DLN: 93493191007014

OMB No 1545-0047

2013

Open to Public Inspection

Form **990**

Department of the Treasury Internal Revenue Service

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

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

generally cannot redact the information on the form

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

Doing Business As ITIF Number and street (or P O box if mail is not delivered to street address) Number and street (or P O box if mail is not delivered to street address) Room/suit City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20005 F Name and address of principal officer ROBERT DATKINSON 1101 K STREET NW NO 610 WASHINGTON, DC 20005 Ot status	(202) 6 G Gross rec H(a) Is this a group r subordinates? H(b) Are all subordinincluded? If "No," attach at the subordinate of the subordinate o	ceipts \$ 3,0 return for ates on number 6 M Sta	665,957 r
Number and street (or P O box if mail is not delivered to street address) Room/suit 1101 K STREET NW NO 610 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20005 F Name and address of principal officer ROBERT D ATKINSON 1101 K STREET NW NO 610 WASHINGTON,DC 20005 ot status	(202) 6 G Gross rec H(a) Is this a group r subordinates? H(b) Are all subordinincluded? If "No," attach at the subordinate of the subordinate o	ceipts \$ 3,0 return for ates a list (see on number 6 M Sta	Tyes No Yes No Yes No ee instructions) er ► ate of legal domicile DE ts 29 28 18
Title Association Other Summary Trust Association Other Summary Triefly describe the organization's mission or most significant activities TIF IS A NON-PARTISAN RESEARCH AND EDUCATIONAL INSTITUTE heck this box If the organization discontinued its operations or disposed of umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a)	(202) 6 G Gross rec H(a) Is this a group r subordinates? H(b) Are all subordinincluded? If "No," attach at the subordinate of the subordinate o	ceipts \$ 3,0 return for ates a list (see on number 6 M Sta	Tyes No Yes No Yes No ee instructions) er ► ate of legal domicile DE ts 29 28 18
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F Name and address of principal officer ROBERT D ATKINSON 1101 K STREET NW NO 610 WASHINGTON, DC 20005 ot status 501(c)(3) 501(c)() (insert no) 4947(a)(1) or 527 www.itiforg. anization Corporation Trust Association Other Summary riefly describe the organization's mission or most significant activities TIFIS A NON-PARTISAN RESEARCH AND EDUCATIONAL INSTITUTE heck this box if the organization discontinued its operations or disposed o umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) otal number of volunteers (estimate if necessary)	H(a) Is this a group resubordinates? H(b) Are all subordination included? If "No," attach at the control of th	ates a list (see on number of the see of the	TYes No Yes No ee Instructions) er • ate of legal domicile DE ts 29 28 18
ROBERT D ATKINSON 1101 K STREET NW NO 610 WASHINGTON, DC 20005 ot status	subordinates? H(b) Are all subording included? If "No," attach at the subording included? If "No," attach at the subording included? L Year of formation 2000 f more than 25% of its recommendation.	ates a list (see on numbe 6 M Sta	Yes ✓ No Yes ✓ No ee instructions) er ► ate of legal domicile DE ts 29 28 18
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ot status	Included? If "No," attach a H(c) Group exemption L Year of formation 2006 f more than 25% of its r	a list (see on number 6 M Sta	ee instructions) er ► ate of legal domicile DE ts 29 28 18
www.itiforg anization Corporation Trust Association Other Summary riefly describe the organization's mission or most significant activities TIF IS A NON-PARTISAN RESEARCH AND EDUCATIONAL INSTITUTE heck this box If the organization discontinued its operations or disposed o umber of voting members of the governing body (Part VI, line 1a)	If "No," attach a H(c) Group exemption L Year of formation 2000 f more than 25% of its r	net asset	er ► ate of legal domicile DE ts 29 28 18
www.itiforg anization Corporation Trust Association Other Summary riefly describe the organization's mission or most significant activities TIF IS A NON-PARTISAN RESEARCH AND EDUCATIONAL INSTITUTE heck this box If the organization discontinued its operations or disposed o umber of voting members of the governing body (Part VI, line 1a)	H(c) Group exemption L Year of formation 2000 f more than 25% of its r	net asset	er ► ate of legal domicile DE ts 29 28 18
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riefly describe the organization's mission or most significant activities TIF IS A NON-PARTISAN RESEARCH AND EDUCATIONAL INSTITUTE heck this box F if the organization discontinued its operations or disposed of umber of voting members of the governing body (Part VI, line 1a)		3 4 5	29 28 18
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otal number of individuals employed in calendar year 2013 (Part V, line 2a) . otal number of volunteers (estimate if necessary)	[5	18
otal number of volunteers (estimate if necessary)	l l		
otal unrelated business revenue from Part VIII, column (C), line 12		6	28
		+	_
et unrelated business taxable income from Form 990-T, line 34	<u> </u>	7a	0
et unierated business taxable income nom Form 990-1, inte 34	Prior Year	7b 	Current Year
Contributions and grants (Part VIII, line 1h)	3,471,16	6.2	3,468,276
- · · · · · · · · · · · · · · · · · · ·		_	106,603
			89,867
Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,40	06	1,211
- · · · · · · · · · · · · · · · · · · ·		9.6	3,665,957
	3,303,11		0
		0	0
Salaries, other compensation, employee benefits (Part IX, column (A), lines	1,497.99	93	1,493,067
Professional fundraising fees (Part IX, column (A), line 11e)		_	66,250
Total fundraising expenses (Part IX, column (D), line 25) \$\infty\$66,250			
Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,969,55	5 7	1,639,546
Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	3,542,55	50	3,198,863
Revenue less expenses Subtract line 18 from line 12	40,64	46	467,094
	Beginning of Current Year	t	End of Year
Total assets (Part X line 16)	3,780,06	67	4,023,615
Total assets (Fare X, IIIIe 10)		34	1,094,988
Total liabilities (Part X, line 26)	1,318,53		2,928,627
	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 43,337 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,406 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,583,196 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,497,993 Professional fundraising fees (Part IX, column (A), line 11e) 75,000 Total fundraising expenses (Part IX, column (D), line 25) ▶ 66,250 1,969,557 Total expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,969,557 Total expenses Subtract line 18 from line 12 40,646 Beginning of Current Year Total assets (Part X, line 16) 3,780,067 Total liabilities (Part X, line 26) 1,318,534

