DLN: 93493224010315

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2014

Open to Public Inspection

A Fo	r the :	2014 ca	lendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014			
		pplicable	C Name of organization FREE SPEECH FOR PEOPLE INC		D Employer	identification number
_	ress ch	-			45-0709	993
Na	me cha	nge	Doing business as			
Init	ial retu	m			E Telephone	number
Fin	al urn/terr	minated	Number and street (or P O box if mail is not delivered to street address) Room/suite 48 N PLEASANT STREET NO 304		(413)25	3-2700
	ended		City or town, state or province, country, and ZIP or foreign postal code		(113)23	3 2700
		n pending	AMHERST, MA 01002		G Gross recei	pts \$ 1,054,916
i Uhi	Jication	r penang				
			F Name and address of principal officer JOHN BONIFAZ H(a	a) Is this subordi	a group ret	curn for
			48 N PLEASANT STREET SUITE 304	3450141	mates.	j resp No
			AMHERST, MA 01002		subordinat	es
——— т Та	x-exem	npt status	5	ınclude If "No '		ıst (see ınstructions)
		·				
	ebsite	e: P - W\	NW FREESPEECHFORPEOPLE ORG	c) Group	exemption	number 🕨
K For	n of org	ganızatıo	n 🔽 Corporation Trust Association Other 🕨	Year of form	ation 2011	M State of legal domicile MA
Pa	rt I	Sun	nmary			
			describe the organization's mission or most significant activities			
	7	WORKS	TO CHALLENGE THE MISUSE OF CORPORATE POWER AND RESTORE R	EPUBLIC#	AN DEMOC	CRACY TO THE PEOPLE
3	-					
Ē	-					
Ĕ	-					
Š	2 (Check t	this box 🔰 if the organization discontinued its operations or disposed of mor	re than 25'	% of its ne	t assets
Activities & Governance	۱,,	Numbar	refueling members of the governing hady (Dort VI line 1a)		1	ه ا ه
න් ග			of voting members of the governing body (Part VI, line 1a)		⊢	9
Ë			of independent voting members of the governing body (Part VI, line 1b)		<u> </u>	8
톭			umber of individuals employed in calendar year 2014 (Part V, line 2a)		· -	5 9
ă			umber of volunteers (estimate if necessary)		· -	6 2
			nrelated business revenue from Part VIII, column (C), line 12 elated business taxable income from Form 990-T, line 34			7a 0 7b 0
	B	ivet uiii	erated business taxable income noni Form 990-1, line 34			₁
		6	Laboratoria (Dada) (Dad	Prior \		Current Year
<u>a</u>	8		ributions and grants (Part VIII, line 1h)		708,954	
ē	9		ram service revenue (Part VIII, line 2g)		(+
Rayenue	10		stment income (Part VIII, column (A), lines 3, 4, and 7d)		06.736	-
	11		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		86,730	26,585
	12		· · · · · · · · · · · · · · · · · · ·		795,684	1,043,276
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		C	0
	14	Bene	fits paid to or for members (Part IX, column (A), line 4)		C	0
	15		ies, other compensation, employee benefits (Part IX, column (A), lines		117,659	599,168
Expenses		5-10	´ ————————————————————————————————————			·
र्के	16a	Profe	ssional fundraising fees (Part IX, column (A), line 11e)		C	0
ਡੌ	b	Total f	undraising expenses (Part IX, column (D), line 25) \blacktriangleright 0			
	17	Othe	r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		62,361	321,296
	18	Total	expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		180,020	920,464
	19	Reve	nue less expenses Subtract line 18 from line 12		615,664	122,812
<u>ኞ</u>			В	Beginning o	of Current	End of Year
9				Yea		
4.55 B 25	20		assets (Part X, line 16)		661,207	·
Net Assets or Fund Balances	21		liabilities (Part X, line 26)		45,192	
	22		ssets or fund balances Subtract line 21 from line 20		616,015	738,827
Pai	rt II	Sigi	nature Block			
my k	nowled	dge and	perjury, I declare that I have examined this return, including accompanying selef, it is true, correct, and complete Declaration of preparer (other than of crowledge			
		***	***	2015	5-08-11	
Sign	1	Sign	nature of officer	Date		
Here			N BONIFAZ PRESIDENT			
_			e or print name and title			
			Print/Type preparer's name Preparer's signature Date GIUSEPPE FEMIA CPA GIUSEPPE FEMIA CPA 2015-08	8-07 Check		IN 1438848
Paid	t	<u> </u>	Firm's name GERALD T REILLY & COMPANY	3011-01	nployed PU EIN ► 04-25	
Pre	pare		THE STREET P SERVED I RELEE & COPH ANT		LIN F 04-23	,1321V
	Onl		Firm's address ► 424 ADAMS STREET	Phone	no (617) 69	96-8900
			MILTON, MA 02186			

