

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 www.irs.gov/form990

OMB No 1545-0047
2013
Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 01-01-2013, 2013, and ending 12-31-2013

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS Doing Business As		D Employer identification number 13-2522784
	Number and street (or P O box if mail is not delivered to street address) Room/suite 1300 19TH STREET NW NO 750	E Telephone number (202) 463-7575	
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036		G Gross receipts \$ 11,877,786
F Name and address of principal officer JOHN ZURICK 1300 19TH STREET NW NO 750 WASHINGTON, DC 20036		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.RFKCENTER.ORG			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation 1968	M State of legal domicile DC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO HONOR AND SUPPORT THOSE IN PURSUIT OF JUSTICE		
	2 Check this box <input type="checkbox"/> 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)	3	32
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	29
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	36
	6 Total number of volunteers (estimate if necessary)	6	56
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	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	7,779,517	6,534,353
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	22,295	77,131
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	44,075	80,529
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-125,127	2,480,241
		7,720,760	9,172,254
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	420,020	158,539
	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 5-10)	2,507,522	3,170,798
	16a Professional fundraising fees (Part IX, column (A), line 11e)	141,468	300,396
	b Total fundraising expenses (Part IX, column (D), line 25) <u>1,361,496</u>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,533,815	4,087,774
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	7,602,825	7,717,507	
19 Revenue less expenses Subtract line 18 from line 12	117,935	1,454,747	
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	6,626,258	8,495,263
	21 Total liabilities (Part X, line 26)	482,273	696,467
22 Net assets or fund balances Subtract line 21 from line 20	6,143,985	7,798,796	

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.

Sign Here	***** Signature of officer	2014-07-01 Date			
	JOHN ZURICK COO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name YUNG-HEE GALLINARO	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00035293
	Firm's name <u>CLIFTONLARSONALLEN LLP</u>			Firm's EIN <u>41-0746749</u>	
	Firm's address <u>4250 N FAIRFAX DRIVE SUITE 1020</u> ARLINGTON, VA 22203			Phone no (571) 227-9500	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
 ROBERT F KENNEDY BOLDLY FACED TOUGH PROBLEMS AND CHALLENGED THE COMFORTABLE AND COMPLACENT HE BELIEVED THAT INDIVIDUAL ACTION COULD OVERCOME INJUSTICE AND OPPRESSION HE AWAKENED UNKNOWN STRENGTHS AND INSPIRED A GENERATION TO CHANGE THE WORLD ESTABLISHED IN 1968 BY FRIENDS AND FAMILY OF ROBERT KENNEDY, THE ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS (THE "CENTER") IS A NONPROFIT CHARITABLE ORGANIZATION THAT FOR OVER THREE DECADES HAS FURTHERED THE VISION AND SPIRIT OF ROBERT KENNEDY BY ADVANCING RESPECT FOR HUMAN RIGHTS AND SOCIAL JUSTICE FOR ALL PEOPLE AND PROMOTING THE IDEA THAT INDIVIDUAL ACTION CAN MAKE A DIFFERENCE THROUGH COMMITMENT TO CIVIC AND COMMUNITY AFFAIRS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 1,648,820 including grants of \$ 78,494) (Revenue \$ 0)
 PARTNERS FOR HUMAN RIGHTS (FORMERLY ROBERT F KENNEDY CENTER FOR HUMAN RIGHTS)- FORGES STRONG SIX YEAR PARTNERSHIPS WITH EFFECTIVE HUMAN RIGHTS ACTIVISTS- THE ANNUAL RECIPIENTS OF THE RFK HUMAN RIGHTS AWARD - TO ADVANCE LONG TERM, SYSTEMIC CHANGE IN COMMUNITIES WHERE THE LAUREATES ARE FIGHTING TO PROTECT HUMAN RIGHTS SINCE 1984, PHR HAS WORKED WITH 45 LAUREATES FROM 27 COUNTRIES, USING STRATEGIC AND INNOVATIVE ADVOCACY TOOLS TO ACHIEVE SOCIAL JUSTICE GOALS, EFFECT POLICIES AND PRACTICES, BUILD CAPACITY, INCREASE AWARENESS AND BRING UNDEREXPOSED ABUSES AND PROBLEMS TO INTERNATIONAL ATTENTION PHR WORK ALSO INCLUDES A JUVENILE JUSTICE COLLABORATIVE TO CHAMPION MORE EFFECTIVE POLICIES AND SERVICES FOR AT RISK AND ADJUDICATED YOUTH IN THE U S

