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)

OMB No 1545-0047

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

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

Open to Public Inspection

		20 to calcinate year, or tax year beginning and or	- Iuiiig		
В	Check if	C Name of organization		D Employer identifica	ation number
_		S AVERTON PRIBATE OF A SECURITY POINT FOR			
Ļ	chang Name	AMERICAN BRIDGE ZIST CENTURY FOUNDATION	N	0.7. = 0	E0020
Ļ	chang				78038
Ļ	return	·	oom/suite	E Telephone number	<b>-</b> 4- 0050
L	Final return/ termin		00	(202)	747-2060
_	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	<u>6,842,474.</u>
Ļ	Ameno	WASHINGTON, DC 20001		H(a) Is this a group reti	
L	Application pendir	F Name and address of principal officer BRADLE! BEICHOK		for subordinates?	Yes X No
	perion	SAME AS C ABOVE		H(b) Are all subordinates incl	luded? Yes No
		empt status 501(c)(3) _X 501(c) ( 4 ) ◀ (insert no.) 4947(a)(1) or	527	If "No," attach a li	st (see instructions)
		e: ► WWW.BRIDGEPROJECT.COM		H(c) Group exemption	<del></del>
		organization: X Corporation Trust Association Other	L Year	of formation: 2011) M	State of legal domicile: DC
_	Part I	Summary			
6	1	Briefly describe the organization's mission or most significant activities $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	<u>ART I</u>	II, LINE 1.	
S.	볼				
7	Ĕ 2	Check this box $lacktriangle$ if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	ets
2	<u> </u>	Number of voting members of the governing body (Part VI, line 1a)		3	3
荛	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	3
L.	ខ្លុំ 5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		5	0
ي بي	6	Total number of volunteers (estimate if necessary)		6	3
	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	b b	Net unrelated business taxable income from Form 990 T, line 34		7b	0.
Ti.		•	. T	Prior Year	Current Year
ENVELOPE  SOUTH OF THE PROPERTY OF THE PROPERT	<u>.</u> 8	Contributions and grants (Part VIII, line 1h)	[	4,632,000.	6,833,243.
Š	[ 9	Program service revenue (Part VIII, line 2g)		0.	0.
3	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	31.
۵	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	_	0.	0.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,632,000.	6,833,274.
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		875,000.	721,000.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	2,274,352.	1,813,441.
Fynonege	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<del></del>	532,313.	794,529.
ġ	b b	Total fundraising expenses (Part IX, column (D), line 25)   1,258,43	4.		
ŭ	آ ا <sup>ک</sup>	Other expenses (Part IX-column (A): lines 11at 1d, 11f 24e)	<del></del>	1,328,321.	1,891,508.
		Total expenses Addilines 13:12 (must equal Part IX, column (A), line 25)		5,009,986.	5,220,478.
		Revenue less expenses Subtract line 18 from line 12		-377,986.	1,612,796.
- Jo		to (44)	Red	ginning of Current Year	End of Year
t Assets or	20	Total assets (Part X, line 16)	120	756,494.	3,072,881.
Ass	21 21	Total liabilities (Part-X-line 26)		805,435.	1,833,815.
Set	22	Net assets or fund balances Subtract-line 21 from line 20	<u> </u>	-48,941.	1,239,066.
	Part II	Signature Block		10/2121	1123370001
_		lities of perjury, I declare that I have examined this return, including accompanying schedules:	and statem	ents, and to the hest of my	knowledge and belief it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of which			Miorioago ana bonoi, it io
<u>~</u>	10, 001100	, and complete. Secondary of property (enter than onless) to based on an information of this	on propuror	11-16-1	1
<b>را</b> چېSi	an	Signature of officer		Date	<del>!</del>
-		BRADLEY BEYCHOK, PRESIDENT			
⊯H∈	ere	Type or print name and title			
<u>ا</u> _	<del></del>	2.7	<b>A</b>	Date Check	TI PATIN
7	.:	Print/Type prepayer's name GRALING CPA Prestater's lignatures of CPA	<b>?</b> 4 13	<i>(1 ){&lt;1/1</i>     -	- P DO366995
₽a			<u>,                                    </u>	<del>* • • • • • • • • • • • • • • • • • • •</del>	
	eparer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	52-1392008
عربية	e Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N		DL	1 \ 051 0000
4		BETHESDA, MD 20814-2930		Phone no (30	
W.	ay the IF	AS discuss this return with the preparer shown above? (see instructions)			X Yes No
√63	2001 11-1	1-16 LHA For Paperwork Reduction Act Notice, see the separate instruction	าร.		Form <b>990</b> (2016)

	990 (2016) AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27-5278038 Page 2 † III   Statement of Program Service Accomplishments	<u>-</u>
Fal		1
	Check if Schedule O contains a response or note to any line in this Part III	<u>.</u>
1	Briefly describe the organization's mission  THE AMEDICAN REPORT 21 CM CENTILLY FOLDS AND ALL MEDICAN TO THE COMPARE	
	THE AMERICAN BRIDGE 21ST CENTURY FOUNDATION'S MISSION IS TO COMPARE	_
	AND CONTRAST PROGRESSIVE AND CONSERVATIVE SOLUTIONS TO AMERICA'S	-
	PUBLIC POLICY CONCERNS AND TO EDUCATE THE AMERICAN PEOPLE AND THE	-
	NATION'S LEADERS ON THE RESULTS OF THAT RESEARCH.	-
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes X No	
	•	
_	If "Yes," describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No	
3	<u> </u>	
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported	_
4a	(Code) (Expenses \$ 3,444,521. including grants of \$ 721,000.) (Revenue \$	)
	THE ORGANIZATION ADVOCATED AND RESEARCHED PROGRESSIVE SOLUTIONS TO	_
	AMERICA'S PUBLIC POLICY CONCERNS, AND WORKED TO EDUCATE THE AMERICAN	-
	PEOPLE AND THE NATION'S LEADERS ON PROGRESSIVE IDEAS.	_
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4b	(Code) (Expenses \$	)
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4c	(Code) (Expenses \$	)
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		_
4d	Other program services (Describe in Schedule O)	_
-	(Expenses \$ Including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ▶ 3,444,521.	_
	Form <b>990</b> (2016	3)

AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27-5278038 Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2 Х Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for Х 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect N/A during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Х Schedule D, Part III 8 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? Х If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent 10 X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X 11 as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D. X 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 X Part X, line 16? If "Yes," complete Schedule D, Part IX 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Х 11e 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 X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? Х If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 Х foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 Х or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17

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

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

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

1c and 8a? If "Yes," complete Schedule G, Part II

	·			
	D. I. I	20a	Yes	No X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
о 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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		_X_
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		<u> X</u>
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		<u> X</u>
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		X
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)	 28a		X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	ZOD		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	- <del></del>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
•	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_33_		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			1
	Part V, line 1	34_		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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?		<b> </b>	
	If "Yes," complete Schedule R, Part V, line 2	36	N/	A
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197		·	
	Note. All Form 990 filers are required to complete Schedule O	<u> 38</u>	X	<u> </u> (2016)
		rorm	フプリ	(∠U I 6)

Form 990 (2016) Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 30 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 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? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? За 3a b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3р At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Х 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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? Х 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts X were not tax deductible? 6b N/A Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/Asponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. N/A Did the sponsoring organization make any taxable distributions under section 4966? 9a N/A Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9ь Section 501(c)(7) organizations. Enter 10 Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter N/A a Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a N/A 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 13 N/A a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the 13b organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13c

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14a

X

14a Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
			t		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		<u>3</u>		
	If there are material differences in voting rights among members of the governing body, or if the governing	-	ļ			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		ļ	اً		
b	Enter the number of voting members included in line 1a, above, who are independent	1b_	L	<u>3</u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	iip with	any other	-		
	officer, director, trustee, or key employee?			2_		X
3	Did the organization delegate control over management duties customarily performed by or under the	he dire	ct supervision	1		]
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form		as filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		5_		X
6	Did the organization have members or stockholders?			6_		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or			
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	ear by ti	ne following.	-		
a	The governing body?			_8a	X	17
b	Each committee with authority to act on behalf of the governing body?			8b	-	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the			3,7
500	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		- 0	9_		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	revenu	e Coae)		V	l NI-
100	Did the expension have level chanters branches or affiliates?			10a	Yes	No X
	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such or a su	shanto	re affiliatos	IUa		
ы	and branches to ensure their operations are consistent with the organization's exempt purposes?	Jiapte	s, aiillates,	10b		
11a		dy hefe	ore filing the form?	11a	Х	<del>                                     </del>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	dy Deit	re ming the form	110		<del> </del>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	-
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	officts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			12.0	-43	<del>                                     </del>
Ü	in Schedule O how this was done	, 00, 0	Combc	12c	х	l
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	_
15	Did the process for determining compensation of the following persons include a review and approx	val by i	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	•			ļ	
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b		X
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	with a			[
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	anızatıd	on's		}	
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ►CA, NY, FL, VA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	T (Sec	tion 501(c)(3)s only	/) availat	le	
	for public inspection. Indicate how you made these available. Check all that apply					
	Own website Another's website X Upon request Other (explain	n ın Sc	hedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict	of interest policy, a	ınd fınan	cıal	
	statements available to the public during the tax year					
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks a	nd records 🕨			
	BRADLEY BEYCHOK - (202)747-2060					
	455 MASSACHUSETTS AVENUE NW, NO. 600, WASHINGTON,	DC	20001			
632006	3 11-11-16			Forn	9 <b>90</b>	(2016)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$1,0,000 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	orga	ınıza	tion	CO	mpei	nsat	ed any current officer, o	director, or trustee	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	/4-		Pos	itior			Reportable	Reportable	Estimated
	hours per	box	(do not check more than one box, unless person is both an		compensation	compensation	amount of			
	week		er an	d a d	Irecto	or/trus	tee)	from	from related	other
	(list any	ecto						the	organizations	compensation
	hours for	<del>=</del>				Ed.	1	organization	(W-2/1099 MISC)	from the
	related	ste	ruste			Sua		(W-2/1099-MISC)		organization
	organizations	重	nalt		loye	E 9:				and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	<b>Рот</b> тег			organizations
	line)	Ē	=	통	ş	돌	횬			
(1) WILL LIPPINCOTT	10.00	١								
CHAIR (04/16 THROUGH 11/16)	1 00	X		X	<del> </del>	╄		0.	0.	0.
(2) TED TRIMPA	1.00	<b>∤</b>		l						
SECRETARY		X	_	X		├	<u> </u>	0.	0.	0.
(3) DAVID BENNAHUM	1.00	<b> </b>		l						
TREASURER		X	<u> </u>	X	_		1	0.	0.	0.
(4) JESSICA MACKLER	16.00	-			l			404 050		
PRESIDENT		<u> </u>		X	<u> </u>	<del> </del>		101,069.	0.	6,428.
(5) EDWARD P. VALE	24.00	-						442 004		
VICE PRESIDENT		<del> </del> —		X	_	_		113,294.	0.	5,645.
		-								
		_		ļ	ļ					
		1								
		<u> </u>				<u> </u>				
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Form 990 (2016)

632008 11-11-16

Form 990 (2016)

