Contributions											
c	Net investment earnings, gains, and losses				23		181			120		950
d	Grants or scholarships				23		101			120		730
e	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance	20,449			20,449		20,426		20,	245		20,125
2	Provide the estimated percentage of the curr	ent year end balan	ce (lır	ne 1g,	colum	n (a)) h	eld as					
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment ► 93 770 %											
С	Temporarily restricted endowment ► 6 2	30 %										
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%										
3a	Are there endowment funds not in the posses	ssion of the organiz	atıon	that a	are held	d and ad	lmınıstered	for t	he			
	organization by								г	2-(1)	Yes	No
	(i) unrelated organizations							•		3a(i) 3a(ii)		No No
ь	(ii) related organizations		dons	Sched	ule R?			٠		3b	<u> </u>	1
4	Describe in Part XIII the intended uses of th	•				•		•	[			
Par	t VI Land, Buildings, and Equipme					n answ	ered 'Yes'	to F	orm 990	Part	IV, lı	ne
	11a. See Form 990, Part X, line 1											
	Description of property				a) Cost o		(b)Cost or o		(c) Accum deprecia		(d) B	Book value
1a	Land											
b	Buildings											
c	Leasehold improvements											
d	Equipment						11	,627		6,465		5,162
	Other						29	,150		29,150		0
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (l	B), line	10(c).)			>			5,162

Schedule D (Form 990) 2013  Part VII Investments—Other Securities. (	Complete if the organizatio	n answered 'Yes' to Forr	Page 3 n 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security)	(B)Book value	Cost or end-of-year n	
(1)Fınancıal derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 990, Part X, line 13.	Complete if the organizat	ion answered 'Yes' to Fo	rm 990, Part IV, line 11c
(a) Description of investment	(b) Book value	(c) Method of va	luation
	, ,	Cost or end-of-year n	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>b</b>		
Part IX Other Assets. Complete if the organiza	tion answered 'Yes' to Form 9	90, Part IV, line 11d See F	orm 990, Part X, line 15
<b>(a)</b> De	scription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) lin	e 15.)		
Part X Other Liabilities. Complete if the o			ne 11e or 11f. See
Form 990, Part X, line 25.		. ,	
1 (a) Description of liability	(b) Book value	_	
Federal income taxes		_	
		4	
		+	
		_	
		$\dashv$	
		╛	
		-	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>b</b>		

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	Return Complete if
	the organization answered 'Yes' to Form 990, Part IV, line 12a.	1	1 070 300
1	Total revenue, gains, and other support per audited financial statements	<u> </u>	1,070,290
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	-	
b	Donated services and use of facilities	-	
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)............. <mark>2d</mark>	1	
е	Add lines <b>2a</b> through <b>2d</b>	2e	187,960
3	Subtract line <b>2e</b> from line <b>1</b>	3	882,330
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)...............4b	]	
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	882,330
Part		s per	<b>Return.</b> Complete
1	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	1	785,585
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	<u> </u>	765,365
	i i i i i i i i i i i i i i i i i i i		
a		4	
b	Prior year adjustments	-	
с	Other losses	-	
d	Other (Describe in Part XIII )	┨	
е	Add lines 2a through 2d	2e	188,050
3	Subtract line <b>2e</b> from line <b>1</b>	3	597,535
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	↓	
Ь	Other (Describe in Part XIII )	1	
С	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	597,535
	Supplemental Information		
Part	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2 V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to mation		de any additional

Return Reference	Explanation
PART V, LINE 4	ARNOVA'S ENDOWMENT CONSISTS SOLEY OF ONE DONOR RESTRICTED FUND THAT WAS ESTABLISHED TO SUPPORT SCHOLARSHIPS AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, NET ASSETS ASSOCIATED WITH THE ENDOWMENT FUND ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS
PART X, LINE 2	ACCOUNTING STANDARDS FOR INCOME TAXES PROVIDE DETAILED GUIDANCE FOR THE FINANCIAL STATEMENT RECOGNITION, MEASUREMENT AND DISCLOSURE OF UNCERTAIN TAX POSITIONS RECOGNIZED IN AN ENTERPRISE'S FINANCIAL STATEMENTS ARNOVA INDIVIDUALLY EVALUATES ITS ACTIVITIES TO DETERMINE THAT THEY ARE IN COMPLIANCE WITH ITS EXEMPT PURPOSE MANAGEMENT DOES NOT BELIEVE IT HAS ENGAGED IN ANY ACTIVITIES THAT WOULD CREATE UNCERTAIN TAX POSITIONS ALL TAX PERIODS PRIOR TO 2010 ARE NO LONGER SUBJECT TO EXAMINATION
PART XI LINE 2B - DONATED SERVICES AND USE OF FACILITIES	PROFESSIONAL EDITORIAL SERVICES RELATED TO THE PUBLICATION OF THE NVSQ ARE PROVIDED BY VOLUNTEERS WHO CONTRIBUTE THEIR TIME TO ARNOVA THE ORGANIZATION HAS VALUED AND RECORDED THESE SERVICES WHICH MEET THE CRITERIA FOR RECOGNITION AND ARE NECESSARY FOR IT TO CARRY OUT ITS PROGRAMS DURING FISCAL YEAR 2014, THE VALUE OF CONTRIBUTED SERVICES AMOUNT IS \$188,050, AND HAS APPROPRIATELY BEEN EXCLUDED FROM THE REVENUES AND EXPENSES REPORTED ON THE FORM 990