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

Sign
Here

Signature of officer

ROBERT D ATKINSON PRESIDENT Type or print name and title

Paid Preparer **Use Only**

Print/Type preparer's name FREDERICK LONGWOOD Preparer's signature Firm's name F TATE AND TRYON

Firm's address - 2021 L STREET NW SUITE 400

WASHINGTON, DC 20036

May the IRS discuss this return with the preparer shown above? (see instruction

1 01111	1990 (2013	/			raye 2
Par		tement of Program Servic	e Accomplishments use or note to any line in this Part I	п	
1		cribe the organization's mission	,		
ITIF POLI	IS A NON-FICIES TO A	PARTISAN RESEARCH AND EDU DVANCE TECHNOLOGICAL INN	CATIONAL INSTITUTE WHOSE M OVATION AND PRODUCTIVITY : ECHNOLOGY IN ENSURING AMER CONOMY ISSUES	NTERNATIONALLY, IN WASH	INGTON AND IN THE
2			t program services during the year		
	•	orm 990 or 990-EZ? escribe these new services on Sch	edule O		┌ Yes ┌ No
3	Did the org services?		ke significant changes in how it cor	ducts, any program	┌ Yes ┌ No
4	Describe the	ne organization's program service	accomplishments for each of its thr organizations are required to report		
	(Code) (Expenses \$	2,682,766 including grants of \$) (Revenue \$	106,603)
	TECHNOLOG	N-PARTISAN RESEARCH AND EDUCATION	AL INSTITUTE WHOSE MISSION IS TO FORM TERNATIONALLY, IN WASHINGTON, AND IN INNOVATION, PRODUCTIVITY, AND DIGITAL	THE STATES RECOGNIZING THE VITAL	
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other pro (Expense:	gram services (Describe in Sched s \$	ule O) ling grants of \$) (Revenue \$)
4e	Total prog	jram service expenses ▶	2,682,766		

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V^{\bullet}	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		N o
14a	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
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and 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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? 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			
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
С	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
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		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		No
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		· ·	 No
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 10		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
•	gaming (gambling) winnings to prize winners?	1c	Yes	
3	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			
•	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	
3	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
,				
	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	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?			No
		5b		141
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
3	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?	6a		N
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).		i	
	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		N
	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			N
	file Form 8282?	7c		IN
	The test, indicate the number of forms 5252 med during the year.			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N ·
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	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 and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
l	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
,	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		141

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

Check if Schedule O	contains a	response	or note to a	iny line in this	Part VI												
Check ii Schedale o	contains a	response	or mote to a	iniy iiiic iii ciii.	, i dic vi	•	•	•	-	•	•	•	•	•	•	•	•

56	ection A. Governing Body and Management					
					Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	29			
	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	1 b	28			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2	Yes	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management coi			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the or	aanız	ation's assets?	5		Νο
6	Did the organization have members or stockholders?			6		No
	Did the organization have members, stockholders, or other persons who had the pow	erto	elect or annount one or			
	more members of the governing body?			7a		No
	or persons other than the governing body?			7b		No
	Did the organization contemporaneously document the meetings held or written action year by the following	ons ui	ndertaken during the			
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, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not a	requi	ired by the Internal R	evenu	ıe Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	s gov	erning body before filing	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	90			
	Did the organization have a written conflict of interest policy? If "No," go to line 13.			12a		No
	Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	y inte	rests that could give	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? <i>If "Yes," describe</i>	12c		
13	Did the organization have a written whistleblower policy?			13	Yes	
14	Did the organization have a written document retention and destruction policy? .			14	Yes	
	Did the process for determining compensation of the following persons include a revi			T-4	1 62	
15	independent persons, comparability data, and contemporaneous substantiation of th	e delı	beration and decision?			1
	The organization's CEO, Executive Director, or top management official			15a	Yes	
b	Other officers or key employees of the organization	•		15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?			16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organi participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	step	s to safeguard the	16b		
Se	ection C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed▶					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable (3)s only) available for public inspection. Indicate how you made these available. Ch					

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

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►THE ORGANIZATION 1101 K STREET NW STE 610 WASHINGTON,DC 20005 (202)626-5732

Form 990	(2013)	
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г	а	У	c	,

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per	Posi		(C)				(D)	(E)	(F)
	week (list any hours	more t	han o n is	ne l both	oox, an c	heck unless officer stee)		Reportable compensation from the organization (W-	Reportable compensation from related organizations	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)	(W- 2/1099- MISC)	organization and related organizations

