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

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

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

 \blacktriangleright Information about Form 990 and its instructions is at $\underline{www.IRS.gov/form990}$

OMB No 1545-0047

DLN: 93493103004146

Open to Public Inspection

A F	or the 2	2014 calendar year, or tax year beginning 10-01-2014 , and ending 09-30-2015				
ВС	heck if ap	oplicable C Name of organization THE FEDERALIST SOCIETY FOR LAW AND		D Emplo	yer ider	ntification number
✓ Ad	ddress cha	ange PUBLIC POLICY STUDIES		36-32	35550)
ΓN	ame chan	% THE FEDERALIST SOCIETY Doing business as				
┌ In	ıtıal retur			E Telepho	ne num	ber
⊢ Fı re	nal turn/term	Number and street (or P O box if mail is not delivered to street address) Room/suit 1776 I STREET NW SUITE 300	e	(202)	822-8	138
	mended r	eturn City or town, state or province, country, and ZIP or foreign postal code				
	plication	washington, DC 200063774 pending		G Gross r	eceipts \$	18,866,394
		F Name and address of principal officer	H(a) Is	this a group	return	for
		STEVEN G CALABRESI 1776 I STREET NW SUITE 300	su	bordinates?		ΓYes Γ No
		WASHINGTON, DC 20006		e all subordi	nates	┌ Yes ┌ No
	ax-exem	pt status		cluded? "No," attach	a lıst	(see instructions)
J V	Vebsite	: WWW FED-SOC ORG	H(c) G	roup exempt	ıon nur	mber ►
K Fo	rm of org	anization	L Year o	f formation 19	82 M	State of legal domicile IL
Pa	art I	Summary				
s & Governance	т	Briefly describe the organization's mission or most significant activities THE ORGANIZATION PROMOTES INTELLECTUAL DIVERSITY IN THE RULE DRGANIZED EXCLUSIVELY FOR CHARITABLE, EDUCATIONAL AND SCIENT			AL CO	MMUNITY IT IS
		Check this box 🔭 if the organization discontinued its operations or disposed of Jumber of voting members of the governing body (Part VI, line 1a)			net as	sets
Ĕ	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)			4	8
Activities &	5 T	otal number of individuals employed in calendar year 2014 (Part V, line 2a) $$.			5	36
ă	6 ⊺	otal number of volunteers (estimate if necessary)			6	4,500
		otal unrelated business revenue from Part VIII, column (C), line 12			7a	С
	b N	let unrelated business taxable income from Form 990-T, line 34			7b	
			P	rior Year	246	Current Year
<u>o</u>	8 9	Contributions and grants (Part VIII, line 1h)		16,642,	-	17,224,591 868,281
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		498,		103,770
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			965	1,256
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		17,823,		18,197,898
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		416,		334,388
	14	Benefits paid to or for members (Part IX, column (A), line 4)		<u>, </u>	0	0
ø	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		4,792,	379	5,007,588
#)Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0	0
Expenses	Ь	Total fundraising expenses (Part IX, column (D), line 25) ▶ 967,893				
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		8,727,3	358	9,735,714
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		13,935,	375	15,077,690
	19	Revenue less expenses Subtract line 18 from line 12		3,887,9	905	3,120,208
Net Assets or Fund Balances			Beginr	ning of Curre Year	nt	End of Year
3age	20	Total assets (Part X, line 16)		12,660,	929	16,217,366
절	21	Total liabilities (Part X, line 26)		748,4	140	1,302,606
žĒ	22	Net assets or fund balances Subtract line 21 from line 20		11,912,	189	14,914,760

Part II Signature Block

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
Sign
Here
11010

Signature of officer EUGENE B MEYER PRESIDENT Type or print name and title

Paid Preparer **Use Only**

Print/Type preparer's name JOEL C SUSCO Preparer's signature JOEL C SUSCO

Firm's name FOND BEEBE PC

Firm's address > 4600 EAST-WEST HIGHWAY SUITE 900

BETHESDA, MD 208143423

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

For Paperwork Reduction Act Notice, see the separate instructions.