4b (Code) (Expenses \$ 1,481,199 including grants of \$ 13,142) (Revenue \$ 14,899)
 SPEAK TRUTH TO POWER (STTP) IS A MULTI-FACETED PROJECT THAT INCREASES AWARENESS OF HUMAN RIGHTS THROUGH INSPIRING STORIES OF WOMEN AND MEN AROUND THE WORLD WHO STAND UP TO OPPRESSION AT GREAT PERSONAL RISK IN THE PURSUIT OF HUMAN RIGHTS THE PROJECT INCLUDES A BOOK BY KERRY KENNEDY "SPEAK TRUTH TO POWER HUMAN RIGHTS DEFENDERS WHO ARE CHANGING OUR WORLD" THAT IS PUBLISHED IN SEVERAL LANGUAGES, AN EXHIBITION OF 50 PHOTOGRAPHS BY PULITZER PRIZE-WINNING PHOTOGRAPHER EDDIE ADAMS, A THEATRICAL PERFORMANCE OF "SPEAK TRUTH TO POWER VOICES FROM BEYOND THE DARK" THAT CONTINUES TO TOUR WORLDWIDE, A WEBSITE, EDUCATIONAL OUTREACH PROGRAMS AND THE CONTINUED DISTRIBUTION OF HUMAN RIGHTS EDUCATIONAL MATERIALS WHICH HAVE GONE TO OVER 100,000 STUDENTS STTP SEEKS EDUCATIONAL PARTNERS SUCH AS TEACHERS' ORGANIZATIONS AND UNIONS, FOUNDATIONS AND EDUCATION OFFICIALS, SUCH AS THE JOINT PROJECT WITH THE NEW YORK STATE UNIFIED TEACHERS, TO BRING THE CURRICULUM TO MORE CLASSROOMS IT IS CONTINUALLY EXPANDING ITS REACH IN THE US AND ABROAD RECENT AND PLANNED EXPANSIONS INCLUDE CANADA, LOS ANGELES, CHICAGO, OHIO, VIRGINIA, SWEDEN AND CAMBODIA A NEW MODEL, TRAINING LAW STUDENTS TO TEACH STTP IN LOWER SCHOOLS WAS LAUNCHED IN PARTNERSHIP WITH WASHINGTON COLLEGE OF LAW CURRICULA ARE ADDED AND UPDATED TO ADDRESS CONTEMPORARY SOCIAL ISSUES SUCH AS BULLYING, OFFERING IDEAS RESOURCES TO IMPLEMENT CHANGE THE CENTER IS LAUNCHING A NEW BULLYING PREVENTION INITIATIVE AS PART OF THE STTP EDUCATION PROJECT

4c (Code) (Expenses \$ 1,512,141 including grants of \$) (Revenue \$ 51,479)
 RFK COMPASS PROGRAM (COMPASS)- CONVENES LEADING FIDUCIARIES DEDICATED TO CREATING LONG-TERM ECONOMIC VIABILITY BY MEANS OF SUSTAINABLE AND RESPONSIBLE BUSINESS PRACTICES COMPASS PROVIDES A UNIQUE PLATFORM FOR DISCUSSION OF STRUCTURAL ECONOMIC IMBALANCES, HUMAN RIGHTS, ENVIRONMENTAL ISSUES, SOCIAL RESPONSIBILITY, WORKERS' RIGHTS, AND CORPORATE GOVERNANCE AS CRUCIAL ELEMENTS OF RISK MANAGEMENT AND RETURN OPTIMIZATION THE MAIN PURPOSE OF THE CONFERENCES IS TO INCREASE AWARENESS OF SUSTAINABLE INVESTING PRINCIPLES AMONG LONG-TERM INVESTORS AND TO PRESS FOR THE INCLUSION OF SUSTAINABILITY CRITERIA IN INVESTMENT AND BUSINESS PRACTICES TO FURTHER THESE OBJECTIVES, THE RFK CENTER IS LAUNCHING THE COMPASS EDUCATION INITIATIVE IN SUSTAINABLE INVESTING, DESIGNED TO ADD A CONTENT DEVELOPMENT COMPONENT TO THE COMPASS OFFERING THE FIRST COURSE WILL BE PRESENTED IN THE FALL OF 2013 IN ALLIANCE WITH COLUMBIA UNIVERSITY THE EDUCATION INITIATIVE WILL INTEGRATE FULLY WITH COMPASS AND RFK-TI, AND PARTNER WITH LEADING ACADEMICS AND INDUSTRY EXPERTS TO PROVIDE A COMPREHENSIVE RESOURCE THAT WILL INCLUDE CURRICULUM DELIVERY, AS WELL AS ONLINE RESOURCES AND RELEVANT PUBLICATIONS