Part VII 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	tion (han d n is	one l both	oox, an d	heck unless officer stee)	5	from organiza	rtable nsation i the tion (W-	(E) Reportable compensation from related organizations (W	,_	(F) Estima mount o compens from t	ited f other sation :he
		for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
1b	Sub-Total			<u> </u>	<u> </u>			<u> </u>				+		
С	Total from continuation sheet	ts to Part VII, S	ection /	١.				Þ						
d	Total (add lines 1b and 1c) .							*		747,510		0		154,855
2	Total number of individuals (in \$100,000 of reportable comp						d abov	e) w	ho receive	ed more th	an			
													Yes	No
3	Did the organization list any f on line 1a? <i>If "Yes," complete 5</i>					key •		yee	, or highes	t compen	sated employee	3		No
4	For any individual listed on lin organization and related organ													
	ındıvıdual				•	•		•				4	Yes	
5	Did any person listed on line 1 services rendered to the organ									anızatıon • • •	or individual for	5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your fire compensation from the organization	ve highest comp											tax year	
		(A) Name and business	<u> </u>								(B) cription of services		(C Comper	
HELEN	N MILBY 233 PENNSYLVANIA AVE SE 2N			03							NG/ADMINISTRATIVE		. F 31	132,500
	Total number of independent co \$100,000 of compensation fror			not	lımıt	ed to	o thos	e list	ted above)	who rece	ıved more than			

					(A) Total revenue
	1a	Federated campaigns	1a		
nts ints	ь	Membership dues	1b		
Grants mounts	°	Fundraising events	1c		
T. A.	d	Related organizations	1d		
ıns, Giffs, Similar Aı	e	Government grants (contributions)	1e	1,120,658	
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and	16 1f	2,347,618	
tributi Other	'	similar amounts not included above	1.		
Ē Ē	g	Noncash contributions included in lines 1a-1f \$			
Conf	h	Total. Add lines 1a-1f	•	· · · · •	3,468,
en				Business Code	
ven	2a b	TITE RETREAT INCOME		900099	106,
ა 2≝	c	PUBLICATIONS		900099	
7. 2.	d				
å E	e				
Program Serwoe Revenue	f	All other program service revenue			
š	g	Total. Add lines 2a-2f			106,
	3	Investment income (including dividendent		ds, interest,	89,
	4	and other similar amounts) Income from investment of tax-exempt be		proceeds •	
	5	Royalties		🕨	
		(ı) Real		(II) Personal	
	6a b	Gross rents Less rental			
	_ c	expenses Rental income			
	d	or (loss) Net rental income or (loss)			
		(i) Securities		(II) Other	
	7a	Gross amount from sales of			
		assets other than inventory			
	b	Less cost or other basis and			
	c	sales expenses Gain or (loss)			
	d	Net gain or (loss)			
an e	8a	Gross income from fundraising events (not including			
Other Revenue		of contributions reported on line 10 See Part IV, line 18	=)		
<u> </u>	ь	Lane diwark overse	a		
₽	C	Less direct expenses Net income or (loss) from fundrais	b ing	events 🛌	
	9a	Gross income from gaming activiti See Part IV , line 19	es		
	ь	Less direct expenses	a b		
	_ c	Net income or (loss) from gaming a		vities	
	10a	Gross sales of inventory, less returns and allowances .	_		
	Ь		a b		
	c	Net income or (loss) from sales of		entory 🛌	
		Miscellaneous Revenue		Business Code	
	11a	OTHER INCOME		900099	1,
	b c				
	d	All other revenue			
	e	Total. Add lines 11a-11d		🕨	1,
	12	Total revenue. See Instructions		🗚	
	j			<i>^</i>	3,665,

			Page S
			_
(A) otal revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax under
	function revenue	revenue	sections
			512-514
-			
3,468,276			
106,289	106,289		
314	314		
106,603			
89,867			89,867
09,007			89,807
1,211			1,211
1,211	10	_	s ·
3,665,957	106,603	0	91,078 Form 990 (2013

	,
Part IX	Statement of Functional Expenses
Section 50:	1(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	446,902	393,273	53,629	
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	875,259	770,228	105,031	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	31,792	27,977	3,815	
9	Other employee benefits	62,126	54,670	7,456	
10	Payroll taxes	76,988	67,749	9,239	
11	Fees for services (non-employees)				
а	Management				
b	Legal	83	73	10	
c	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17	66,250			66,250
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	201 740	100 (21	02.100	
40	Schedule O)	281,740	189,631	· · ·	
12	Advertising and promotion	3,762	452	3,310	
13	Office expenses	49,589	43,064	6,525	
14	Information technology				
15	Royalties				
16	Occupancy	261,576	230,186		
17	Travel	67,860	59,717	8,143	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	16,204	14,260	· ·	
20	Interest	333	293	40	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,000	10,560	 	
23	Insurance	1,116	982	134	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	EAC GRANT	464,610	396,656	67,954	
b	STAFF HILL TRIP ACTIVIT	180,169	158,549	21,620	
c	ITI OVERHEAD	178,001	156,641	21,360	
d	DEVELOPMENT	67,003	58,963	8,040	
е	All other expenses	55,500	48,842	6,658	
25	Total functional expenses. Add lines 1 through 24e	3,198,863	2,682,766	449,847	66,250
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2013) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X $\,$. $\,$. $\,$. Γ (B) End of year (A) Beginning of year 1,278,025 1,198,660 Cash-non-interest-bearing . . . 1 1 2 1,750,447 2 2,083,912 Savings and temporary cash investments