		Check if Schedule O cont	ains a response	or note to any lir				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D</b> ) Revenue excluded from tax under sections 512 - 514
ts s	1 a	Federated campaigns	1a					
E	b		1b	-				
اغ ي	c	· · · · · · · · · · · · · · · · ·	1c	-				
# F		Related organizations	1d					
( <u>a</u>	e							
ë		All other contributions, gifts, gran						
돌	•	similar amounts not included abo		833,243.				
				258,548.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Total. Add lines 1a-1f	18-11 5		6,833,243.			
<u> </u>	<u></u>	Total: Add lines Ta-11		Business Code	0,033,243.		2.1	
	2 a			business Code		-		
<u> </u>	_ b							+
Program Service Revenue	c	-	•					<del></del>
E §	d							, ,
P. C.	u 0			-				
۲ <u> </u>		All other program service reve	anue.					
	¹ ~	Total, Add lines 2a 2f	ilue					<u> </u>
$\overline{}$	3	Investment income (including	dividende intere	et and				
	3	other similar amounts)	dividends, intere	551, and	31.			31.
	4	Income from investment of tax	v avamat band n	roopede	71.			<del>                                     </del>
	5	Royalties	k-exempt bond p	loceeds				
	3	noyallies	(i) Real	(II) Personal				
	6.0	Gross rents	(i) Neai	(ii) Fersonai		1		
	6 a							
	b						-	4
	c							-
	d	Gross amount from sales of	(I) Converting	(v) Othor			<del></del>	
	/ a		(i) Securities	(II) Other		i		
		assets other than inventory		9,200.				
	D	Less cost or other basis		9,200.				
	_	and sales expenses						
		Gain or (loss)		0.				-
		Net gain or (loss)		_	0.			
<u> </u>	8 а	Gross income from fundraising	-					
ě		including \$						
&		contributions reported on line	•					
Other Revenue		Part IV, line 18	a					
ŏ		Less direct expenses	b	L	= +			
		Net income or (loss) from fund	_					
[	9 a	Gross income from gaming ac						
		Part IV, line 19	а					
		Less direct expenses	b 	<b>_</b>				
		Net income or (loss) from gam	-					<del> </del>
	ю а	Gross sales of inventory, less and allowances						
			а					
		Less cost of goods sold	b				-	
}	<u>C</u>	Net income or (loss) from sale		D				
}	44 -	Miscellaneous Revenu		Business Code		-		
	11 a							+
	b							+
	C	All piles a second						-
	d	All other revenue			-			+
		Total. Add lines 11a-11d			C 022 274	0.		. 31.
	12	Total revenue. See instructions		<u> </u>	<u>6,833,274.</u>	ı <u>U • </u>	0	51. Form <b>990</b> (2016)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)  $\overline{\mathbf{x}}$ Check of Schedule O contains a response or note to any line in this Part IX (D) Fundraising expenses (B) Program service (C) (A) Total expenses Do not include amounts reported on lines 6b. Management and 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses Grants and other assistance to domestic organizations 721,000. 721,000 and domestic governments. See Part IV, line 21 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 Benefits paid to or for members Compensation of current officers, directors, 3,400. 195,232. 27,804. 226,436 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 16,123. 1,271,085 1,094,978 159,984. Other salaries and wages Pension plan accruals and contributions (include <u>100,329</u> 3,066. 24,778. 128,173. section 401(k) and 403(b) employer contributions) 68,177 74,942. 6,340. 425. Other employee benefits 112,805. 101,039. 10.871 895. Payroll taxes 10 Fees for services (non-employees) Management 62,061. 30,110. 31,951 Legal 22,818. 22,818 Accounting Lobbying 794,529. 794,529. Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 582,702 7,630. 79,800. column (A) amount, list line 11g expenses on Sch O.) <u>670,132.</u> 74,665 74,665. Advertising and promotion 12 27,722. 1,613. 26,109. Office expenses 13 42,616. 36,967. 5,649. 14 Information technology Royalties 15 113,829. 9,842 103,987. 16 Occupancy 95,265. 73,957 169,222. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 333,697. 164,478 7,586. 161,633. 19 Conferences, conventions, and meetings Interest 20 Payments to affiliates 21 65,844 65,844. Depreciation, depletion, and amortization 22 17,346. 17,346. 23 Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) 24 amount, list line 24e expenses on Schedule O.) 59,038. 81,586 a FUNDRAISING EXPENSES 140,624. 111,732. 111,732. SUBSCRIPTIONS 18,662. 18,662 COLLECTIONS 13,812. d TEMPORARY SERVICES 13,812. 6,726. 6.726. e All other expenses 5,220,478. 3,444,521 517,523. 1,258,434. Total functional expenses. Add lines 1 through 24e 25 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined

Form 990 (2016)

Check here

educational campaign and fundraising solicitation.

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		21,537.	1	916,901
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net	Γ		3	
4	Accounts receivable, net			4	
5	Loans and other receivables from current and former officers,	directors,			
}	trustees, key employees, and highest compensated employee	s Complete			
Į	Part II of Schedule L			5	
6	Loans and other receivables from other disqualified persons (a	is defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B),			ļ	
	employers and sponsoring organizations of section 501(c)(9) v	- 1		Ì	
	employees' beneficiary organizations (see instr) Complete Par	· .		6	-
7	Notes and loans receivable, net			7	1,620,00
8	Inventories for sale or use	<u></u>		8	
9	Prepaid expenses and deferred charges			9	477,66
Į -	a Land, buildings, and equipment cost or other				
,	basis Complete Part VI of Schedule D 10a	346,957.			
	b Less accumulated depreciation 10b	295,304.	117,497.	10c	51,65
11	Investments - publicly traded securities	2337341		11	
12		<u> </u>		12	
13	Investments - program-related See Part IV, line 11			13	
14	Intangible assets	}		14	<del></del>
15	Other assets See Part IV, line 11	ŀ	617,460.	15	6,66
16	Total assets. Add lines 1 through 15 (must equal line 34)		756,494.	16	3,072,88
17	Accounts payable and accrued expenses		220,435.	17	852,71
18	Grants payable	-		18	032,71
19	Deferred revenue	ļ.	85,000.	19	
20	Tax-exempt bond liabilities		03,000.	20	
21	Escrow or custodial account liability Complete Part IV of Sche	dule D		21	
22	Loans and other payables to current and former officers, direc		····· · · · · · · · · · · · · · · · ·	21	
122	key employees, highest compensated employees, and disqual			1	
	Complete Part II of Schedule L	liled persons	A STATE CONTINUES OF THE STATE	22	
23	Secured mortgages and notes payable to unrelated third parti-	-	<del></del>	23	
24	Unsecured notes and loans payable to unrelated third parties	-	500,000.	24	
25	Other liabilities (including federal income tax, payables to relate	ed third		24	
25	parties, and other liabilities not included on lines 17-24) Comp				
	Schedule D	iete Fait A Oi	0.	25	981,10
26	Total liabilities. Add lines 17 through 25	-	805,435.	26	1,833,81
120	Organizations that follow SFAS 117 (ASC 958), check here	Yand	003,433.	20	
į	complete lines 27 through 29, and lines 33 and 34.	and			
27	Unrestricted net assets		-48,941.	27	1,239,06
1	Temporarily restricted net assets	F	40,741.	28	1,233,00
28	Permanently restricted net assets	-		29	
29	•	u hava 🛌 🗀		29	<del></del>
1	Organizations that do not follow SFAS 117 (ASC 958), chec	k nere			
00	and complete lines 30 through 34.	ſ		20	
30	Capital stock or trust principal, or current funds	}		30	
31	Paid-in or capital surplus, or land, building, or equipment fund	. 6		31	
32	Retained earnings, endowment, accumulated income, or other	iunas	10 011	32	1 220 06
33	Total net assets or fund balances	}	-48,941.	33	1,239,06
34	Total liabilities and net assets/fund balances		<u>756,494.</u>	34	3,072,88