13,355,375

Total program service expenses

art 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 1</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? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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		No
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 domestic 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 or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
_		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		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <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? If "Yes," complete Schedule R, Part V, line 2	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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			厂_
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 269			
	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	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	- Jb		
	2	5с		
	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		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		V	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7b	Yes	
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.]		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	Į		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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 ar	v line in this Part VI	_	_	_	_	_	_		_			マ
Check ii Schedule O	contains a response of note to ar	y inite in this i dit vi .		•	•	•	•	•	•		•	•	a) '

Se	ction 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			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	Ť		140
<i>,</i> u	more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
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	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed►IL, MD, NY, PA, SC
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - 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
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►THE FEDERALIST SOCIETY

1776 I STREET NW SUITE 300

WASHINGTON, DC 20006 (202) 822-8138

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h ar or/tr	c with this compensated compensated	ess er e)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Steven G Calabresi	1 0	х		×				0	0	0
Director/Chairman	0.0									
(2) David M McIntosh Director/Vice Chairman	1 0	х		х				0	0	0
(3) Gary Lawson	1 0	,,		\ ,					0	0
Director/Secretary	0 0	Х		Х				0	0	0
(4) Brent O Hatch	1 0	,		<u>.</u> ا						
Director/Treasurer	0 0	X		×				0	0	0
(5) Eugene B Meyer	40 0	,		<u> </u>				504.400		47.454
Director/President	0 0	Х		X				694,490	0	47,451
(6) Leonard A Leo	40 0	,		\				425.000		47 722
Director/Exec Vice President	0 0	Х		Х				435,000	0	47,723
(7) Lee Liberman Otis	40 0	,		<u>.</u> ا				225.000		10.200
Director/Senior Vice President	0 0	Х		×				335,000	0	18,200
(8) T Kenneth Cribb Jr	2 0	.,						50.000		
Director	0 0	Х						60,000	0	0
(9) C Boyden Gray	1 0	.,								
Director	0 0	Х						0	0	0
(10) Edwin Meese III	1 0								_	_
Director	0 0	X						0	0	0
(11) Michael B Mukasey	1 0							_	_	_
Director	0 0	X						0	0	0
(12) Nicholas Quinn Rosenkranz	1 0									_
Director	0 0	X						1,000	0	0
(13) Dean A Reuter	40 0					,,		350.000		47.025
Director of Practice Groups	0 0					X		250,000	0	47,025
(14) Douglas C Ubben	40 0							100.000		41.000
Director of Finance	0 0					X		190,000	0	41,906
										Form 990 (2014)

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 pers	than on is	one bot	not bo: h ar	checl c, unle n office rustee	ss er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(15) Peter K Redpath Director of Student Division	40 0					х		171,000	0	22,969
(16) Paul Zımmerman Deputy Director of Intl Affair	40 0 0 0					х		166,284	0	11,640
(17) Jonathan R Bunch State Courts, VP/Director	40 0					х		148,000	0	38,968

1b	Sub-Total	-			
c	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	•	2,450,774	0	275,882

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►10

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

Section B. Independent Contractors

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

(A)	(B)	(C)			
Name and business address	Description of services	Compensation			
CREATIVE RESPONSE CONCEPTS, 2760 EISENHOWER AVENUE 4TH FLOOR ALEXANDRIA, VA 22314	MEDIA TRAINING	1,329,457			
DC Strategies, 566 Shenandoah Valley Drive FRONT ROYAL, VA 22630	MEDIA CONSULTING	180,000			
JAMES P KELLY III PC, 6220 BANNERHORN RUN ALPHARETTA, GA 30005	INTL EFFORTS CONSULT	180,000			
MARGARET A LITTLE, 2149 ELM STREET STRATFORD, CT 06615	PRO BONO LEGAL	102,833			
WEBER SHANDWICK, 2 WATERHOUSE SQUARE 140 HOLBORN LONDON, 0 EC1N 2AE UK	PR CONSULTING	100,279			
2 Total number of independent contractors (including but not limited to those listed above) who received more than					

~ <u>~</u>	1a
rant oun	b
s, Gi Ami	С
Giftk ilar	d
ns, Sim	е
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f g
ıtrib I Otl	g
	h
enne	2a
Rew	Ь
МСе	c
Ser	d e
Program Serwce Revenue	f
<u>~</u>	2a b c d e f g 3 4 5
	4
	5
	6a
	Ь
	С
	d
	7a
	b
	c
	d
e	8a
venu	
her Re	
)th	Ь
•	9a
	b
	10a
	b c
	11a h
	C
	d
	е
	12