2	Savings and temporary cash investments			1,750,447	2	2,083,912
3	Pledges and grants receivable, net				3	
4	Accounts receivable, net			764,357	4	511,905
5	Loans and other receivables from current and former officers, dir employees, and highest compensated employees Complete Part Schedule L	t II of				
					5	
6	Loans and other receivables from other disqualified persons (as section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$ employers and sponsoring organizations of section $501(c)(9)$ vobeneficiary organizations (see instructions) Complete Part II of), and co luntary	ontributing employees'			_
					6	
7	Notes and loans receivable, net				7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges				9	
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	94,442			
b	Less accumulated depreciation	10b	39,839	66,603	10 c	54,603
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			0	15	95,170
16	Total assets. Add lines 1 through 15 (must equal line 34)			3,780,067	16	4,023,615
17	Accounts payable and accrued expenses			298,434	17	199,818
18	Grants payable				18	
19	Deferred revenue			1,020,100	19	800,000
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability Complete Part IV of Sched	ule D .			21	
22	Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualifie		ees,			
	persons Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrelated third parties				23	
24	Unsecured notes and loans payable to unrelated third parties .				24	
25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part					07.470
	D			0	25	95,170
26	Total liabilities. Add lines 17 through 25			1,318,534	26	1,094,988
	Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	and co	nplete			
27	Unrestricted net assets			2,461,533	27	2,928,627
28	Temporarily restricted net assets		<u>.</u> –	_,,	28	
29	Permanently restricted net assets		·. —		29	
	Organizations that do not follow SFAS 117 (ASC 958), check her					
	complete lines 30 through 34.					
30	Capital stock or trust principal, or current funds				30	
31	Paid-in or capital surplus, or land, building or equipment fund .				31	
32	Retained earnings, endowment, accumulated income, or other fur	nds			32	
33	Total net assets or fund balances			2,461,533	33	2,928,627
34	Total liabilities and net assets/fund balances	<u>.</u> .	<u>. </u>	3,780,067	34	4,023,615
			•			Form 990 (2013)

Liabilities

Net Assets or Fund Balances

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,6	565,957
2	Total expenses (must equal Part IX, column (A), line 25)	2		3 .	198,863
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			167,094
•	Net assets of faile balances at beginning of year (mast equal) are X, fine 55, column (A),	4		2,4	161,533
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities				
7	Investment expenses	6			
•	Threstment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2.0	928,627
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	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	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 oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: **Software Version:**

EIN: 20-4403497

Name: INFORMATION TECHNOLOGY AND INNOVATION FOUNDATION

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers,	Direct	ors,	Tru	ste	es, ŀ	(ey	Employees, Higl	nest	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	Posit more th perso and a	ion (i nan o n is b i dire	ne b oth ctor,	ox, ι an o /trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
GRANT D ALDONAS DIRECTOR	1 00	x						0	0	0
MARIA CINO	1 00	x						0	0	0
DIRECTOR BILL ANDRESEN	1 00									
DIRECTOR		Х						0	0	0
WILLIAM B BONVILLIAN DIRECTOR	1 00	x						0	0	О
CHRISTOPHER G CAINE	1 00	x						0	0	0
DIRECTOR JEFF CAMPBELL	1 00							-		
DIRECTOR		Х						0	0	0
JEFFREY A EISENACH DIRECTOR	1 00	x						0	0	0
GREG FARMER	1 00	x						0	0	0
DIRECTOR TOM GALVIN	1 00									
DIRECTOR		X						0	0	0
DAVID GOLDSTON DIRECTOR	1 00	х						0	0	0
SHANE GREEN	1 00	х						0	0	0
DIRECTOR AMBASSADOR DAVID A GROSS	1 00	X						0	0	0
DIRECTOR DAVID HART	1 00									
DIRECTOR		Х						0	0	0
FREDERICK S HUMPHRIES JR	1 00	x						0	0	0
DIRECTOR HON NANCY JOHNSON	1 00	х						0	0	0
DIRECTOR BLAIR LEVIN	1 00									
DIRECTOR	1.00	X						0	0	0
JASON MAHLER DIRECTOR	1 00	x						0	0	o
BERNIE MCKAY	1 00	х						0	0	0
JENNIFER MULVENY	1 00	X						0	0	0
DIRECTOR CATHERINE NOVELLI	1 00	^								
DIRECTOR		Х						0	0	0
CHRISTOPHER PADILLA	1 00	х						0	0	0
DIRECTOR SENATOR MARK WARNER	1 00	×						0	0	0
HONORARY SENATE CO-CHAIR SENATOR ORRIN HATCH	1 00									
HONORARY SENATE CO-CHAIR		Х						0	0	0
REPRESENTATIVE ANNA ESHOO HONORARY CO-CHAIR	1 00	x		х				0	0	0
REPRESENTATIVE DARRELL ISSA	1 00	х		х				0	0	0
HONORARY CO-CHAIR	J				<u> </u>	1	<u> </u>			<u> </u>

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (d nan o n is b	ne bo	ox, u an of	nless ficer	:	(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 trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
VIC FAZIO	1 00	Х		х				0	0	0
CO-CHAIRPERSON		_ ^		,				0	,	
PHILLIP S ENGLISH	1 00	x		x				0	0	0
CO-CHAIRPERSON		_ ^		l ^				•	, and the second	
DEAN GARFIELD	1 00	х		х				0	0	0
TREASURER										
ROBERT D ATKINSON	40 00	x		х				367,292	0	79,610
PRESIDENT, ITIF WILLIAM DUBE	40 00									
COMMUNICATIONS DIRECTOR	40 00					x		101,740	0	9,373
STEPHEN EZELL	40 00							126.246		20.000
SENIOR ANALYST						X		136,346	0	28,999
DANIEL CASTRO	40 00					х		142,132	0	36,873
SENIOR ANALYST]					_ ^		142,132	U	30,873

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As Filed Data -

DLN: 93493191007014

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. ► See separate instructions.