Form **990** (2016)

<u>Form</u>	990 (2016) AMERICAN BRIDGE 21ST CENTURY FOUNDATION	2 <u>7</u> .	-52780	38	Pag	e 12
Pa	rt XI Reconciliation of Net Assets			_		
	Check if Schedule O contains a response or note to any line in this Part XI					X
	•					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	_ 6,	833	, 2	74.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,	220	, 41	78.
3	Revenue less expenses Subtract line 2 from line 1	3	1,	612	,79	96.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		-48	, 94	41 <u>.</u>
5	Net unrealized gains (losses) on investments	5		-2	,15	57 <u>.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		322	, 63	32.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	1,	239	,06	66.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			<b></b>	١	'es	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				}	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	_	.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		<u>X</u> _
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both			-		
	Separate basis Consolidated basis Both consolidated and separate basis		-	.		
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis	3,			
	consolidated basis, or both			ļ		
	X Separate basis Consolidated basis Both consolidated and separate basis					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	:, ]_		_	
	review, or compilation of its financial statements and selection of an independent accountant?		-	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		- I			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Au	ıdıt			
	Act and OMB Circular A:133?		L	3a	_	<u>X</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ıred au	dıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
			F	orm 9	90 (2	2016)

632012 11-11-16

#### SCHEDULE C (Form 990 or 990-EZ)

(Form 990 or 990-E2

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

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 www.irs.gov/form990.

2016

Open to Public Inspection

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

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

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

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

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

<ul> <li>Section 501(c)(4), (5), or (6) organiz</li> </ul>	ations Complete Part III			
Name of organization				oyer identification number
AMERICA	<u>AN BRIDGE 21ST CEN</u>	<u>TURY FOUNDA</u>	TION	<u> 27-5278038</u>
Part I-A Complete if the or	ganization is exempt unde	r section 501(c) c	or is a section 527 o	rganization.
<ol> <li>Provide a description of the organ</li> <li>Political campaign activity expend</li> <li>Volunteer hours for political campa</li> </ol>	litures	campaign activities in	Part IV ►\$	1,627,010. 0.
Part I-B Complete if the or	ganization is exempt unde	r section 501(c)(3	3).	<del></del>
1 Enter the amount of any excise ta			<b>▶</b> \$	
2 Enter the amount of any excise ta				
3 If the organization incurred a secti	ion 4955 tax, did it file Form 4720 fo	r this year?		Yes No
4a Was a correction made?		•		Yes No
<b>b</b> If "Yes," describe in Part IV				
Part I-C Complete if the or	ganization is exempt unde	r section 501(c),	except section 501(	c)(3).
1 Enter the amount directly expende	ed by the filing organization for sect	on 527 exempt function	on activities > \$	931,010.
2 Enter the amount of the filing orga	inization's funds contributed to othe	er organizations for sec	ction 527	
exempt function activities			▶\$	<u>696,000.</u>
3 Total exempt function expenditure	es Add lines 1 and 2 Enter here and	d on Form 1120-POL,		
line 17b			▶ \$	1,627,010. Yes X No
4 Did the filing organization file Form	n 1120-POL for this year?			Yes X No
made payments. For each organize contributions received that were page 1.	employer identification number (EIN) tation listed, enter the amount paid to promptly and directly delivered to a s f additional space is needed, provid	rom the filing organiza separate political orgai	ition's funds Also enter th nization, such as a separa	e amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter 0
IVOTE ACTION FUND	P.O. BOX 382175 CAMBRIDGE, MA 022	42-2919706	250,000.	0.
VOTE VETS ACTION	PO BOX 310031			
FUND	PORTLAND, OR 9729	51-0596352	55,000.	0.
PLANNED PARENTHOOD	WASHINGTON, DC			
ACTION FUND	20005	13-3539048	350,000.	0.
AMERICAN FAMILY	WASHINGTON, DC			
VOICES	20005	<u> 38-3708257</u>	41,000.	0.
			<u> </u>	<u> </u>

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

Schedule C (Form 990 or 990-EZ) 2016

632041 11-10-16

LHA

SEE PART IV FOR CONTINUATION

Schedule C (Form 990 or 990-EZ) 2016 .  Part II-A   Complete if the org	AMERICAN BR anization is exe	IDGE 21ST C	ENTURY FOUNI	DATION 27- ed Form 5768 (e	5278038 Page 2
section 501(h)).		•	· // /	•	
A Check ► if the filing organiza	tion belongs to an affi	liated group (and list in	Part IV each affiliated	group member's nai	ne, address, EIN,
expenses, and share	e of excess lobbying	expenditures)			
B Check ▶ if the filing organiza	tion checked box A ar	nd "limited control" pro	ovisions apply		
	ts on Lobbying Expe ditures" means amou	nditures ints paid or incurred.	)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (	grass roots lobbying)			
b Total lobbying expenditures to influ					
c Total lobbying expenditures (add li	=				
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	s (add lines 1c and 1c	i)			
f Lobbying nontaxable amount Ente	er the amount from the	e following table in bot	h columns		
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable am	ount is:		1
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,	000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000		
Over \$17,000,000	\$1,000,	000			
g Grassroots nontaxable amount (en	ter 25% of line 1f)			-	
h Subtract line 1g from line 1a If zero	o or less, enter -0-				
i Subtract line 1f from line 1c If zero	or less, enter -0-				
J If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
(Some organizations th	nat made a section 5	eraging Period Under 01(h) election do not ate instructions for lii	have to complete all o	of the five columns	below.
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period		-
Calendar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount	7.8.4.				<del> </del>
(150% of line 2d, column (e))					
(		<u> </u>			1
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990 EZ) 2016 AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27-5278038 Page 3