VIII	Statement of Check if Schedi	of Revenue ule O contains a respo	nse or note to any lu	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns 1a					
ь	Membership du	es 1b					
c	Fundraising eve	ents 1 0					
d	Related organiz	zations 1d					
e	Government grant						
f	_	ons, gifts, grants, and 1f					
'	similar amounts no						
g	Noncash contributi 1a-1f \$	ons included in lines	121,914				
h	Total. Add lines	s 1 a - 1 f		17,224,591			
			Business Code				
2a	REGISTRATION FE	ES	900099	643,659	643,659		
ь	MEMBERSHIP DUE	S	900099	224,622	224,622		
С							
d							
е							
f	All other progra	am service revenue					
g	Total. Add lines	s 2a – 2f		868,281			
3		ome (including dividen ar amounts)		31,418			31,418
4		stment of tax-exempt bond	ŀ	0			
5	Royalties		🕨	0			
		(ı) Real	(II) Personal				
6a	Gross rents Less rental						
"	expenses	0					
C	Rental income or (loss)						
d	Net rental inco	me or (loss)		0			
7a	Gross amount	(ı) Securities	(II) Other				
	from sales of assets other	737,171					
Ь	than inventory Less cost or						
	other basıs and sales expenses	664,819					
С	Gain or (loss)	72,352					
d		ss)		72,352			72,352
8a	events (not inc	rom fundraising luding					
	of contributions See Part IV, lir	reported on line 1c)					
	occ rare iv, m	a					
ь	Less direct ex	penses b					
С		(loss) from fundraising	events 🛌	0			
9a		rom gaming activities ne 19					
b	Less direct ex	penses b					
c	Net income or	(loss) from gamıng actı	vities	0			
10a	Gross sales of returns and allo	* *					
	recuins and all	a a	2,910				
Ь	Less cost of g	oods sold b	3,677				
С		(loss) from sales of inv		-767			-767
11~	Miscellaneous		Business Code 900099	2,023			2,023
11a b	MISCELLANEC	705	300099	2,023			2,023
C							
d	All other reven	ue					
e	Total. Add lines			2,023			
12	Total revenue.	See Instructions .	🕨				
1			·	18,197,898	868,281		105,026

Form 990 (2014) Part IX Statement of Functional Expenses

		andional Ex				
Section 50	1(c)(3) and 501(c)(4) organızatıons r	nust complete all columns	All other organizations mu	ust complete column (A)	
	Chack if Schadula) contains a room	ance or note to any line in t	his Dart IV		

7b, 8b, 9 1 G de 2 G in 3 G g a 4 B 5 C keep	include amounts reported on lines 6b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Genefits paid to or for members Compensation of current officers, directors, trustees, and they employees Compensation not included above, to disqualified persons as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	(A) Total expenses 15,000 319,388 0 1,678,446	(B) Program service expenses 15,000 319,388	Management and general expenses	(D) Fundraising expenses
2 G in 3 G g a a 4 B 5 C k k	Frants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	319,388	319,388		
3 G g al al 4 B 5 C kk	Grants and other assistance to foreign organizations, foreign povernments, and foreign individuals. See Part IV, lines 15 and 16	0			
9 a l 4 B 5 C	povernments, and foreign individuals See Part IV, lines 15 and 16	0	1,126,359		
4 B 5 C	Benefits paid to or for members	0	1,126,359		
5 C	Compensation of current officers, directors, trustees, and sey employees	1,678,446	1,126,359		
	Compensation not included above, to disqualified persons as defined under section 4958(f)(1)) and persons			133,737	418,350
(a		0			
7 0	Other salaries and wages	2,593,675	2,096,799	254,859	242,017
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	137,200	108,519	16,897	11,784
9 0	Other employee benefits	377,910	304,740	52,456	20,714
10 P	Payroll taxes	220,357	173,905	18,773	27,679
11 F	ees for services (non-employees)				
a M	Nanagement	0			
b Le	egal	11,127	1,000	10,127	
c A	Accounting	26,595		26,595	
d L	obbying	0			
e P	rofessional fundraising services See Part IV, line 17	0			
f Ir	nvestment management fees	0			
	Other (If line 11g amount exceeds 10% of line 25, column (A) imount, list line 11g expenses on Schedule O)	2,104,076	2,098,321	5,755	
12 A	Advertising and promotion	392,722	389,222		3,500
13 0	Office expenses	271,523	180,792	60,898	29,833
14 Ir	nformation technology	39,414	34,183		5,231
15 R	Royalties	0			
16 0	Occupancy	709,385	549,689	75,128	84,568
17 T	ravel	1,380,533	1,287,863	26,136	66,534
	Payments of travel or entertainment expenses for any federal, state, or local public officials	399,065	399,065		
19 C	Conferences, conventions, and meetings	2,750,380	2,729,968	8,192	12,220
20 In	nterest	0			
21 P	Payments to affiliates	0			
22 D	Depreciation, depletion, and amortization	68,984	53,808	6,898	8,278
	nsurance	23,695		23,695	
m	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)				
	HONORARIA	1,077,174	1,077,174		
b P	RINTING & REPRODUCTION	195,249	159,555	1,048	34,646
c J(OURNAL	128,120	128,120		
d R	RECORDING	91,140	88,263	2,877	
e A	All other expenses	66,532	33,642	30,351	2,539
25 T	otal functional expenses. Add lines 1 through 24e	15,077,690	13,355,375	754,422	967,893
re e	loint costs. Complete this line only if the organization eported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► □ if following SOP 98-2 (ASC 958-720)				rm 990 (2014)