と言う メルト Supplemental Info	Supplemental Information (continued)
Return Reference	Explanation

Schedule D (Form 990) 2013

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# **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization ASSOCIATION FOR RESEARCH ON NON-PROFIT ORGANIZATIONS & VOLUNTARY ACTION **Employer identification number** 

23-7378021

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART V, LINE 7 A AND 7 B	
FORM 990, PART VI, SECTION A, LINE 3	ARNOVA HAS ENTERED INTO AN AGREEMENT WITH INDIANA UNIVERSITY WHERE THE EMPLOYEES OF THE OR GANIZATION ARE PROVIDED BY THE UNIVERSITY ARNOVA RETAINS THE RIGHT TO ALL HIRING AND FIRING DECISIONS THE UNIVERSITY IS THE EMPLOYER OF RECORD ARNOVA REIMBURSES THE UNIVERSITY FOR COMPENSATION BENEFITS AND TAXES IN ADDITION, ARNOVA PAYS THE UNIVERSITY A SMALL PERCEN TAGE OF EXPENDITURES AS AN ADMINISTRATIVE FEE. DURING THE CURRENT YEAR THERE WERE 3 EMPLOY EES THEIR COMPENSATION HAS BEEN REPORTED ON THE STATEMENT OF FUNCTIONAL EXPENSE AS SALARY, BENEFITS, RETIREMENT, AND PAYROLL EXPENSE DURING 2012, IN ADDITION, ARNOVA DELEGATED MANAGEMENT DUTIES TO AN OUTSIDE INDIVIDUAL ACTING AS INTERIM EXECUTIVE DIRECTOR
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION IS A NON-FOR-PROFIT CORPORATION WITH MEMBERS WHO, IN ACCORDANCE WITH THE BY-LAWS, ELECT THE GOVERNING BOARD
FORM 990, PART VI, SECTION A, LINE 7A	THE ORGANIZATION IS A NOT-FOR-PROFIT CORPORATION WITH MEMBERS WHO, IN ACCORDANCE WITH THE BY-LAWS, ELECT THE GOVERNING BOARD MEMBERS' VOTING RIGHTS MAY NOT BE ABRIDGED WITHOUT APP ROVAL BY A VOTE OF THE AFFECTED MEMBERS AND EACH AMENDMENT OF THE BY LAWS REQUIRES APPROVAL OF A TWO-THIRDS MAJORITY OF MEMBERSHIP
FORM 990, PART VI, SECTION A, LINE 7B	THE ORGANIZATION IS A NOT-FOR-PROFIT CORPORATION WITH MEMBERS WHO, IN ACCORDANCE WITH THE BY-LAWS, ELECT THE GOVERNING BOARD
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS REVIEWED BY THE TREASURER AND THE AUDIT AND FINANCE COMMITTEE MEMBERS ONCE THIS REVIEW IS COMPLETE AND THE FORMAT IS APPROVED, THE EXECUTIVE DIRECTOR SIGNS THE RETU RN AND PROCEEDS WITH SUBMISSION TO THE IRS
FORM 990, PART VI, SECTION B, LINE 12C	AT THE ANNUAL BOARD RETREAT MEMBERS PROVIDE A CONFLICT OF INTEREST FORM THE PRESIDENT REV IEWS AND THE FORMS ARE FILED ANNUALLY AT THE NOVEMBER MEETING, NEWLY ELECTED MEMBERS PROV IDE THEIR FORMS DURING MEETINGS, IF A CONFLICT EXISTS, CONFLICTED MEMBERS RECUSE THEMSELV ES FROM DISCUSSION AND VOTING
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED ANNUALLY AS A PART OF THE ANNUAL REVIEW PROCESS AND ANNUAL BUDGET APPROVAL PROCESS BY THE EXECUTIVE COMMITTEE
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC VIA THE COMPANY'S OWN WEBSITE AT WWW ARNOVA ORG, VIA GUIDESTAR'S WEBSITE AT WWW GUIDESTAR ORG, AND BY PHONE TO (317) 684-2120, BY FAX TO (317) 684-2128 OR BY REGULAR MAIL TO ARNOVA, 550 W NORTH ST
FROM 990, PART XII, LINE 2C	THE PROCESS REMAINS UNCHANGED FROM PRIOR YEARS