. Ves No

Par	t III	Statement of Program S Check if Schedule O contains			III	
1	Brief	ly describe the organization's mi	ssion			
NOT THE AND NEW COR AND	SPEE BIG M U S C THE [JURIS	CH FOR PEOPLE WORKS TO RONEY AND CORPORATE INTERMINED ON STITUTION TO OVERTURN OCTRINES UNDERLYING THO PRUDENCE ON MONEY IN PORE EXEMPTIONS FROM OUR LORTOOLS TO CHALLENGE BIG	ENEW OUR DEMOC RESTS THE ORGA I THE SUPREME CO SE RULINGS THE LITICS AND TO CO AWS IN ADDITION	NIZATION CATALY DURT'S RULINGS IN ORGANIZATION AL DNFRONT THE MISU N, THE ORGANIZATI	ZES AND HELPS LEAD TH CITIZENS UNITED V FE SO ENGAGES IN LEGAL SE OF THE U S CONSTI ON DEVELOPS AND ADV	HE MOVEMENT TO AMEND C AND BUCKLEY V VALEO, ADVOCACY TO ADVANCE A TUTION TO CLAIM OCATES FOR MODEL LAWS
2	Dıd t	ne organization undertake any si	anıfıcant program se	ervices during the vea	r which were not listed on	
_		nor Form 990 or 990-EZ? .				
	If"Ye	es," describe these new services	on Schedule O			
3	servi	ne organization cease conductinges?		nt changes in how it co	onducts, any program	
4	expe	ribe the organization's program s nses Section 501(c)(3) and 501 otal expenses, and revenue, if an	. (c)(4) organization:	s are required to repoi		
4a	PUSH UND	e) (Expenses \$ L ADVOCACY PROGRAM - FREE SPEECH I BACK IN THE COURTS AGAINST THE S FRLYING THOSE RULINGS THIS PROGRA AIM OUR DEMOCRACY	FOR PEOPLE'S LEGAL AL UPREME COURT'S RULIN	OVOCACY PROGRAM ENGA NGS IN CITIZENS UNITED V	FEC AND BUCKLEY V VALEO A	C EDUCATION, AND ORGANIZING TO ND THE LEGAL DOCTRINES
4b	(Cod	e) (Expenses \$		including grants of \$) (Revenue \$)
70	(Cou) (Expenses #		including grants or \$) (Nevenue 4	,
4c	(Cod	e) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
4d	O+h	er program services (Describe ir	Schedule O)			
-ru		enses \$	including grants o	f\$) (Revenue \$)
4e		Il program service expenses	656,567	<u>'</u>		, , , , , , , , , , , , , , , , , , ,

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
l2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L 6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
L 7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
L 8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
L 9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	990 (2014)			Page	
Par	t IV Checklist of Required Schedules (continued)				
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1^7 If "Yes," complete Schedule I, Parts I and II	21		No	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b			
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No	
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)				
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1	
		28a		Νo	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νo	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νo	
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Νo	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b			
36	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? If "Yes," complete Schedule R, Part VI	37		Νo	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes		

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			
4_	Entenths number resented in Day 2 of Farm 1006 Faton 0 of not applicable.		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 12 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
Ī	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country •			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		No
7	were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
d	file Form 8282?	7c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		Νο
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Νo
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2014) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O

b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	even	ue Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
10a	Did the organization have local chapters, branches, or anniates.	104		140
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		NO
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Yes	140
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Yes	140
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	140
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		NO.
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	NO NO
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c	Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	10b 11a 12a 12b 12c 13	Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed►MA, AK, CA, CO, CT, GA, IL, KY, ME, MD, MI, MN, NH, NJ, NM, NY, NC, OR, PA, RI, SC, VA, WA, WV,
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

organization's exempt status with respect to such arrangements?