(Code) (Expenses \$ 156,267 including grants of \$ 12,050) (Revenue \$ 25,652)
 SPECIAL PROGRAMS THE BOOK AND JOURNALISM AWARDS HONOR AUTHORS AND JOURNALISTS FOR EXCELLENCE IN REPORTING AND WRITING ON ISSUES OF CONCERN TO ROBERT KENNEDY - HUMAN RIGHTS, SOCIAL JUSTICE, CIVIL RIGHTS, THOSE WHO ARE MAKING A DIFFERENCE

(Code) (Expenses \$ 78,407 including grants of \$) (Revenue \$)
 JUVENILE JUSTICE COLLABORATIVE PARTNERING WITH THE RFK CHILDREN'S ACTION CORPS IN BOSTON, THE COLLABORATIVE COMBINES THE ADVOCACY POWER OF THE RFK CENTER WITH THE DIRECT SERVICE EXPERIENCE AND BEST PRACTICES OF THE ACTION CORPS TO INCREASE NATIONAL ATTENTION ON JUVENILE JUSTICE ISSUES, SPECIFICALLY FOCUSING ON THE NEEDS OF YOUTH RE-ENTERING THEIR COMMUNITIES AFTER PERIODS OF CONFINEMENT, INCARCERATION, OR OUT-OF-HOME PLACEMENT THE COLLABORATIVE BRINGS THE VOICE OF THE IMPACTED YOUTH TO ADVOCACY AND EDUCATES DECISION MAKERS ABOUT THE IMPORTANCE OF EFFECTIVE POLICIES AND RESOURCES TO SUPPORT THE RE-ENTERING YOUTH AVAILABILITY OF EDUCATION, JOB TRAINING, AND HOUSING ALL PLAY KEY ROLES IN THE SUCCESS OF YOUTH TRYING TO TRANSITION TO INDEPENDENCE AND SHOULD BE PART OF ANY COMPREHENSIVE PLAN ADDRESSING JUVENILE JUSTICE ISSUES

(Code) (Expenses \$ 344,632 including grants of \$) (Revenue \$)
 COMMUNICATIONS EXPOSES A WIDER AUDIENCE TO GLOBAL HUMAN RIGHTS ISSUES AND ENGAGES THEM WITH THE WORK OF THE RFK CENTER KEEPS CONSTITUENTS, DONORS AND ALL INTERESTED PARTIES INFORMED AND UPDATED ON HUMAN RIGHTS ISSUES AND ENCOURAGES THEM TO TAKE ACTION OUTREACH IS ACCOMPLISHED THROUGH INTERNATIONAL PRINT AND BROADCAST MEDIA, BLOGS, PRESS RELEASES, SOCIAL MEDIA, THE CENTER'S WEBSITE, ELECTRONIC UPDATES, VARIOUS PRINTED MATERIALS AND CALLS TO ACTION

(Code) (Expenses \$ 207,422 including grants of \$ 54,853) (Revenue \$)
 RFK EUROPE













4d Other program services (Describe in Schedule O)
 (Expenses \$ 786,728 including grants of \$ 66,903) (Revenue \$ 25,652)

4e Total program service expenses 5,428,888

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/>	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i> <input checked="" type="checkbox"/>	Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/>		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? <i>If "Yes," complete Schedule D, Part IV</i> <input checked="" type="checkbox"/>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>	Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> <input checked="" type="checkbox"/>	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? <i>If "Yes," complete Schedule D, Part VII</i> <input checked="" type="checkbox"/>		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> <input checked="" type="checkbox"/>		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? <i>If "Yes," complete Schedule D, Part IX</i> <input checked="" type="checkbox"/>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/>	Yes	
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)? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> <input checked="" type="checkbox"/>	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> <input checked="" type="checkbox"/>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i> <input checked="" type="checkbox"/>	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> <input checked="" type="checkbox"/>	Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> <input checked="" type="checkbox"/>		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i> <input checked="" type="checkbox"/>	Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> <input checked="" type="checkbox"/>	Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> <input checked="" type="checkbox"/>		No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i> 	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i> 	22	Yes	
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	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If so, complete Schedule L, Part II</i> 	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> 	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> 	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? <i>If "Yes," complete Schedule L, Part IV</i> 	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	29	Yes	
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? <i>If "Yes," complete Schedule N, Part I</i>	31		No
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		No
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? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. 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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
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	

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		
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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		
2b	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)	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
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)?	Yes	
b	If "Yes," enter the name of the foreign country SW 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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	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?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders		
11b	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?		
12b	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.		
13a	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		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (32), 1b (29), 2 (Yes), 3 (No), 4 (No), 5 (No), 6 (No), 7a (No), 7b (No), 8a (Yes), 8b (Yes), 9 (No).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a (No), 10b, 11a (Yes), 12a (Yes), 12b (Yes), 12c (Yes), 13 (Yes), 14 (Yes), 15a (Yes), 15b (Yes), 16a (No), 16b.