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes	response on lines 1a through 1i below, provide in Part IV a detailed description	1 (	(a)	(	b)
	lobbying		Yes	No		ount
1	During t	ne year, did the filing organization attempt to influence foreign, national, state or				
	local leg	islation, including any attempt to influence public opinion on a legislative matter	1			
	or refere	ndum, through the use of		.		į
а	Volunte	ors?		<del> </del>	_	1
b	Paid sta	ff or management (include compensation in expenses reported on lines 1c through 1i)?		<del> </del>	<u> </u>	
		dvertisements?		<del> </del>	<del>                                     </del>	
	•	to members, legislators, or the public?		<del> </del>	<del> </del>	
		ions, or published or broadcast statements?		<del> </del>		
f		o other organizations for lobbying purposes?	<u> </u>	<del> </del>	<del> </del>	
g		ontact with legislators, their staffs, government officials, or a legislative body?	-	<del>-</del>	<del> </del>	
n	Other a	demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-	+	<del>                                     </del>	
! :				<del> </del>	<del> </del>	
J		dd lines 1c through 1: activities in line 1 cause the organization to be not described in section 501(c)(3)?	<b>—</b>	+	+	
		enter the amount of any tax incurred under section 4912				
		enter the amount of any tax incurred by organization managers under section 4912				
		ng organization incurred a section 4912 tax, did it file Form 4720 for this year?	<b>—</b>	<del> </del>	<del></del>	
	t III-A	Complete if the organization is exempt under section 501(c)(4), section	on 501(c	)(5), or s	ection	
		501(c)(6).	<del></del>		Yes	No
1	Were si	bstantially all (90% or more) dues received nondeductible by members?		<u></u>		
2		organization make only in-house lobbying expenditures of \$2,000 or less?		2	<del> </del>	<del>                                     </del>
3		organization agree to carry over lobbying and political campaign activity expenditures from t	he prior vea	<del></del>		<del> </del>
		Complete if the organization is exempt under section 501(c)(4), sectio			ection	
		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	l "No," O	R (b) Pa	rt III-A, li	ne 3, is
		answered "Yes."	_			
1	Dues, as	sessments and similar amounts from members		1		
2	Section	162(e) nondeductible lobbying and political expenditures (do not include amounts of polit	ical	1		
	expense	es for which the section 527(f) tax was paid).			_	
а	Current	year		2a	<b>_</b>	
b	Carryov	er from last year		<u>2b</u>	<del> </del>	
С	Total			2c		
3	Aggrega	te amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	<del>                                     </del>	
4	If notice	s were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
		e organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political		-	
	•	ture next year?		4	ļ	
5		amount of lobbying and political expenditures (see instructions)		5_	<u> </u>	
Par		Supplemental Information				
		scriptions required for Part I-A, line 1, Part I-B, line 4, Part I C, line 5, Part II-A (affiliated grou	p list), Part	II-A, lines 1	and 2 (see	
	-	and Part II-B, line 1 Also, complete this part for any additional information				
PAF	<u>cr. 1-</u>	A, LINE 1:			<del></del>	
THE	ORG	ANIZATION ENGAGED IN RESEARCH AND TRACKING OF	CANDI	DATES	FOR	
Drr	T T C	ORELOR			- <del></del>	
FUE	אדר	OFFICE.	•			
			<del></del>			
THE	ORG	ANIZATION HAD LESS THAN \$100 OF INVESTMENT INC	COME,	THERE	FORE,	NO
111	ΩG_0(	I WAC DECITOED				
<u> </u>	. <u>u-PU</u>	L WAS REQUIRED.	Sched	ule C (For	m 990 or 99	0-EZ) 2016
			u			, 10

632043 11-10-16

Schedule C (Form 990 or 990 EZ) 2016 AMERICAN BRIDGE ZIST CENTURY FOUNDATION 27-5278038 Page 4  Part IV   Supplemental Information (continued)
PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORMATION:
PLANNED PARENTHOOD ACTION FUND
1110 VERMONT AVE, NW WASHINGTON, DC 20005
AMERICAN FAMILY VOICES
1250 EYE ST., NW, SUITE 250 WASHINGTON, DC 20005

#### **SCHEDULE D**

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

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

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

Pa		ST CENTURY FOUNDATION	<u> </u>	27-52/8038
Га			r Accoun	its. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir		(L) =	and other
		(a) Donor advised funds	(b) Funas	s and other accounts
1	Total number at end of year		<del></del>	
2	Aggregate value of contributions to (during year)			<del></del>
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds	
	are the organization's property, subject to the organization's	s exclusive legal control?		L Yes No
6	Did the organization inform all grantees, donors, and donor a	• •	•	
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose cor	nferring	
D-	impermissible private benefit?			Yes No
Pa	rt II Conservation Easements. Complete if the or		t IV, line 7	
1	Purpose(s) of conservation easements held by the organizat	·		
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a historic	ally importa	int land area
	Protection of natural habitat	Preservation of a certified	d historic st	ructure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of a	a conservati	on easement on the last
	day of the tax year		Н	leld at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c	
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure		
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the or	ganization o	during the tax
	year ►			
4	Number of states where property subject to conservation ea	sement is located >		
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements	it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing conserv	ation easer	nents during the year
	<b></b>			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	n easements	during the year
	<b>&gt;</b> \$			
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(	4)(B)(ı)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	ion easements in its revenue and expense sta	atement, an	d balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes the	organizatio	n's accounting for
_	conservation easements			
Pai	t III Organizations Maintaining Collections o		er Similai	r Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under SFAS 116 (AS			
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtherance	of public s	ervice, provide, in Part XIII,
	the text of the footnote to its financial statements that descri			
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement an	d balance s	heet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service, pro	ovide the following amounts
	relating to these items			
	(ı) Revenue included on Form 990, Part VIII, line 1		▶ \$	
	(ii) Assets included in Form 990, Part X		▶ \$	
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial ga		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items		
а	Revenue included on Form 990, Part VIII, line 1		▶ \$	9,200.
b	Assets included in Form 990, Part X		<b>▶</b> \$	0.