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

Open to Public **Inspection**

lame	of the	e organizatio	on		
NEORN	MOTTAN	TECHNOLOGY		ΙΝΝΟΥΔΤΙΩΝ	FOLINDATION

Employer identification number

					Yes	No	Yes	No	Yes	No	
	<u></u>	· -		lines 1- 9 above or IRC section (see instructions))	your gove docume	rning nt?	suppor	t? [′]	ın the U	S?	
S) Nam suppor ganiza	ted	(ii) EIN	(iii) Type of organization (described on	(iv) Is t organızatı col (i) lıst	on in	(v) Did you the organiz in col (i) o	zation	(vi) Is t organizati col (i) orga	on in	(vii) A mount of monetary support
h				ng information about			. ,		T		
				lled entity of a perso						11g(iii)
		•		er of a person descri		-				11g(
				governing body of th	· ·		=		(1)	11g(
			ng persons? erson who d	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons des	scribed in (ii)		Yes No
g		Since A	ugust 17, 2	2006, has the organi	zatıon accep	oted any gift	or contribution	on from any	of the		'
f		If the o	. ,. ,	received a written de	etermination	from the IRS	5 that it is a ⁻	Гуре I, Туре	e II, or Type	III supportu	ng organization,
e	Γ	By cheo	cking this b	ox, I certify that the on managers and otl	organization	ıs not contr	olled directly	or indirectl	y by one or m	nore disquali	fied persons
11	Γ	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a									
10	Γ	•	,		•			•	•		
		•		ganızatıon after June				•		tax) II o III ba.	311103303
		•		oss investment inco	•	-			` '		
9	,	_		ities related to its ex			* *		· ·	-	=
8 9	<u> </u>		,	described in sectior at normally receives	. , . , .	, , , ,	•	•	utions mamb	nershin foca	and gross
-	▽	describ	ed in sectio	at normally receives on 170(b)(1)(A)(vi). described in sectior	(Complete P	art II)		J	iitai uiiit or fr	om the gene	rai public
6 7	 		•	local government or	-						مراطيية المس
_	_			A)(iv). (Complete P				4-041344			
5	Γ	_	•	erated for the benefi	=	or universit	y owned or o	perated by a	a government	al unit desci	rıbed ın
	_	hospita	ıl's name, cı	ty, and state							
4	,	•		n organization operat	-				. , . ,	1)(A)(iii). E	nter the
3	<u>'</u>			perative hospital se				n 170(h)(1)	(A)(iii).		
1 2	<u> </u>		•	on of churches, or as d in section 170(b)(1				ection 170(E))(1)(A)(I).		
	rganı		•	te foundation becaus	•			•	-		
	rt I			blic Charity Sta						<u>istructions.</u>	
					- (20-44034		

Schedule A (Form 990 or 990-EZ) 2013 Page 2 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) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 2,142,574 2,424,014 3,375,308 3,471,162 3,468,276 14,881,334 include any "unusual grants ") 2 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 2,142,574 2,424,014 3,375,308 3,471,162 3,468,276 14,881,334 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 2,666,117 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 12,215,217 from line 4 Section B. Total Support Calendar year (or fiscal year (f) Total (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 beginning in) 🟲 2,424,014 3,375,308 3,471,162 2,142,574 3,468,276 14,881,334 Amounts from line 4 Gross income from interest, dividends, payments received on 8,816 10,410 27,246 43,337 89,867 179,676 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include 10 gain or loss from the sale of 37,520 4,879 3,406 1,211 47,016 capital assets (Explain in Part IV) 11 Total support (Add lines 7 15,108,026 through 10) Gross receipts from related activities, etc (see instructions) 12 12 171,894 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 80 850 % 15 Public support percentage for 2012 Schedule A, Part II, line 14 15 80 100 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization **▶**▽ b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶□ organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
_	in) ►		<u> </u>	, ,	<u> </u>	. ,	
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
7	organization's benefit and either						
	paid to or expended on its						
	behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)				1		
	ndar year (or fiscal year beginning	I				I	
Care	in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	1017 E-						
9	A mounts from line 6						
9 10a	,						
	Amounts from line 6						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes)						
10a	A mounts from line 6 Gross income from interest, 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						
10a	A mounts from line 6 Gross income from interest, 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						
10a b	A mounts from line 6 Gross income from interest, 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						
10a b	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included						
10a b	A mounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the						
10a b c 11	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
10a b	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include						
10a b c 11	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of						
10a b c 11	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part						
10a b c 11	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of						
10a b c 11	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)						
10a b c 11	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for	or the organization	on's first, second	, third, fourth, or f	fifth tax year as a	1 501(c)(3) organ	
10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here		·	, thırd, fourth, or f	fifth tax year as a	1 501(c)(3) organ	nization, ▶
10a b c 11 12 13 14 Se	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	ic Support Pe	ercentage		fifth tax year as a		
10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Puble Public support percentage for 2013	ic Support Pe (line 8, column (ercentage f) divided by line		fifth tax year as a	15	
10a b c 11 12 13 14 Se	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	ic Support Pe (line 8, column (ercentage f) divided by line		fifth tax year as a		
10a b c 11 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Puble Public support percentage for 2013	ic Support Pe (line 8, column (2 Schedule A, Pa	ercentage f) divided by line art III, line 15	13, column (f))	fifth tax year as a	15	
10a b c 11 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ection C. Computation of Pub Public support percentage from 201	ic Support Pe (line 8, column (2 Schedule A, Pa estment Inco	ercentage f) divided by line art III, line 15 me Percenta	13, column (f))		15	
10a b c 11 12 13 14 Se 15 16 Se 17	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Public support percentage for 2013 Public support percentage from 201 ction D. Computation of Inventional section of Invention of Inventi	ic Support Pe (line 8, column (2 Schedule A, Pa estment Inco 2013 (line 10c, co	ercentage f) divided by line art III, line 15 me Percentage blumn (f) divided	13, column (f)) ge by line 13, colum		15 16	
10a b c 11 12 13 14 See 15 16 See 17 18	Amounts from line 6 Gross income from interest, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the sale of th	ic Support Per (line 8, column (2 Schedule A, Parestment Inco 2013 (line 10 c, con 2012 Schedule A	ercentage f) divided by line art III, line 15 me Percentag blumn (f) divided A, Part III, line 1	13, column (f)) ge by line 13, colum 7	n (f))	15 16 17 18	▶