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 (List of states), 18 (Public inspection methods), 19 (Disclosure of governing documents), 20 (Person with books and records).

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							1,031,570	0	129,610	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
CHARITY BUZZ 877 POST ROAD EAST STES 23 WESTPORT CT 06880	AUCTION MANAGEMENT	300,396
TAYLORMADE LLC 9507 FLOWERS AVENUE SILVER SPRING MD 20901	EVENT CONSULTANT	233,748
BAS VENTURES INC 56 HERITAGE COURTS TUXEDO NY 10987	EVENT CONSULTANT	150,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **3**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a						
	b	Membership dues 1b						
	c	Fundraising events 1c	2,210,992					
	d	Related organizations 1d						
	e	Government grants (contributions) 1e						
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	4,323,361					
	g	Noncash contributions included in lines 1a-1f \$	2,005,697					
	h	Total. Add lines 1a-1f	6,534,353					
Program Service Revenue	2a	TUITION/REGISTRATOIN FEE						
		Business Code						
		900099	51,479	51,479				
	b	AWARD ENTRY FEES						
		900099	25,652	25,652				
	c							
	d							
e								
f	All other program service revenue							
g	Total. Add lines 2a-2f	77,131						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	83,467			83,467		
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties	73			73		
	6a	Gross rents	(i) Real					
			(ii) Personal					
			b	Less rental expenses				
			c	Rental income or (loss)				
	d	Net rental income or (loss)						
	7a	Gross amount from sales of assets other than inventory	(i) Securities	202,115				
			(ii) Other					
			b	Less cost or other basis and sales expenses	205,053			
			c	Gain or (loss)	-2,938			
	d	Net gain or (loss)	-2,938			-2,938		
	8a	Gross income from fundraising events (not including \$ 2,210,992 of contributions reported on line 1c) See Part IV, line 18						
	a		4,881,467					
b	Less direct expenses b	2,500,479						
c	Net income or (loss) from fundraising events	2,380,988			2,380,988			
9a	Gross income from gaming activities See Part IV, line 19							
a								
b	Less direct expenses b							
c	Net income or (loss) from gaming activities							
10a	Gross sales of inventory, less returns and allowances							
a								
b	Less cost of goods sold b							
c	Net income or (loss) from sales of inventory							
	Miscellaneous Revenue	Business Code						
11a	MISCELLANEOUS REVENUE	900099	84,281			84,281		
b	FOREIGN CURRENCY EXCHANGE	900099	14,899	14,899				
c								
d	All other revenue							
e	Total. Add lines 11a-11d		99,180					
12	Total revenue. See Instructions		9,172,254	92,030	0	2,545,871		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete 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	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	13,600	13,600		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	30,000	30,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	114,939	114,939		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	773,361	176,526	326,723	270,112
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,498,345	1,330,585	83,898	83,862
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	95,184	95,184		
9	Other employee benefits	803,908	496,065	167,795	140,048
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	57,409		57,409	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	300,396			300,396
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)	1,440,734	966,438	245,483	228,813
12	Advertising and promotion				
13	Office expenses	387,310	142,731	165,074	79,505
14	Information technology				
15	Royalties				
16	Occupancy	445,339	1,154	438,895	5,290
17	Travel	404,502	346,459	30,190	27,853
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,062,809	999,384	63,425	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	65,072	29,802	23,820	11,450
23	Insurance				
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	MISCELLANEOUS	154,905	55,967	79,398	19,540
b	BAD DEBT	41,850			41,850
c	MEMBERSHIP DUES/SUBSCR	24,844	13,173	5,183	6,488
d	ALL OTHER EXPENSES	3,000			3,000
e	All other expenses		616,881	-760,170	143,289
25	Total functional expenses. Add lines 1 through 24e	7,717,507	5,428,888	927,123	1,361,496
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	797	1	800
	2 Savings and temporary cash investments	3,443,554	2	849,064
	3 Pledges and grants receivable, net	1,369,878	3	3,358,667
	4 Accounts receivable, net	21,140	4	25,055
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	111,393	9	131,502
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 615,807		
	b Less accumulated depreciation	10b 118,437	113,211	10c 497,370
	11 Investments—publicly traded securities	1,431,504	11	3,505,678
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	134,781	15	127,127
16 Total assets. Add lines 1 through 15 (must equal line 34)	6,626,258	16	8,495,263	
Liabilities	17 Accounts payable and accrued expenses	378,992	17	612,121
	18 Grants payable		18	
	19 Deferred revenue	28,950	19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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	74,331	25	84,346
	26 Total liabilities. Add lines 17 through 25	482,273	26	696,467
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	3,312,246	27	3,791,553
	28 Temporarily restricted net assets	1,490,234	28	2,462,255
	29 Permanently restricted net assets	1,341,505	29	1,544,988
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	6,143,985	33	7,798,796	
34 Total liabilities and net assets/fund balances	6,626,258	34	8,495,263	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,172,254
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,717,507
3	Revenue less expenses Subtract line 2 from line 1	3	1,454,747
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,143,985
5	Net unrealized gains (losses) on investments	5	2,091
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	197,973
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	7,798,796