Own website 🔽 Another's website 🔽 Upon request 🗍 Other (explain in Schedule O)

- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records 20 ►OSKE BUCKLEY

16b

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec k, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) JOHN BONIFAZ PRESIDENT & BOARD CLERK	40 00	×		х				157,500	0	24,282
(2) JEFF CLEMENTS CHAIR OF BOARD	1 00	х		х				0	0	0
(3) PAMELA EAKES DIRECTOR	1 00	х						0	0	0
(4) LEAH HUNT-HENDRIX DIRECTOR	1 00	х						0	0	0
(5) BEN CLEMENTS DIRECTOR	1 00	х						0	0	0
(6) BEN BINSWANGER DIRECTOR	1 00	х						0	0	0
(7) BUFF KAVELMAN BOD TREASURER	1 00	х		х				0	0	0
(8) LANCE LINDBLOM DIRECTOR	1 00	х						0	0	0
(9) JUSTICE JAMES NELSON DIRECTOR	1 00	х						0	0	0
(10) SARAH STRANAHAN STRATEGIC DEVELOPMENT DIR	40 00					х		101,384	0	22,773
(11) RONALD FEIN LEGAL DIRECTOR	40 00					х		104,987	0	1,080

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han o n is	one I both	oox, an d	heck unless officer stee)	5	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	-			
c	Total from continuation sheets to Part VII, Section A	F			
d	Total (add lines 1b and 1c)	•	363,871	0	48,135

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►3

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		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? If "Yes," complete Schedule J for such			
	ındıvıdual	4	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? If "Yes," complete Schedule I for such person	5		Νo

Castian	_	T		Cambus stans
Section	В.	Inae	penaent	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)	(B)	(C)
Name and business address	Description of services	Compensation
Takal mankan dan dan dan dan kanadan dan dan dan dan dan dan dan dan d	and a second second bloom	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶0

Part V	•••	Statement of Revenue	av line in this Bart VIII			
		Check if Schedule O contains a response or note to an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
v	1a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b				
9 2	c	Fundraising events 1c	_			
£ (≩		Related organizations 1d	—			
≣ 2	d		_			
8, iž	е	Government grants (contributions) 1e	_			
<u>₽</u> 2	f	All other contributions, gifts, grants, and similar amounts not included above	91			
≣ੁ≨∣	g	Noncash contributions included in lines				-
Contributions, Gifts, Grants and Other Similar Amounts		1a-1f \$				
<u>ة ت</u>	h	Total. Add lines 1a-1f	1,016,691			
<u>a</u>		Business Cod	le			
Program Serwce Revenue	2a					
<u>æ</u>	b					
95	С					
1	d					
Ē	е					
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	f	All other program service revenue				
Š.	g	Total. Add lines 2a−2f				
	3	Investment income (including dividends, interest,				
	4	and other similar amounts)				
	4 5	Royalties				1
	•	(i) Real (ii) Personal				+
	6a	Gross rents				
	ь	Less rental				
	c	expenses Rental income	- 			
	_	or (loss)	_			
	d	Net rental income or (loss)	F			+
	7a	(I) Securities (II) Other Gross amount	_			
		from sales of assets other				
		than inventory Less cost or	_			
	b	other basis and				
	С	sales expenses Gain or (loss)	 			
	d	Net gain or (loss)	.			
une H	8a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18 a 38,7	225			
g	b	Less direct expenses b 11,0				
>		Net income or (loss) from fundraising events	26,585			26,585
	9a	Gross income from gaming activities See Part IV, line 19				
	b	Less direct expenses b				
		Net income or (loss) from gaming activities	-			1
	10a	Gross sales of inventory, less				
		returns and allowances .	- 			
	b					
		Net income or (loss) from sales of inventory	.			
ŀ	-	Miscellaneous Revenue Business Cod				1
ļ	11a		 			1
	b					1
	c					1
	d	All other revenue				1
	e		<u> </u>			1
	12	Total revenue. See Instructions				+
			-ET1	i e e e e e e e e e e e e e e e e e e e		

orm 9	90 (2014)				Page 1 (
art	IX Statement of Functional Expenses				
	n $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns All	other organizat	ions must comp	olete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX			
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
L	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	157,500	118,125	39,375	
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	320,612	256,798	63,814	
В	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,820	2,865	955	
9	Other employee benefits	77,668	53,625	24,043	
)	Payroll taxes	39,568	29,676	9,892	
	Fees for services (non-employees)				
3	Management				
)	Legal				
:	Accounting	46,211		46,211	
ı	Lobbying				
•	Professional fundraising services See Part IV, line 17				
F	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	90,160	45,611	44,549	
	Advertising and promotion	6,195	4,870	1,325	
	Office expenses	47,880	37,274	10,606	
	Information technology				
	Royalties				
	Occupancy	50,060	37,545	12,515	
	Travel	54,163	46,420	7,743	
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	20,664	19,286	1,378	
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization				
	Insurance	5,963	4,472	1,491	
	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 L		 			
Ь		 			
C		 			
d	A II akkan awaran	1			
	All other expenses	<u> </u>			
· ·	Total functional expenses. Add lines 1 through 24e	920,464	656,567	263,897	(
5	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X $$. $$.			· · . 「
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	312,845	1	651,380
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	340,595	3	107,070
	4	Accounts receivable, net		4	
	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	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	7,767	9	13,603
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	_
	16	Total assets. Add lines 1 through 15 (must equal line 34)	661,207	16	772,053
	17	Accounts payable and accrued expenses	45,192	17	33,226
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		persons Complete Part II of Schedule L		22	
\exists	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		25	
	26	Total liabilities. Add lines 17 through 25	45,192	26	33,226
ري دان		Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete			
ဋ		lines 27 through 29, and lines 33 and 34.	F2 200		100 204
<u>ਨ</u> ਵ	27	Unrestricted net assets	52,396	27	130,384
<u>م</u>	28	Temporarily restricted net assets	563,619	28	608,443
Ĭ	29	Permanently restricted net assets		29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
g.	30	Capital stock or trust principal, or current funds		30	
S. O.	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
ĕ	33	Total net assets or fund balances	616,015	33	738,827
_	34	Total liabilities and net assets/fund balances	661,207	34	772,053