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or
	17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
	F (A 10)
	Facts And Circumstances Test

SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME

Return Reference

INCOME FROM ACTIVITIES NOT REGULARLY CARRIED ON

Explanation

Schedule A (Form 990 or 990-EZ) 2013

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

DLN: 93493191007014

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Inte

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990)

Open to Public

Name of the organization INFORMATION TECHNOLOGY AND INNOVATION FOUNDATION Part I Organizations Maintaining Donor Advised Funds or Other Sorganization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised form 1 Total number at end of year Aggregate contributions to (during year)	20- Similar Funds	ployer identifica	tion numbe	r
organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised f Total number at end of year	Similar Funds			
organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised f Total number at end of year		A A A A A A A A A A A A A A A A A A A		
(a) Donor advised f L Total number at end of year	unds	or Accounts	. Complet	e if th
Total number at end of year		(b) Funds and	other accou	nts
Aggregate contributions to (during year)				
Aggregate grants from (during year)				
Aggregate value at end of year				
Did the organization inform all donors and donor advisors in writing that the assets funds are the organization's property, subject to the organization's exclusive legal		rised	┌ Yes	┌ No
Did the organization inform all grantees, donors, and donor advisors in writing that used only for charitable purposes and not for the benefit of the donor or donor advisors in the property of the donor or donor advisors.			┌ Yes	□ No
conferring impermissible private benefit? art II Conservation Easements. Complete if the organization answer	red "Ves" to For	m 990 Part IV	,	, 140
Purpose(s) of conservation easements held by the organization (check all that app Preservation of land for public use (e.g., recreation or education) Preser Protection of natural habitat Preservation of open space	oly) rvation of an histoi rvation of a certifie	rically important	t land area ture	
Complete lines 2a through 2d if the organization held a qualified conservation cont easement on the last day of the tax year	tribution in the for	m of a conserva	tion	
		Held at the	End of the	Year
Total number of conservation easements	2a			
Total acreage restricted by conservation easements	2b			
Number of conservation easements on a certified historic structure included in (a)	2c			
Number of conservation easements included in (c) acquired after 8/17/06, and not historic structure listed in the National Register	t on a 2d			
Number of conservation easements modified, transferred, released, extinguished, the tax year -	or terminated by t	he organization	during	
Number of states where property subject to conservation easement is located 🛌				
Does the organization have a written policy regarding the periodic monitoring, inspenforcement of the conservation easements it holds?	ection, handling o	f violations, and	│ │ Yes	┌ No
Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conserv	ation easements	during the year		
A mount of expenses incurred in monitoring, inspecting, and enforcing conservation + \$	n easements durin	ng the year		
Does each conservation easement reported on line 2(d) above satisfy the requirenand section $170(h)(4)(B)(II)$?	ments of section 1	70(h)(4)(B)(ı)	☐ Yes	┌ No
In Part XIII, describe how the organization reports conservation easements in its balance sheet, and include, if applicable, the text of the footnote to the organizatio the organization's accounting for conservation easements				
Organizations Maintaining Collections of Art, Historical Tro Complete if the organization answered "Yes" to Form 990, Part IV		ther Similar	Assets.	
If the organization elected, as permitted under SFAS 116 (ASC 958), not to report works of art, historical treasures, or other similar assets held for public exhibition,	t in its revenue sta education, or res	earch in furthera		
		ment and balanc		ıc
service, provide, in Part XIII, the text of the footnote to its financial statements the state of the footnote for its financial statements the state of the footnote for its financial statements the works of art, historical treasures, or other similar assets held for public exhibition, service, provide the following amounts relating to these items	education, or res			
service, provide, in Part XIII, the text of the footnote to its financial statements the If the organization elected, as permitted under SFAS 116 (ASC 958), to report in works of art, historical treasures, or other similar assets held for public exhibition,	education, or res	► \$		
service, provide, in Part XIII, the text of the footnote to its financial statements the If the organization elected, as permitted under SFAS 116 (ASC 958), to report in works of art, historical treasures, or other similar assets held for public exhibition, service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1	education, or reso			
service, provide, in Part XIII, the text of the footnote to its financial statements the If the organization elected, as permitted under SFAS 116 (ASC 958), to report in works of art, historical treasures, or other similar assets held for public exhibition, service, provide the following amounts relating to these items	lar assets for finar	► \$		
service, provide, in Part XIII, the text of the footnote to its financial statements the If the organization elected, as permitted under SFAS 116 (ASC 958), to report in works of art, historical treasures, or other similar assets held for public exhibition, service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar to the similar treasures.	lar assets for finar	►\$ ncial gain, provid		