632051 08-29-16

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

Schedule D (Form 990) 2016.

	dule D (Form 990) 2016 AMERICA	N BRIDGE 2	1ST	CENTURY	Y FOUND	ATION				Page 2
Par										
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the f	ollowing that	are a sign	ificant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	d			ange progran					
b	Scholarly research	е		Other <u>SO</u>	LD TO R	<u>AISE</u>	FUN.	<u>DS</u>		
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	ın how th	ney further th	e organizatio	n's exemp	t purp	ose in Par	XIII	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical treas	ures, or other	r sımılar as	ssets	_	_	
	to be sold to raise funds rather than to be ma								Yes	L No
Par	t IV Escrow and Custodial Arran	Ŧ	ete if the	organization	answered "\	es" on Fo	orm 990	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa							-		
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contributions	s or other ass	ets not inc	cluded		<b>-</b> 1 .	
	on Form 990, Part X?							L	Yes	N₀
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table						
									Amount	
С	Beginning balance						1c_			
d	Additions during the year						<u>1d</u>			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or cu	stodial accou	ınt lıabılıty	?		Yes	No
<u>b</u>	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanation	on has been	provided on F	Part XIII				
Par	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" on Fo	rm 990, Part I	V, line 10			,	
		(a) Current year	(b) F	Prior year	(c) Two years	back (d	Three :	years back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships		ļ	. ,						
е	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	ce (line 1	g, column (a	)) held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	<u></u> %								
С	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	nd administer	ed for the	organi	zation	_	
	by								,	Yes No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(iı)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	ired on S	Schedule R?					3b	
4	Describe in Part XIII the intended uses of the	organization's end	owment	funds						
Pai	rt VI Land, Buildings, and Equipn	nent.								
	Complete if the organization answere	d "Yes" on Form 99	0, Part I	V, line 11a S	ee Form 990,	Part X, lır	ne 10			
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Acc	umulat	ed	(d) Book	value
		basis (investi	ment)	basis (	other)	depre	eciation	1		
1a	Land									
b	Buildings								_	
С	Leasehold improvements									
d	Equipment									
е	Other			34	6,957.	29	95,3	04.		L,653.
Total	Add lines 1a through 1e (Column (d) must e	equal Form 990 Par	t X colu	mn (B) line 1	0c)				51	L,653.

Schedule D (Form 990) 2016

	D (Form 990) 2016 AMERICAN BE	RIDGE 21ST	CENTU	RY FOUNDA	ATION 2	7-5278038	Page 3
Part V	II Investments - Other Securities.						
	Complete if the organization answered "Yes"						
	cription of security or category (including name of security)	(b) Book value	•	(c) Method of va	luation Cost or e	end of-year market v	alue
	ncial derivatives						
	ely-held equity interests		<u>_</u>				
(3) Othe	r	<del> </del>					
(A)				<del></del>		<del>_</del>	
(B) (C)					····		
(D)							
(E)							
(F)	· · · · · · · · · · · · · · · · · · ·				·		
(G)							
(H)							
Total (Co	I (b) must equal Form 990, Part X, col (B) line 12.)						
	III Investments - Program Related.						
	Complete if the organization answered "Yes			See Form 990, F	Part X, line 13		
	(a) Description of investment	(b) Book value	€	(c) Method of va	luation Cost or e	end-of-year market v	alue
(1)							
(2)	· ·						
(3)							
(4)					<del></del> _		
<u>(5)</u>		<u> </u>	_				
<u>(6)</u>			-				
<u>(7)</u>		<del>  </del>	<del></del>	<del></del>			
<u>(8)</u> <u>(9)</u>		<del> </del>			<del>_</del>		
	I. (b) must equal Form 990, Part X, col (B) line 13.)						
Part I						· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization answered "Yes	on Form 990, Part I	V, line 11d	See Form 990, F	Part X, line 15		
		Description				(b) Book va	llue
(1)							
(2)							
(3)							
(4)							
(5)		<u></u>					
<u>(6)</u>							
(7)							
<u>(8)</u>				_ <del></del>			
<u>(9)</u>	(h)					-	
Part X	olumn (b) must equal Form 990, Part X, col (B) III  Other Liabilities.	ne 15)		<del></del>			
- are s	Complete if the organization answered "Yes	" on Form 990. Part I	V line 11e	or 11f See Form	990 Part X line	25	
1.	(a) Description of liability	011101111000,1 4111		Book value	000,1 0177, 11110		
	ederal income taxes		1				
	OUE TO AMERICAN BRIDGE PA	AC		981,103.			
(3)			<u> </u>				
(4)							
(5)							
(6)							
(7)		_	<u> </u>				
(8)							
(9)							
Total. (C	olumn (b) must equal Form 990, Part X, col (B) lii	ne 25)		<u>981,103.</u>			
	ity for uncertain tax positions. In Part XIII, provid			-			
orga	nization's liability for uncertain tax positions unde	r FIN 48 (ASC 740)	Check here	e if the text of the	footnote has be	en provided in Part	XIII 🗶

Schedule D (Form 990) 2016

	dule D (Form 990) 2016 AMERICAN BRIDGE 21ST CENTU			5278038 Page <b>4</b>
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per	Return	l <b>.</b>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			
1	Total revenue, gains, and other support per audited financial statements		1	6,831,117.
2	Amounts-included on line 1 but not on Form 990, Part VIII, line 12		1 1	
а	Net unrealized gains (losses) on investments	2a -2,157	<u>.</u>	
b	Donated services and use of facilities	2b	_	
С	Recoveries of prior year grants	2c	_	
d	Other (Describe in Part XIII )	2d	_	
е	Add lines 2a through 2d		2e	-2,157.
3	Subtract line 2e from line 1		3	6,833,274.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b	· · · · · · · · · · · · · · · · · · ·	4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	6,833,274.
Pai	t XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses pe	r Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			
1	Total expenses and losses per audited financial statements	<del> </del>	1	5,220,478.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
- а	Donated services and use of facilities	2a	1 1	
b	Prior year adjustments	2b	7 I	
c	Other losses	2c	7	
d	Other (Describe in Part XIII )	2d	7	
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	5,220,478.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			3/220/1700
•	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a	Other (Describe in Part XIII )	4b	-  I	
b	Add lines 4a and 4b	40	<b></b> -	0
c	•		4c	0. 5,220,478.
Par	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  t XIII Supplemental Information.	<del></del>	1_5_1	<u>J,240,410.</u>
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part	IV lines 1b and 2b Part V line	o 4 Dort	V line 2 Part VI
	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any add		e 4, Fait	Λ, III le 2, Γαιτ ΛΙ,
iiiies	zu and 40, and Fart An, lines zu and 40. Also complete this part to provide any add	Monai information		
DAF	RT X, LINE 2:			
LVI	A A DINE 2.			
FOE	R THE YEAR ENDED DECEMBER 31, 2016, THE FO	רו פגע מחדיימתמוו	СТМЕ	ለጥፑኮ ፐጥኖ
101	THE TEAK ENDED DECEMBER 31, 2010, THE TO	ONDATION HAD DO	COME	NIBD IID
CON	SIDERATION OF FASB ASC 740-10, INCOME TAX	תדעו∩מם העאה סב	FC CI	TIDANCE FOR
<u>CO1</u>	NOTITE OF TABLE ADD 140-10, INCOME TAKE	ED, INAL PROVID	<u> </u>	DIDANCE FOR
וחם	ORTING UNCERTAINTY IN INCOME TAXES AND HA	ם היהבאואום יים צ	ልሞ እፕ	<b>Матрота</b> т.
KEL	OKIING ONCERTAINTI IN INCOME TAKED AND IM	O DUIDICITION III	77 14	J IMILITAL
TIMO	CERTAIN TAX POSITIONS QUALIFY FOR EITHER R	ECOCNITION OF D	TSCT	OSIIRE IN
OINC	N MAINTER NOT TELLIAND CHOTTICOT AND MINISTER	BCOGNITION ON D	TOCH	OBORE IN
THE	FINANCIAL STATEMENTS.			
1111	TIMANCIAL STATEMENTS.	<del></del>		<del></del>
	<del></del>			<del></del>

# SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Employer identification number** Name of the organization 27-5278038 AMERICAN BRIDGE 21ST CENTURY FOUNDATION Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants h X Phone solicitations Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes □ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) have custody or entity (fundraiser) from activity fundraiser or control of organization listed in col (i) Yes BONNER GROUP - 455 No MASSACHUSETTS AVE NW SUITE 6 833 243 794,529 6,038,714, Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. CA, NY, FL, VA

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2016

Pa	edu I <b>rt I</b>		e organization answered	d "Yes" on Form 990, Par	t IV, line 18, or reported	more than \$15,000
		of fundraising event contributions and gr	oss income on Form 990	OEZ, lines 1 and 6b List	events with gross receip	ots greater than \$5,000
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
ne			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts				
	2	Less Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes			<u> </u>	
Se	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
rect E	7	Food and beverages				
Δ	8	Entertainment	0			
	9	Other direct expenses				
	10	Direct expense summary Add lines 4 through	h 9 ın column (d)		<b>&gt;</b>	
	11					<u> </u>
Pa	rt I	Gaming. Complete if the organization	answered "Yes" on Forr	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a				·
Revenue	İ		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Re						_
						_
	1	Gross revenue				
nses	2	Gross revenue  Cash prizes				
t Expenses	2					
Direct Expenses		Cash prizes				
Direct Expenses	3	Cash prizes  Noncash prizes  Rent/facility costs			Van 1 9/	
Direct Expenses	3 4 5	Cash prizes  Noncash prizes  Rent/facility costs	Yes%	Yes% No	Yes_*%	
Direct Expenses	3 4 5	Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor	No			
Direct Expenses	3 4 5 6	Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor	No h 5 ın column (d)			
9 a	3 4 5 6 7 8 Entits t	Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary Add lines 2 through	No h 5 in column (d) from line 1, column (d) ucts gaming activities ctivities in each of these	No No states?		Yes No
9 a b	3 4 5 6 7 8 Entitle If " We	Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary Add lines 2 through  Net gaming income summary Subtract line 7  ter the state(s) in which the organization conditate organization licensed to conduct gaming a	No h 5 in column (d) from line 1, column (d) ucts gaming activities ctivities in each of these	erminated during the tax	No ►	Yes No

632082 09-12-16

Schedule G (Form 990 or 990-EZ) 2016

Schedule G (Form 990 or 990-EZ) 2016 AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27	<u>7-5278038</u>	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to administer charitable gaming?	L Yes	L No
13 Indicate the percentage of gaming activity conducted in	1 1	
a The organization's facility	13a	%
b An outside facility	13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ▶		
Address >		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount		
of gaming revenue retained by the third party > \$		
c If "Yes," enter name and address of the third party		
Name ▶		
Address >		
16 Gaming manager information		
Name ▶		
Gaming manager compensation > \$		
Description of services provided ▶		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	Yes	L No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ne	
organization's own exempt activities during the tax year ► \$    Part IV   Supplemental Information, Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part	W bass 0 05 44	Dt 455
Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part 15c, 16, and 17b, as applicable Also provide any additional information. See instructions	III, lines 9, 9b, 10	, מכר, סכ,
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAIS	SERS:	
	<del></del>	
(I) NAME OF FUNDRAISER: BONNER GROUP		
(I) ADDRESS OF FUNDRAISER:		
455 MASSACHUSETTS AVE NW, SUITE 640, WASHINGTON, DC 20001		
	<del></del>	
632083 09-12-16 Schedule G (I	Form 990 or 990	-EZ) 2016

Schedule G	(Form 990 or 990-EZ)	AMERICAN	BRIDGE	21ST	CENTURY	FOUNDATION	<u> 27-5278038</u>	Page 4
Part IV	(Form 990 or 990-EZ)  Supplemental Info	rmation (continue	ed)		_			
			·····		··			
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SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. ■ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

2016 No 1545-0047

Open to Public Inspection

ž FRAINING REGARDING PUBLIC 。 ъ. Employer identification number 27-5278038 TO PROVIDE EDUCATION AND (h) Purpose of grant SENERAL OPERATIONS SENERAL OPERATIONS SENERAL OPERATIONS SENERAL OPERATIONS or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any SPEAKING Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) ö Ö o (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed CENTURY FOUNDATION (d) Amount of cash grant 000 15,000 65,000 350,000 250,000 41. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 85-0430800 501(C)(4) 501(C)(4) 501(C)(4) 501(C)(4) 501(C)(4) Enter total number of other organizations listed in the line 1 table 21ST51-0596352 13-1644147 46-3018149 46-4431052 General Information on Grants and Assistance (b) EIN AMERICAN BRIDGE criteria used to award the grants or assistance? 1 (a) Name and address of organization 455 MASSACHUSETTS AVE NW, 6TH FL PLANNED PARENTHOOD ACTION FUND or government 1250 EYE ST NW, STE 250 123 WILLIAM ST, 10TH FL AMERICAN FAMILY VOICES VOTE VETS ACTION FUND WASHINGTON, DC 20005 WASHINGTON, DC 20005 WASHINGTON, DC 20001 722 12TH ST, 3RD FL Name of the organization PORTLAND, OR 97296 THE FRANKLIN FORUM NEW YORK, NY 10038 PO BOX 10031 IVOTE INC. Part I Part II 3

Schedule I (Form 990) (2016)

LHA

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

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) THE GRANTEES MUST PROVIDE FINANCIAL REPORTS DETAILING THE SPENDING OF GRANT Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed (d) Amount of non-cash assistance (c) Amount of cash grant 37 (b) Number of recipients (a) Type of grant or assistance PART I, LINE 2: FUNDS

Schedule I (Form 990) (2016)

632102 11-01-16

Page 2

27-5278038

AMERICAN BRIDGE 21ST CENTURY FOUNDATION

Schedule I (Form 990) (2016)

Part III

### SCHEDULE M (Form 990)

### **Noncash Contributions**

OMB No 1545-0047

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

Attach to Form 990.