Par	t XI	Reconcilliation of Net Assets				
		Check if Schedule O contains a response or note to any line in this Part XI				<u>.</u>
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		1.0	043,276
2	Total	expenses (must equal Part IX, column (A), line 25)	_			,
			2		9	20,464
3	Rever	nue less expenses Subtract line 2 from line 1	3		1	.22,812
4	Neta	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
			4		6	16,015
5	Netu	nrealized gains (losses) on investments	5			
6	Donat	red services and use of facilities				
			6			
7	Inves	tment expenses	7			
8	Prior	period adjustments				
			8			
9	Other	changes in net assets or fund balances (explain in Schedule O)	9			0
10	Neta	ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
		nn (B))	10		7	38,827
Par	t XII	Financial Statements and Reporting				_
		Check if Schedule O contains a response or note to any line in this Part XII				. ┏
					Yes	No
1		organization changed its method of accounting from a prior year or checked "Other," explain in dule O				
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
		s,' check a box below to indicate whether the financial statements for the year were compiled or revien Tarate basis, consolidated basis, or both	wed o	١ 📗		
	Γs	eparate basis				
b	Were	the organization's financial statements audited by an independent accountant?		2b	Yes	
		s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both	arate			
	▽ s	eparate basis				1
C		s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	ht of th	1e 2c	Yes	
	If the Sched	organization changed either its oversight process or selection process during the tax year, explain i fule O	n			
За		result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	ie	3a		No
b		s," did the organization undergo the required audit or audits? If the organization did not undergo the red audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493224010315

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2014

Open to Public Inspection

		ne organization I FOR PEOPLE INC					Employer Identifica	ation number	
TILL	oi elci	TTOKTEOTEE INC					45-0709993		
Pa	rt I	Reason for Publi	c Charity S	tatus (All organiza	itions must co	mplete this p	art.) See instruction	ons.	
The	organı	zation is not a private f	oundation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)		
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	o)(1)(A)(i).		
2	Γ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)							
3	Γ	A hospital or a cooper	atıve hospıtal	service organization (described in sec	tion 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						i). Enter the		
5	\sqcap	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by	a governmental unit d	escribed in	
		section 170(b)(1)(A)	(iv). (Complet	e Part II)					
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in se	ection 170(b)(1	l)(A)(v).		
7	굣	An organization that n described in section 1	•	<u>.</u>	• •	om a governme	ental unit or from the o	general public	
8	Γ	A community trust de	scribed in sect	ion 170(b)(1)(A)(vi)	(Complete Par	tII)			
9	Γ	An organization that n	ormally receiv	es (1) more than 33:	1/3% of its supp	ort from contri	butions, membership	fees, and gross	
		receipts from activitie	s related to its	s exempt functions—s	ubject to certai	n exceptions, a	ind (2) no more than 3	331/3% of	
		ıts support from gross	ınvestment ır	ncome and unrelated b	usıness taxable	e income (less	section 511 tax) from	n businesses	
		acquired by the organ	ızatıon after Ju	ine 30, 1975 See sec	tion 509(a)(2).	. (Complete Pai	tIII)		
10	Γ	An organization organ	ized and opera	ited exclusively to tes	t for public safe	ety See sectio i	ı 509(a)(4).		
11	\sqcap	An organization organ							
		one or more publicly s							
а	$\overline{}$	the box in lines 11a th Type I. A supporting of							
u	'	supported organizatio							
	_	organization You mus							
b	ı	Type II. A supporting	-	•		• • •			
		management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C.							
c	Г	Type III functionally	•		n operated in c	onnection with.	and functionally inte	grated with, its	
	·	supported organizatio						,	
d	Γ	Type III non-function							
		not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.							
e	\vdash	Check this box if the					sa Tyne I Tyne II T	vne III functionally	
Ū	,	integrated, or Type II					5 a 1, pc 1, 1, pc 11, 1	, pe III lanctionan,	
f		Enter the number of s	upported organ	nizations					
g		Provide the following i	nformation abo	out the supported orga	inization(s)				
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of	
		organization	(,	organization (described on lines	listed in your docume	governing	monetary support (see instructions)	other support (see instructions)	
				1- 9 above or IRC section (see instructions))					
				instructions))	Yes	No			