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	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 Schedule O	Yes	
3a	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?		No
3b	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		

Additional Data

Software ID:

Software Version:

EIN: 13-2522784

Name: ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MRS ROBERT F KENNEDY FOUNDER	2 00	X						0	0	0
ORIN S KRAMER MEMBER	2 00	X						0	0	0
ROBERT SMITH CHAIRMAN	10 00	X		X				0	0	0
ANTHONY WILLIAMS TREASURER & SECRETARY	2 00	X		X				0	0	0
HARRY BELAFONTE MEMBER	2 00	X						0	0	0
ALAN H BUERGER MEMBER	2 00	X						0	0	0
LARRY COX MEMBER	2 00	X						0	0	0
PETER EDELMAN CHAIR OF PROGRAM COMMITTEE	2 00	X						0	0	0
MARK FREITAS CHAIR OF DEVELOPMENT COMMITTEE	2 00	X						0	0	0
JONAH GOODHART MEMBER	2 00	X						0	0	0
CLAUDIO GROSSMAN MEMBER	2 00	X						0	0	0
RICHARD IANNUZZI MEMBER	2 00	X						0	0	0
PHILIP W JOHNSTON CHAIR OF PROGRAM SUB COMMITTEE COMPASS PROGRAM	2 00	X						0	0	0
JOE KENNEDY III MEMBER	2 00	X						0	0	0
MATT KENNEDY MEMBER	2 00	X						0	0	0
MARIALINA MARCUCCI MEMBER	2 00	X						0	0	0
ELISA MASSIMINO MEMBER	2 00	X						0	0	0
TERRY MAZANY CO-VICE CHAIR	2 00	X		X				0	0	0
WALTER RAQUET MEMBER	2 00	X						0	0	0
JOHN ROGERS MEMBER	2 00	X						0	0	0
MARVIN ROSEN MEMBER	2 00	X						0	0	0
MALIKA SAADA SAAR MEMBER	2 00	X						0	0	0
JEFFREY SACHS MEMBER	2 00	X						0	0	0
MARTIN SHEEN MEMBER	2 00	X						0	0	0
KERRY KENNEDY MEMBER/RFK PRESIDENT	37 50	X		X				250,539	0	24,048

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PAUL VAN ZYL MEMBER	2 00	X						0	0	0
LUZ VEGA-MARQUIS CHAIR OF GOV & NOM COMMITTEE	2 00	X						0	0	0
JAKE WALTHOUR MEMBER	2 00	X						0	0	0
ROBERT WOLF CO-VICE CHAIR	2 00	X		X				0	0	0
TIM GANNON MEMBER	2 00	X						0	0	0
MICHAEL POSNER MEMBER	2 00	X						0	0	0
JOHN SCHLEIFF MEMBER	2 00	X						0	0	0
LYNN DELANEY MEMBER/EXECUTIVE DIRECTOR	37 50			X				197,640	0	20,898
JOHN ZURICK CHIEF OPERATION OFFICER	37 50			X				245,343	0	34,893
JOHN HEFFERNAN DIRECTOR, STTP	37 50					X		154,775	0	28,173
SANTIAGO CANTON DIRECTOR, PHR	37 50					X		183,273	0	21,598

SCHEDULE A
(Form 990 or 990EZ)

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 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS

Employer identification number
13-2522784

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
(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?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(ii) A family member of a person described in (i) above?
(iii) A 35% controlled entity of a person described in (i) or (ii) above?
h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3,989,214	8,022,811	7,795,746	6,534,353	4,963,275	31,305,399
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						
4 Total. Add lines 1 through 3	3,989,214	8,022,811	7,795,746	6,534,353	4,963,275	31,305,399
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 (f)						4,080,077
6 Public support. Subtract line 5 from line 4						27,225,322

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	3,989,214	8,022,811	7,795,746	6,534,353	4,963,275	31,305,399
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	72,693	79,372	57,525	44,345	83,540	337,475
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 IV.)						
11 Total support (Add lines 7 through 10)						31,642,874
12 Gross receipts from related activities, etc. (see instructions)					12	81,394
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	86.040%
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	94.790%
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
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 under section 513						
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 the organization without charge						
6 Total. Add lines 1 through 5						
7a 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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 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						
11 Net income from unrelated business activities not included in line 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 IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	

- 19a 33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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).