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

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

-=-	AMERICAN BRI	DGE 21	ST CENTUR	Y FOUNDATION		27-5278	<u> 3038</u>	
Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported or Form 990, Part VIII, line	ו ו	(d) Method of determing the contribution and contribution	_	ts
1	Art - Works of art	X	1	9,20	0.FM	<u> </u>		
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	<u>X</u>	1	249,34	8.FM7	<i></i>		
10	Securities - Closely held stock					·		
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -	l						
	Historic structures				<del></del>	<del></del>		
	·Qualified conservation contribution · Other		<u> </u>	<u> </u>				
15	Real estate - Residential	ļ						
16	Real estate - Commercial		-					
17	Real estate - Other			<del></del>	+			
18	Collectibles							
19 20	Food inventory Drugs and medical supplies		-					
21	Taxidermy		<u> </u>					
22	Historical artifacts							
23	Scientific specimens	<u> </u>						
24	Archeological artifacts					<del></del>		
25	Other (		·			<u> </u>		
26	Other							
27	Other ( )							
28	Other ( )							
 29	Number of Forms 8283 received by the organi	zation during	g the tax year for c	contributions				
	for which the organization completed Form 82		-	l l				
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rep	ported in Part I, lines 1 th	rough 28	, that it		
	must hold for at least three years from the date	e of the initia	al contribution, and	which isn't required to	be used f	or		_
	exempt purposes for the entire holding period	?				30a	<u> </u>	X
b	If "Yes," describe the arrangement in Part II							_
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard con	tributions	31	X	
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell nonc	ash		1	
	contributions?					32a	X	<u></u>
b	If "Yes," describe in Part II							
33	If the organization didn't report an amount in o	olumn (c) fo	r a type of propert	y for which column (a) is	checked	,		
	describe in Part II		<u>.                                    </u>					<u></u>
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.		Schedule M (Forn	n <b>990)</b>	(2016

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both Also complete this part for any additional information
SCHEDULE M, PART I, COLUMN (B):
THIS COLUMN INCLUDES THE NUMBER OF CONTRIBUTIONS RECEIVED.
SCHEDULE M, LINE 32B:
BONNER GROUP IS SOLELY RESPONSIBLE FOR SOLICITING ALL CASH AND NON-CASH
CONTRIBUTIONS

#### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 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

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

AMERICAN BRIDGE 21ST CENTURY FOUNDATION

Employer identification number 27-5278038

FORM 990, PART VI, SECTION A, LINE 8B:
THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES WITH AUTHORITY TO ACT ON
BEHALF OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE
PRESIDENT AND LEGAL COUNSEL. THE RETURN WAS FORWARDED TO THE BOARD OF
DIRECTORS BEFORE FILING WITH THE IRS.
FORM 990, PART VI, SECTION B, LINE 12C:
THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO EACH OFFICER AND
DIRECTOR. THE POLICY REQUIRES DISCLOSURE OF ANY POTENTIAL CONFLICTS OF
INTEREST. IF SUCH DISCLOSURES ARE MADE, THE BOARD OF DIRECTORS INVESTIGATES
TO DETERMINE IF A CONFLICT OF INTEREST EXISTS. THE INDIVIDUAL HAVING THE
POTENTIAL CONFLICT OF INTEREST IS EXCLUDED FROM THESE PROCEEDINGS.
FORM 990, PART VI, SECTION B, LINE 15A:
THE COMPENSATION OF THE PRESIDENT AND TOP MANAGEMENT OFFICIAL WAS BASED ON
COMPENSATION STUDIES USING COMPARATIVE DATA FROM OTHER ORGANIZATIONS. THE
FINAL COMPENSATION WAS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS.
COMPENSATION FOR OTHER EMPLOYEES WAS APPROVED BY THE PRESIDENT OF THE
ORGANIZATION. ALL COMPENSATION PROCESSES ARE DELIBERATED AND DOCUMENTED.
THE LAST COMPENSATION REVIEW TOOK PLACE IN NOVEMBER 2015.
FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS ARTICLES OF INCORPORATION AND FORM 990 AVAILABLE

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

632211 08-25-16

Schedule O (Form 990 or 990-EZ) (2016)

Schedule O (Form 990 or 990-EZ) (2016)  Name of the organization	Page 2 Employer identification number
AMERICAN BRIDGE 21ST CENTURY FOUNDATION	27-5278038
UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
PROFESSIONAL SERVICES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	2,604.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,604.
PAYROLL SERVICES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	5,026.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	5,026.
NEW MEDIA STAFFING:	
PROGRAM SERVICE EXPENSES	50,874.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	50,874.
VOICE TALENT:	
PROGRAM SERVICE EXPENSES	50.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	50.
VIDEO EDITOR - FREELANCE:	<del> </del>
	hedule O (Form 990 or 990-EZ) (2016)

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization  AMERICAN BRIDGE 21ST CENTURY FOUNDATION	Employer identification number 27-5278038
PROGRAM SERVICE EXPENSES	8,659.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	8,659.
MISCELLANEOUS CONSULTING:	
PROGRAM SERVICE EXPENSES	366,750.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	366,750.
PUBLIC AFFAIRS:	
PROGRAM SERVICE EXPENSES	94,778.
MANAGEMENT AND GENERAL EXPENSES	0
FUNDRAISING EXPENSES .	<b>50.000</b>
TOTAL EXPENSES	174 570
COMMUNICATIONS CONSULTANTS:	
PROGRAM SERVICE EXPENSES	
MANAGEMENT AND GENERAL EXPENSES	
FUNDRAISING EXPENSES	
TOTAL EXPENSES	61,591.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	670,132.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
DUE TO/FROM ADJUSTMENT FOR THE 2015 ACCOUNTING PERIOD	-322,632.