instructions

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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 795,684 1,043,276 1,838,960 include any "unusual grants ") 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 795,684 1,043,276 1,838,960 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly 823,715 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from 1,015,245 line 4 Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 1,043,276 795,684 1,838,960 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support Add lines 7 through 1,838,960 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage for 2013 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2014. 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 b 33 1/3% support test -2013. 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 17a 10%-facts-and-circumstances test - 2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

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

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493224010315

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

Political Campaign and Lobbying Activities

www.irs.gov/form990. If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

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

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

	me of the organization EE SPEECH FOR PEOPLE INC			E	mployer iden	tification number
FKI	LE SPEECH FOR PLOPEE INC			4	15-0709993	
Par	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a s	ection 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	cal campaign act	tivities in Part	IV	
2	Political expenditures				F	\$
3	Volunteer hours					
Dar	TES Complete if the or	ganization is exempt under	section 501/	c)(3)		
1		e tax incurred by the organization und	_			*
2	•	e tax incurred by organization manag			•	*
3		ection 4955 tax, did it file Form 472				Yes
4a	Was a correction made?	,	,			┌ Yes ┌ No
b	If "Yes," describe in Part IV					
Par		ganization is exempt under	section 501(c), except	section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exem	pt function act	tivities 🕨	\$
2	Enter the amount of the filing o exempt function activities	rganızatıon's funds contributed to ot	her organization:	s for section 5	27 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	20-POL, line 1	7b ►	\$
4	Did the filing organization file F	Form 1120-POL for this year?				Yes
5	organization made payments f amount of political contribution	nd employer identification number (E: For each organization listed, enter thins received that were promptly and dipolitical action committee (PAC) If	e amount paid fro irectly delivered	om the filing o to a separate	rganızatıon's f political orga	unds Also enter the nization, such as a tion in Part IV
	(a) Name	(b) Address	(c) EIN	filing org	nt paid from anization's ne, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -
For F	Panerwork Reduction Act Notice se	 e the instructions for Form 990 or 990	 -F7 /	Cat No. E00945	Schodulo C (

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶ □	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,	,
		expenses, and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	3,751	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	13,206	
c	Total lobbying expenditures (add lines 1a and 1i	o)	16,957	
d	Other exempt purpose expenditures		903,506	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	920,463	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	163,069	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	40,767	
h	Subtract line 1g from line 1a If zero or less, ent	er - 0 -	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lii	ne 1h or line 1ı, did the organization file Form 4720	reporting	□ Ves □ No

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expend	litures During	4-Year Avera	ging Period	_	
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount			36,004	163,069	199,073
b	Lobbying ceiling amount (150% of line 2a, column(e))					298,610
c	Total lobbying expenditures			601	16,957	17,558
d	Grassroots nontaxable amount			9,001	40,767	49,768
e 	Grassroots ceiling amount (150% of line 2d, column (e))					74,652
f	Grassroots lobbying expenditures			601	3,751	4,352