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2013

Open to Public Inspection

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) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS

Employer identification number 13-2522784

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 show total number at end of year, aggregate contributions, aggregate grants, and aggregate value.

5 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

6 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" to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

2 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

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a-2d show total number of conservation easements, total acreage, and number of easements on historic structures.

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 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 No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year \$

8 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)? Yes No

9 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a 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

1b 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) Revenues included in Form 990, Part VIII, line 1 \$ (ii) Assets included in Form 990, Part X \$

2 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

a Revenues included in Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,341,505	1,398,954	1,098,778	1,034,424	915,850
b Contributions	25,000		300,000		
c Net investment earnings, gains, and losses			53,836	106,014	160,234
d Grants or scholarships					
e Other expenditures for facilities and programs			53,660	41,660	41,660
f Administrative expenses					
g End of year balance	1,366,505	1,398,954	1,398,954	1,098,778	1,034,424

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment 0 %
 - b** Permanent endowment 100 000 %
 - c** Temporarily restricted endowment 0 %
- The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? **3b**

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		38,368	13,039	25,329
d Equipment		95,000	52,342	42,658
e Other		482,439	53,056	429,383
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				497,370

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
DEFERRED RENT	84,346
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	84,346

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	9,641,974
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	2,091
b	Donated services and use of facilities	2b	84,578
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	383,051
e	Add lines 2a through 2d	2e	469,720
3	Subtract line 2e from line 1	3	9,172,254
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	9,172,254

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	8,185,136
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	84,578
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	383,051
e	Add lines 2a through 2d	2e	467,629
3	Subtract line 2e from line 1	3	7,717,507
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	7,717,507

Part XIII Supplemental Information

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

Return Reference	Explanation
PART V, LINE 4	FUNDS TO BE HELD IN PERPETUITY AND INCOME TO BE USED TO SUPPORT ORGANIZATION'S PROGRAM EXPENSES
PART X, LINE 2	THE CENTER IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AS A SECTION 501(A) ORGANIZATION THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE CENTER IS A PUBLICLY SUPPORTED ORGANIZATION HOWEVER, SHOULD THE CENTER HAVE INCOME FROM ACTIVITIES NOT DIRECTLY RELATED TO ITS TAX-EXEMPT PURPOSE, SUCH INCOME WOULD BE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME THE CENTER DID NOT HAVE ANY UNRELATED BUSINESS INCOME FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012 THE CENTER'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL, STATE AND LOCAL AUTHORITIES THE TAX RETURNS FOR THE YEARS 2012 TO 2010 ARE OPEN TO EXAMINATION BY FEDERAL, STATE AND LOCAL AUTHORITIES
PART XI, LINE 2D - OTHER ADJUSTMENTS	DIRECT SPECIAL EVENTS
PART XII, LINE 2D - OTHER ADJUSTMENTS	DIRECT SPECIAL EVENTS EXPENSES

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2013

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990. See separate instructions.

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

Department of the Treasury Internal Revenue Service

Name of the organization ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS

Employer identification number 13-2522784

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees, agents, and independent contractors in region, (d) Activities conducted in region (by type), (e) If activity listed in (d) is a program service, describe specific type of service(s) in region, (f) Total expenditures for and investments in region. Rows include EUROPE (INCLUDING ICELAND & GREENLAND), SOUTH AMERICA, and sub-totals.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERICA	MEXICO SCHOOL PROJECT	23,145	WIRE TRANSFER			FAIR VALUE
			NORTH AMERICA	MEXICO SCHOOL PROJECT	10,548	WIRE TRANSFER			FAIR VALUE

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **2**

3 Enter total number of other organizations or entities **2**

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).* Yes No

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2013

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

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

Department of the Treasury Internal Revenue Service

Name of the organization ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS

Employer identification number 13-2522784

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
b Internet and email solicitations
c Phone solicitations
d In-person solicitations
e Solicitation of non-government grants
f Solicitation of government grants
g Special fundraising events

2a Did the organization have a written or oral agreement with any individual... Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col (i), (vi) Amount paid to (or retained by) organization.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