Part	Organizations Maintaining Collections of	of Art, His	stori	cal Treasu	ires, or Oth	<u>er Similar Asse</u>	ts (continued)
3	Using the organization's acquisition, accession, and other collection items (check all that apply)	r records, c	heck	any of the foll	owing that are	a significant use of	its
а	Public exhibition	d	Γ	Loan or exc	hange program	S	
b	Scholarly research	е	Γ	Other			
c	Preservation for future generations						
4	Provide a description of the organization's collections and Part XIII	d explain ho	w the	y further the o	organization's e	exempt purpose in	
5	During the year, did the organization solicit or receive dor assets to be sold to raise funds rather than to be maintain						Yes □ No
Par	t IV Escrow and Custodial Arrangements. C Part IV, line 9, or reported an amount on Fo	omplete ıf	the	organizatioi			
1a	Is the organization an agent, trustee, custodian or other included on Form 990, Part X?				or other assets		Yes
b	If "Yes," explain the arrangement in Part XIII and comple	ete the follo	wing t	able			
						Amou	ınt
C	Beginning balance				1c		
d	Additions during the year				1d		
e	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on Form 990, Part	t X, line 217	>			Γ	Yes
b	If "Yes," explain the arrangement in Part XIII Check here	e ıf the expl	anatı	on has been p	provided in Part	: XIII	Г
Pai	rt V Endowment Funds. Complete if the organi	ızatıon ans	swer	ed "Yes" to	Form 990, Pa	rt IV, line 10.	
	(a)Current y	ear (b)Prior	year b (c) T	wo 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						
e	Other expenditures for facilities and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the current year end	balance (lır	ne 1g	, column (a))	held as		
а	Board designated or quasi-endowment 🕨						
b	Permanent endowment ►						
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100)%					
За	Are there endowment funds not in the possession of the $\ensuremath{\text{o}}$	rganızatıon	that	are held and a	admınıstered fo	r the	
	organization by					2-(1)	Yes No
	(i) unrelated organizations					3a(i) 3a(ii)	
b	If "Yes" to 3a(II), are the related organizations listed as re		Sched	· · · · · · · · · · · · · · · · · · ·		3b	
4	Describe in Part XIII the intended uses of the organization						<u> </u>
Par	t VI Land, Buildings, and Equipment. Comple 11a. See Form 990, Part X, line 10.	ete if the o	rgar	ization ansv	wered 'Yes' to	Form 990, Part	IV, line
	Description of property			a) Cost or other asis (investment)		er (c) Accumulated depreciation	(d) Book value
1a	Land		\top				
Ь	Buildings						
	Leasehold improvements				34,60	7	34,607
	Equipment				F0.03	5 39,839	10,006
d l	Equipment				59,83	2 23,033	19,996
	Other				39,63	39,039	19,996

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(B)Book value	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. (」 n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		,
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. Complete if the organization (a) Description		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. Complete if the org	janization answered tes t	o Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
DEFERRED COMPENSATION	95,170	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 95,170	
, , , , , , , , , , , , , , , , , , ,	. 55,170	e organization's financial statements that

Par	t XI	Reconciliation of Revenue per Audited Financial Statements With Reven the organization answered 'Yes' to Form 990, Part IV, line 12a.	ue p	er R	eturn Complete If
1	Tota	al revenue, gains, and other support per audited financial statements		1	3,715,957
2	A mo	ounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net	unrealized gains on investments 2a			
b	Don	ated services and use of facilities	000		
c	Rec	overies of prior year grants			
d	Othe	er (Describe in Part XIII)			
e	Add	lines 2a through 2d		2e	50,000
3	Subt	tract line 2e from line 1	. [3	3,665,957
4	A mo	ounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Inve	estment expenses not included on Form 990, Part VIII, line 7b . 4a			
b	Othe	er (Describe in Part XIII)			
c	Add	lines 4a and 4b	. [4 c	0
5		al revenue Add lines 3 and 4c. (This must equal Form 990 , Part I , line 12)		5	3,665,957
Part	XII	Reconciliation of Expenses per Audited Financial Statements With Expense of the organization answered 'Yes' to Form 990, Part IV, line 12a.	nses	per	Return. Complete
1	Tota	ll expenses and losses per audited financial statements		1	3,248,863
2	A mo	unts included on line 1 but not on Form 990, Part IX, line 25			
а	Dona	ated services and use of facilities	,000		
b	Prior	ryear adjustments			
C	Othe	erlosses			
d	Othe	er (Describe in Part XIII)			
e	Add	lines 2a through 2d		2e	50,000
3	Subt	cract line 2e from line 1		3	3,198,863
4	A mo	unts included on Form 990, Part IX, line 25, but not on line 1:			
а	Inve	stment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Othe	er (Describe in Part XIII)			
C	Add	lines 4a and 4b		4c	0
5		ll expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	3,198,863
Par	XIII	Supplemental Information			
Part		e descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b a e 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this pa n			de any additional
	R	eturn Reference Explanation			

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

DLN: 93493191007014

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

	ne of the organization		LEQUAD	TION			Employer ident	ification number
1 IN F	ORMATION TECHNOLOGY	Y AND INNOVATION	FOUNDA	ATTON			20-4403497	
Pa		tivities. Completers are not required			on answered "Yes" to part.	o Form	990, Part IV,	line 17.
1	Indicate whether the orga	nization raised funds	through ar	ny of the f	following activities Che	ck all tha	at apply	
а	Mail solicitations				Solicitation of non-			
b	☐ Internet and email so	licitations		f	Solicitation of gove	ernment (grants	
c	Phone solicitations			g	☐ Special fundraising	events		
d	In-person solicitation	S						
2a	Did the organization have or key employees listed in							Ves I N
b	If "Yes," list the ten highe to be compensated at leas			undraise	rs) pursuant to agreeme	nts unde	er which the fun	draiser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(or re fundraı	nount paid to etained by) ser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
	HELEN MILBY 233 PENNSYLVANIA AVE SE 2ND FLO WASHINGTON, DC	PROFESSIONAL FUNDRAISING SERVICES		No	3,624,879		66,250	3 ,5 5 8 ,6 2 9
	20003							
								_
Tota	al	<u> </u>	<u> </u>	.	3,624,879		66,250	3,558,629
		organization is reserve	tarad ar !:	concod to		. hac ha-		
3	List all states in which the registration or licensing	s organization is regis	tereu VI III	censeu to	י שטווכונ בטוונווטענוטווא סר	nas nee	ii notineu It IS 6	жеттре попп