_		election under section 501(h)).	(a	1)	(b)	
For e activ	· · · · · · · · · · · · · · · · · · ·	gh 11 below, provide in Part IV a detailed description of the lobbying	Yes	No	Amou	ınt
1	-	panization attempt to influence foreign, national, state or local to influence public opinion on a legislative matter or referendum,				
а	Volunteers?					
b	Paid staff or management (includ	de compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?					
d	Mailings to members, legislators	o, or the public?				
е	Publications, or published or bro	adcast statements?				
f	Grants to other organizations for					
g	Direct contact with legislators, t	heir staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminal	rs, conventions, speeches, lectures, or any similar means?				
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a		the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any	tax incurred under section 4912				
C	If "Yes," enter the amount of any	tax incurred by organization managers under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	rganization is exempt under section 501(c)(4), section	501(c))(5), c	or section	on
					Yes	No
1	Were substantially all (90% or m	nore) dues received nondeductible by members?		Γ	1	
2	Did the organization make only ii	n-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to car	ry over lobbying and political expenditures from the prior year?			3	
Par		rganization is exempt under section 501(c)(4), section !				
	501(c)(6) and if ϵ	either (a) BOTH Part III-A, lines 1 and 2, are answered " ed "Yes."	No" O	R (b)	Part II	I-A,
1	Dues, assessments and similar a		1			
2	Section 162(e) nondeductible lo expenses for which the section 5	bbying and political expenditures (do not include amounts of political 527(f) tax was paid).				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in se	ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	does the organization agree to ca	ount on line 2c exceeds the amount on line 3, what portion of the excess arryover to the reasonable estimate of nondeductible lobbying and				
_	political expenditure next year?		4			
5		political expenditures (see instructions)	5			
	art IV Supplemental Inf					
		Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground I Also, complete this part for any additional information	up list),	Part II	-A, lines	1 and
	Return Reference	Explanation				
PAR	T I-A, LINE 1	DURING THE 2014 FISCAL YEAR, FREE SPEECH FOR PEOPLE ENGALOBBYING ACTIVITIES INCLUDING, SENDING EMAILS AND DIGITAN ORGANIZATIONAL EMAIL LIST CONSISTING OF 65,000 SUBSTRACTION A PUBLIC RALLY EVENT	ALCO	MMUN:	ICATION	

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493224010315

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

Open to Public Inspection

lame of the organization		Emp	loyer identification number
REE SPEECH FOR PEOPLE INC		45-0	0709993
art I Organizations Maintaining Donor Ad			
organization answered "Yes" to Form 990	(a) Donor advised funds		(b) Funds and other accounts
Total number at end of year	(a) Donor advised funds		(b) I unus and other accounts
Aggregate value of contributions to (during year)			
Aggregate value of grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor advis	core in writing that the accets held in d	lonor advi	sed
funds are the organization's property, subject to the o	-	ionor auvi	☐ Yes ☐ No
Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit?			
art II Conservation Easements. Complete	f the organization answered "Yes	" to Forn	n 990, Part IV, line 7.
Purpose(s) of conservation easements held by the or- Preservation of land for public use (e.g., recreation) Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education) Preservation of Preservation of	a certifie	d historic structure
easement on the last day of the tax year			
Tabal assault			Held at the End of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easements	rama atmustuma implicidad in (a)	2b	
Number of conservation easements on a certified hist	` '	2c	
Number of conservation easements included in (c) ac historic structure listed in the National Register	quired after 8/1//06, and not on a	2d	
Number of conservation easements modified, transfer	red, released, extinguished, or termina	ated by th	ie organization during
the tax year ►			
Number of states where property subject to conserva	tion easement is located be		
Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, ha	andling of	violations, and Yes No
Staff and volunteer hours devoted to monitoring, insp	ecting, and enforcing conservation eas	sements d	luring the year
A mount of expenses incurred in monitoring, inspectin	a and enforcing conservation easeme	nts during	the year
► \$	g, and emoreing conservation caseme	inco darini	g the year
Does each conservation easement reported on line 2	(d) above satisfy the requirements of s	section 17	
and section 170(h)(4)(B)(II)?			☐ Yes ☐ No
In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easem	ne footnote to the organization's financ		•
rt III Organizations Maintaining Collection Complete if the organization answered "			her Similar Assets.
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide, in Part XIII, the text of the footnote	116 (ASC 958), not to report in its relets held for public exhibition, educatio	venue sta n, or rese	arch in furtherance of public
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide the following amounts relating to the	116 (ASC 958), to report in its revenuets held for public exhibition, educatio	ue statem	ent and balance sheet
(i) Revenue included in Form 990, Part VIII, line 1			▶ \$
(ii) Assets included in Form 990, Part X			▶ \$
If the organization received or held works of art, histofollowing amounts required to be reported under SFAS			
Revenue included in Form 990, Part VIII, line 1			► \$
Assets included in Form 990, Part X			