AL, AK, AZ, CA, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, AR

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>NY GALA</u> (event type)	<u>AUCTION</u> (event type)	<u>1</u> (total number)	(add col (a) through col (c))
Revenue	1 Gross receipts	2,314,165	3,142,156	1,636,138	7,092,459
	2 Less Contributions	177,100	1,571,078	462,814	2,210,992
	3 Gross income (line 1 minus line 2)	2,137,065	1,571,078	1,173,324	4,881,467
Direct Expenses	4 Cash prizes				
	5 Noncash prizes			536,350	536,350
	6 Rent/facility costs			5,290	5,290
	7 Food and beverages	233,880			233,880
	8 Entertainment	104,025		16,467	120,492
	9 Other direct expenses	33,389	1,571,078		1,604,467
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(2,500,479)
11 Net income summary Subtract line 10 from line 3, column (d) ▶				2,380,988	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
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Schedule I (Form 990)

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

OMB No 1545-0047

2013

Open to Public Inspection

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

Attach to Form 990

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

Department of the Treasury Internal Revenue Service

Name of the organization ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS

Employer identification number 13-2522784

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC Code section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Row 1: (1) GO CAMPAIGN, 2461 SANTA MONICA BLVD 437, SANTA MONICA, CA 90404, EIN 20-4542914, IRC Code 501(C)3, Amount 13,600, Purpose PASS-THROUGH GRANT - FOR THE IMPROVEMENTS ON A MEXICO SCHOOL.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3 Enter total number of other organizations listed in the line 1 table.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) HUMAN RIGHTS AWARD	1	30,000		FMV	

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

Return Reference	Explanation
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Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2013

Open to Public Inspection

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

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 23.**

▶ **Attach to Form 990. ▶ See separate instructions.**

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

Department of the Treasury
Internal Revenue Service

Name of the organization
ROBERT F KENNEDY CENTER FOR JUSTICE
AND HUMAN RIGHTS

Employer identification number

13-2522784

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|---|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes," to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes," to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2	Yes	
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in 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		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KERRY KENNEDY MEMBER/RFK PRESIDENT	(i)	250,539	0	0	15,050	8,998	274,587	0
	(ii)	0	0	0	0	0	0	0
(2) LYNN DELANEY MEMBER/EXECUTIVE DIRECTOR	(i)	174,640	17,000	6,000	11,900	8,998	218,538	0
	(ii)	0	0	0	0	0	0	0
(3) JOHN ZURICK CHIEF OPERATION OFFICER	(i)	243,885	1,458	0	17,500	17,393	280,236	0
	(ii)	0	0	0	0	0	0	0
(4) JOHN HEFFERNAN DIRECTOR, STTP	(i)	139,375	15,400	0	10,780	17,393	182,948	0
	(ii)	0	0	0	0	0	0	0
(5) SANTIAGO CANTON DIRECTOR, PHR	(i)	183,273	0	0	12,600	8,998	204,871	0
	(ii)	0	0	0	0	0	0	0

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
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Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2013

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

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

Department of the Treasury Internal Revenue Service

Name of the organization ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS

Employer identification number 13-2522784

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 4 main columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 main columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) MARK FREITAS	BOARD MEMBER	29,438	INSURANCE BROKERAGE FIRM (MARK EDWARD PARTNERS)		No
(2) MARVIN S ROSEN	BOARD MEMBER	24,861	TELECOMMUNICATION COMPANY FOR NY OFFICE (NBS/FUSION TELECOMMUNICATIONS INT'L)		No
(3) JOHN ZURICK	CHIEF OPERATION OFFICER	50,000	COMPASS PROGRAM CONSULTANT (ZQI, INC)		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2013

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Name of the organization ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS

Employer identification number 13-2522784

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of contributions or items contributed, (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g, (d) Method of determining noncash contribution amounts. Rows include Art, Books, Cars, Securities, etc.

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?
b If "Yes," describe the arrangement in Part II
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
b If "Yes," describe in Part II
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Table with 3 columns: Question, Yes, No. Rows for 30a, 31, 32a, 33.