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribu			
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
als.			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
έVe	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
m	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .				
Dreat -	8	Entertainment				
출	9	Other direct expenses .				
	10	Direct expense summary Add line	es 4 through 9 ın colum	n (d)		()
	11	Net income summary Subtract lir	ne 10 from line 3, colum	n (d)		
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
Φ		\$13,000 ON TOTAL 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c))
<u>~</u>	1	Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No		┌ Yes	
	7	Direct expense summary Add lines	3 2 through 5 in column	(d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)		
9	Ent	er the state(s) in which the organiza	ition operates gaming a	ctivities		
а		the organization licensed to operate		•		Fyes Fno
b	If"	No," explain				
10a b		re any of the organization's gaming l Yes," explain				· · 「Yes 「No

_							11
Does	s the organization operate gaming activit					Yes No	ɔ
12	Is the organization a grantor, beneficia	•			•		
	formed to administer charitable gaming	17				· · Fyes	Γ _{No}
13	Indicate the percentage of gaming acti	vity operated in					
а	The organization's facility				-		%
b	An outside facility				13b		%
14	Enter the name and address of the pers	on who prepares th	ie organization's gan	ning/special events	s books and rec	ords	
	Name 🟲						
	Address►						
15a b	Does the organization have a contract revenue?	venue received by	the organization 🟲 \$			· · 「Yes	Гио
c	If "Yes," enter name and address of the	e third party					
		,					
	Name 🕨						
	Address►						
16	Gaming manager information						
	Name 🕨						
	Gaming manager compensation 🟲 \$						
	Description of services provided						
17 a	Director/officer Mandatory distributions Is the organization required under stat retain the state gaming license?		table distributions fr		ceeds to	_	-
b	Enter the amount of distributions requi	red under state law	distributed to other			Г Yes	J No
Pai	rt IV Supplemental Information Part III, lines 9, 9b, 10b, 15 additional information (see)	on. Provide the e b, 15c, 16, and 1	xplanations requi				, and
	Return Reference			Explanation			
		<u> </u>					

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DLN: 93493191007014

OMB No 1545-0047

Schedule J (Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

Compensation Information

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (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 INFORMATION TECHNOLOGY AND INNOVATION FOUNDATION

Employer identification number

20-4403497

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate 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 Housing allowance or residence for personal use			
	☐ Travel for companions ☐ 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)			
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?			
	ancetors, trustees, officers, filefading the GEO/Exceditive Billector, regarding the feelins effected in file 14	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			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	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	Yes	
С	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) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			110
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	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)ROBERT D ATKINSON PRESIDENT, ITIF	(i) (ii)	317,292 0	50,000 0	0	67,500 0	12,110 0	44 6,902 0	0	
(2)STEPHEN EZELL SENIOR ANALYST	(i) (ii)	136,346 0	0	0	28,400 0	599 0	165,345 0	0 0	
(3)DANIEL CASTRO SENIOR ANALYST	(i) (ii)		0	0	27,849 0	9,024 0	179,005 0	0	

Schedule J (Form 990) 2013

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
PART I, LINE 4B	ITIF MADE THE FOLLOWING CONTRIBUTIONS TO EMPLOYEE 457F PLANS ROBERT ATKINSON - \$50,000 STEPHEN EZELL - \$20,000 DANIEL CASTRO - \$20,000

Schedule J (Form 990) 2013

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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 to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Name of the organization
INFORMATION TECHNOLOGY AND INNOVATION FOUNDATION

Employer identification number
20-4403497

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	CHRIS CAINE, ITIF BOARD MEMBER, WAS CEO OF A COMPANY THAT PROVIDED CONSULTING SERVICES TO ITIC WHOSE CEO (DEAN GARFIELD) IS ALSO AN ITIF BOARD MEMBER
FORM 990, PART VI, SECTION B, LINE 11	TAX RETURN WAS PROVIDED TO CLIENT BEFORE BEING SUBMITTED
FORM 990, PART VI, SECTION B, LINE 12	A COPY OF THE CONFLICT OF INTEREST POLICY IS PROVIDED ANNUALLY TO EACH MEMBER OF THE GOVERNING BODY AS WELL AS TO ALL OFFICERS AND KEY EMPLOYEES, EACH IS REMINDED TO REVIEW THE POLICY AND TO REPORT ANY CONFLICTS OF INTEREST
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD REVIEWS THE EXECUTIVE DIRECTOR'S COMPENSATION AS PART OF THE ANNUAL PERFORMANCE EVALUATION PROCESS
FORM 990, PART VI, SECTION C, LINE 19	ITIF IS A NON-PARTISAN RESEARCH AND EDUCATIONAL INSTITUTE WHOSE MISSION IS TO FORMULATE AND PROMOTE PUBLIC POLICIES TO ADVANCE TECHNOLOGICAL INNOVATION AND PRODUCTIVITY INTERNATIONALLY, IN WASHINGTON AND IN THE STATES RECOGNIZING THE VITAL ROLE OF TECHNOLOGY IN ENSURING AMERICAN PROSPERITY, ITIF FOCUSES ON INNOVATION, PRODUCTIVITY AND DIGITAL ECONOMY ISSUES