Part	TITLE Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	tori	<u>cal T</u>	<u>reasur</u>	<u>es, or C</u>	ther	· Simila	<u>r Asse</u>	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	neck	any of	the follo	wing that a	are a	sıgnıfıcar	nt use of	ıts	
а	Public exhibition		d	Γ	Loan	or excha	ange progi	ams				
b	Scholarly research		e	Γ	Othe	r						
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furth	er the or	ganızatıor	's ex	empt pur	ose in		
_	Part XIII											
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as	part o	of the	organ	ızatıon's	collection	۱?			Yes	┌ No
Par	Part IV, line 9, or reported an an						answere	d "Ye	es" to Fo	orm 990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	diary	ford	ontrib	utions or	other ass	ets n	ot	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving	able		_					
										Amou	ınt	
С	Beginning balance						_	1c				
d	Additions during the year						L	1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21,	for e	scrow	orcusto	dial accou	nt lıa	bility?	\vdash	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XII	T Check here if the	expla	anatı	on has	been pro	ovided in I	Part >	(111			\sqcap
Pa	rt V Endowment Funds. Complete										<u> </u>	
		(a)Current year) Prior			o years back)Four ye	ears back
1a	Beginning of year balance											
b	Contributions											
C	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the cur	rent year end baland	e (lın	ne 1g	, colun	nn (a)) he	eld as			•		
а	Board designated or quasi-endowment F											
b	Permanent endowment -											
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho											
3a	Are there endowment funds not in the posses organization by	ssion of the organiza	ation	that	are hel	d and ad	ministere	d for t	the			B1-
	(i) unrelated organizations									3a(i)	Yes	No
	(ii) related organizations									3a(ii)		
ь	If "Yes" to 3a(II), are the related organization							٠. ٠		3b		
4	Describe in Part XIII the intended uses of th											
Par	t VI Land, Buildings, and Equipme		he o	rgar	ıızatıo	n answe	ered 'Yes	' to	Form 99	0, Part	IV, lıı	ne
	11a. See Form 990, Part X, line	10.					Taxo :				1415	
	Description of property					or other estment)	(b)Cost or basis (ot			ımulated cıatıon	(d) B	ook value
1a	Land			\top								
b	Buildings											
С	Leasehold improvements											
d	Equipment											
e	Other											
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			ımn (B), line	10(c).)				>		0

(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		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. Co	mplete if the organizati	on 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
(a) Description of investment	(b) Book value	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	a answered 'Ves' to Form O	20 Part IV line 11d See Form 000 Part V line 15
(a) Descr		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the orga		to Form 990, Part IV, line 11e or 11f. See
Part X Other Liabilities. Complete if the organization of the property of the	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	inization answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	ınızatıon answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	ınızatıon answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	ınızatıon answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	ınızatıon answered 'Yes'	
Part X Other Liabilities. Complete if the organization of part X, line 25. 1 (a) Description of liability	ınızatıon answered 'Yes'	

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Reven the organization answered 'Yes' to Form 990, Part IV, line 12a.	ue per Retu	rn Complete if
1	Total revenue, gains, and other support per audited financial statements	1	1,043,276
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII) 2d		
e	Add lines 2a through 2d	. 2e	0
3	Subtract line 2e from line 1	. 3	1,043,276
4	Amounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
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)		1,043,276
Part	Reconciliation of Expenses per Audited Financial Statements With Expense if the organization answered 'Yes' to Form 990, Part IV, line 12a.	nses per Re	turn. Complete
1	Total expenses and losses per audited financial statements	1	920,464
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		<u> </u>
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	. 2e	0
3	Subtract line 2e from line 1	. 3	920,464
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
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	920,464
Par	t XIII Supplemental Information		
Part	vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b a t V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part rmation		ny additional
	Return Reference Explanation		
			-

Jenedale 2 (1 31111 33 3) 23 13		r age 3		
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
l				
-				

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493224010315

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

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.

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

Open to Public Inspection

ame of the organization	•					Employer iden	tification number
REE SPEECH FOR PEOPLE IN						45-0709993	
art I Fundraising Activ			janızatıo	n answered "Yes" to	Form	990, Part IV,	line 17. Form 990-E2
Indicate whether the organ	ızatıon raısed funds t	through a	ny of the 1	following activities Che	eck all th	nat apply	
a Mail solicitations			e	Solicitation of nor	n-govern	ment grants	
b Internet and email soli	citations		f	☐ Solicitation of gov	ernmen	t grants	
c Phone solicitations			g	Special fundraisin	g events	5	
d							
Did the organization have a or key employees listed in							Г _{Yes} Г м
b If "Yes," list the ten highes to be compensated at least			fundraıse	rs) pursuant to agreem	ents und	ler which the fu	ndraiser is
(i) Name and address of ındıvıdual or entity (fundraıser)	(ii) Activity	fundrais custe cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(orı	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1		Yes	No				
2							
3							
4							
5							
6							
7							
8							
9							
0							
otal			▶				
List all states in which the registration or licensing	organization is regist	tered or li	censed to	solicit contributions o	r has be	en notified it is	exempt from