Part III Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 32B	FOR THE AUCTION, THE ORGANIZATION USES A PROFESSIONAL FUNDRAISING SERVICE TO LIST NON-CASH CONTRIBUTIONS ON THEIR AUCTION WEBSITE FOR DONATIONS

Schedule M (Form 990) (2013)

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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
ROBERT F KENNEDY CENTER FOR JUSTICE
AND HUMAN RIGHTS

Employer identification number
13-2522784

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	ETHEL KENNEDY, KERRY KENNEDY, JOE KENNEDY III, AND MATT KENNEDY ALL SERVED ON THE BOARD OF DIRECTORS DURING THE TAX YEAR AND ARE FAMILY RELATED
FORM 990, PART VI, SECTION B, LINE 11	AN ACCOUNTING FIRM PREPARES THE FORM 990 AND THE DRAFT IS REVIEWED BY THE OUTSOURCED ACCOUNTANT, WHO COMPARES THE DRAFT TO THE AUDITED FINANCIAL STATEMENTS THE OUTSOURCED ACCOUNTANT AND THE EXECUTIVE DIRECTOR ADDRESS ANY AREAS OF CONCERN, AND THE FINAL FORM 990 IS FORWARDED TO THE MEMBERS OF THE BOARD OF DIRECTORS PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY THE BOARD ADDRESSES ANY POTENTIAL OR POSSIBLE CONFLICTS WITH STAFF OR BOARD MEMBERS THERE IS A TRANSPARENT PROCESS IN WHICH ANY POSSIBLE CONFLICT ISSUE IS DISCUSSED WITH THE PERSON AND THEN OPENLY AMONG THE BOARD MEMBERS, WHO REVIEW THE SITUATION, AND MAKE RECOMMENDATIONS, APPROVALS AND DECISIONS THE EXECUTIVE COMMITTEE WILL TYPICALLY REVIEW THE SITUATION FIRST AND THE BOARD WILL TAKE INTO CONSIDERATION THEIR POSITION AS WELL
FORM 990, PART VI, SECTION B, LINE 15	THE PRESIDENT, CHIEF OPERATION OFFICER, AND EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED AND APPROVED BY THE CHAIRMAN OF THE BOARD THE CHAIRMAN USES FORM 990S OF OTHER ORGANIZATIONS, COMPENSATION SURVEYS, AND OTHER MEANS TO DETERMINE THE REASONABLENESS OF THE EXECUTIVE DIRECTOR'S COMPENSATION THE BOARD APPROVES THE COMPENSATION OF THE ONLY BOARD MEMBER WHO IS A KEY EMPLOYEE THE EXECUTIVE DIRECTOR DETERMINES THE COMPENSATION OF THE OTHER STAFF USING BUDGET GUIDELINES, AS APPROVED BY THE BOARD THE COMPENSATION WAS LAST REVIEWED IN 2013
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT AVAILABLE TO THE PUBLIC THE FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART IX, LINE 11G	SERVICES FOR STTP TRAINING INSTITUTE TRAININGS PROGRAM SERVICE EXPENSES 49,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 49,000 SERVICES FOR JUVENILE JUSTICE PROGRAM PROGRAM SERVICE EXPENSES 60,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 60,000 SERVICES FOR COMPASS EDUCATION PROGRAM PROGRAM SERVICE EXPENSES 217,923 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 217,923 SERVICES FOR STTP YOUNG LEADERS PROGRAM PROGRAM SERVICE EXPENSES 190,124 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 190,124 SERVICES FOR COMPASS CONFERENCES PROGRAM SERVICE EXPENSES 92,555 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 92,555 ANTI-BULLYING PROGRAM SERVICES PROGRAM SERVICE EXPENSES 17,673 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 17,673 STTP EDUCATION PROGRAM SERVICES PROGRAM SERVICE EXPENSES 339,163 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 339,163 SERVICES FOR RFKC LONG RANGE PLANNING PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 60,000 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 60,000 ZQI CONSULTANT SERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 50,004 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 50,004 PAYROLL SERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 7,902 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 7,902 MEDIA SERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 3,425 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 3,425 PRINTING AND DESIGN SERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 8,340 FUNDRAISING EXPENSES 14,680 TOTAL EXPENSES 23,020 IT SUPPORT SERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 41,935 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 41,935 SALESFORCE.COM SUPPORT SERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 70,000 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 70,000 SERVICES FOR STAFF SUPPORT PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 3,877 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 3,877 EVENT SERVICES FEES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 154,433 TOTAL EXPENSES 154,433 RECRUITMENT SERVICES FOR DEVELOPMENT/FUNDRAISING DIRECTOR PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 30,000 TOTAL EXPENSES 30,000 WEBSITE MANAGEMENT SERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 6,793 TOTAL EXPENSES 6,793 PHOTOGRAPHY SERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 10,028 TOTAL EXPENSES 10,028 FEES FOR GOLF ASSISTANTS AT HP GOLF PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 10,626 TOTAL EXPENSES 10,626 VIDEO SERVICES FOR GALA PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 725 TOTAL EXPENSES 725 CLEANING SERVICES FOR GALA PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 1,528 TOTAL EXPENSES 1,528