Sche	dule	G (Form 990 or 990-EZ) 2014				Page 2
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contributi			
			(a) Event #1 NEW YORK HOUSE PARTY (event type)	(b) Event #2 SAN FRANCISCO DONOR BRIEFING (event type)	(c) O ther events 1 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	7,725		5,500	38,225
Revenue	2	Less Contributions				
- <u>-</u> -	3	Gross income (line 1 minus line 2)	7,725	5 25,000	5,500	38,225
	4	Cash prizes				
ம	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .		1,034	ı	1,034
Direct	8	Entertainment				
₫	9	Other direct expenses .	4,952	4,382	1,272	10,606
	10	Direct expense summary Add lin	nes 4 through 9 ın column	(d)		(11,640)
	11	Net income summary Subtract li	ne 10 from line 3, column	n (d)	🕨	26,585
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>동</u>	1	Gross revenue				
enses	2	Cash prizes				
EXP.	3	Non-cash prizes				
й П	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	Г Yes%_ Г Nо	Г Yes %	Г Yes% Г No	
	7	Direct expense summary Add line	s 2 through 5 ın column (d)		
	8	Net gaming income summary Subt	tract line 7 from line 1, co	olumn (d)		
9		er the state(s) in which the organiza				
a						
b	11 "1					
4.0						
10a b		re any of the organization's gaming Yes," explain				· · Yes No

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3			
11	Does the organization conduct gaming	activities with nonn	members?	┌ Yes 「	No 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	۱۶		Г _{Yes} Г	— No			
13	Indicate the percentage of gaming acti		1 1	,				
а	The organization's facility		13a		%			
b	An outside facility				%			
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records					
	Name ▶							
	Address ►							
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming					
				┌ Yes 「	— _{No}			
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	· ·	the organization > \$ and the					
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							
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to							
	retain the state gaming license?							
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent							
	ın the organızatıon's own exempt actıvı		·					
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr					
	Return Reference		Explanation					

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493224010315

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

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

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

Open to Public Inspection

Name of the organization FREE SPEECH FOR PEOPLE INC **Employer identification number**

45-0709993

Pai	t I Questions Regarding Compensation				
			Yes	No	
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 First-class or charter travel				
	First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence				
	Tax idemnification and gross-up payments Health or social club dues or initiation fees				
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)				
	, reisonar services (e.g., maia, enautear, energy				
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	1b			
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?	2			
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				
	Compensation committee				
	Form 990 of other organizations 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				
а	Receive a severance payment or change-of-control payment?	4a		Νo	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo	
	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), 501(c)(4), and 501(c)(29) organizations 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				
а	The organization?	5a		No	
	Any related organization?	5b		No	
	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				
а	The organization?	6a		Νo	
b	Any related organization?	6b		Νo	
	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	7		No	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was				
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe				
	ın Part III	8		Νo	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	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	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990	
1 JOHN BONIFAZ, PRESIDENT & BOARD CLERK (ii		0	0	0	24,282	181,782	0	
(III)	0	0	0	0	0	0	0	

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493224010315

Employer identification number

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Name of the organization FREE SPEECH FOR PEOPLE INC

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

THE STEED FOR FEORE INC	45-0709993
990 Schedule O, Supplemental	Information
Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	TWO BOARD MEMBERS ARE ALSO FAMILY MEMBERS
FORM 990, PART VI, SECTION A, LINE 4	THE ORGANIZATION AMENDED ITS BY LAWS TO CLARIFY THE ROLES OF THE ORGANIZATION'S PRESIDENT W HOM IS A MEMBER OF MANAGEMENT FROM THOSE ROLES AND RESPONSIBILITIES OF THE CHAIR OF THE BO ARD
FORM 990, PART VI, SECTION B, LINE 11	THE ORGANIZATION'S PRESIDENT AND NEWLY APPOINTED BOARD TREASURER (APPOINTED DURING 2014) R EVIEW THE FORM 990 TAX RETURN FILING ALONG WITH THE AUDITED FINANCIAL STATEMENTS ON BEHALF OF THE BOARD OF DIRECTORS BEFORE THE AUDITED FINANCIAL STATEMENTS ARE ISSUED AND FORM 990 TAX RETURN IS FILED
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BY REQUIRING ALL BOARD MEMBERS TO SIGN A CONFLICT OF INTEREST STATEMENT ANNUALLY AT A REGULARLY SCHEDULED BOARD OF DIRECTORS MEETING
FORM 990, PART VI, SECTION B, LINE 15	REVIEWED AND APPROVED BY THE BOARD
FORM 990, PART VI, SECTION C, LINE 19	THESE DOCUMENTS ARE AVAILABLE UPON REQUEST
FORM 990 PAT XII, LINE 2C	THE ORGANIZATION'S PRESIDENT AND BOARD TREASURER REVIEW THE AUDITED FINANCIAL STATEMENTS O N BEHALF OF THE BOARD OF DIRECTORS PRIOR TO ISSUANCE