Form 990 (2014) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X ⅳ (A) (B) Beginning of year End of year Cash-non-interest-bearing 135,438 1 1 6.969.566 2 9.998.440 2 2,585,570 2.973,860 3 3 4 0 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets 0 6 0 0 7 0 28.050 25.847 8 8 9 122,792 243,189 10a Land, buildings, and equipment cost or other basis Complete 627.897 10a Part VI of Schedule D 323,043 b Less accumulated depreciation 10b 97,795 10c 304,854 1,512,075 11 1,199,240 11 12 1,195,214 12 1,192,868 Investments—other securities See Part IV, line 11 ol 13 13 0 Investments—program-related See Part IV, line 11 ol 0 14 14 14,429 269,102 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 12,660,929 16 16,217,366 **17** 490,410 17 645,558 Accounts payable and accrued expenses 18 18 0 19 226,050 19 211,983 ol 0 20 20 0 21 0 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 0 0 23 0 23 Secured mortgages and notes payable to unrelated third parties . . . 0 O 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 31,980 25 445,065 26 748,440 26 1,302,606 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete **Fund Balances** lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 8,577,407 27 10,765,995 3,325,082 28 28 4, 138, 765 10.000 29 10,000 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ŏ 30 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances

š

33

14,914,760

16,217,366

11,912,489

12.660.929

33

Pai	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		18,:	197,898
2	Total expenses (must equal Part IX, column (A), line 25)	2			77,690
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			120,208
5	Net unrealized gains (losses) on investments	4		11,9	912,489
•		5		-:	17,937
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		14.9	914,760
Par	rt XIII Financial Statements and Reporting			, .	,
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
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 review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	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 oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of tl	he 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ie	3a		No
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		"		

Additional Data

Software ID:

Software Version:

EIN: 36-3235550

Name: THE FEDERALIST SOCIETY FOR LAW AND

PUBLIC POLICY STUDIES

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code EXTERNAL AFFAIRS) (Expenses \$	1,738,329	including grants of \$) (Revenue \$	1,285)
(Code GENERAL PROGRAM) (Expenses \$	1,613,135	including grants of \$) (Revenue \$	37,122)

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	1,692,976	including grants of \$) (Revenue \$	357,691)
AWYERS ACTIVITIES	5				
(Code) (Expenses \$	1,243,114	including grants of \$	45,937) (Revenue \$	286,136)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493103004146

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2011

Open to Public Inspection

THE FEDERALIST SOCIETY FOR LAW AND PUBLIC POLICY STUDIES						36-3235550		
Par	τI	Reason for Publi	c Charity S	tatus (All organiza	tions must co	mplete this p		ons.
		zation is not a private fo					•	_
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(b)(1)(A)(i).	
2	Γ	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)			
3	Γ	A hospital or a cooper	atıve hospıtal	service organization o	described in sec	tion 170(b)(1)	(A)(iii).	
4	Γ	A medical research or	ganızatıon ope	erated in conjunction v	vith a hospital d	lescribed in sec	tion 170(b)(1)(A)(iii). Enter the
	•	hospital's name, city,	and state					<u> </u>
5	Γ	An organization opera	ted for the ben	iefit of a college or uni	versity owned o	or operated by a	a governmental unit d	escribed in
		section 170(b)(1)(A)(iv). (Complete	e Part II)				
6	Γ	A federal, state, or loc	al government	t or governmental unit	described in se	ection 170(b)(1	.)(A)(v).	
7	~	An organization that n	•	· · · · · · · · · · · · · · · · · · ·		om a governme	ntal unit or from the g	jeneral public
8	_	described in section 1				+ TT \		
9	<u>'</u>	A community trust des An organization that n					outions membershin	fees and aross
9	'	receipts from activitie						
		its support from gross						
		acquired by the organi					·	i businesses
10	г	An organization organi						
11	<u>'</u>	An organization organi	•	•	•	•	` ` ` `	uit the nurnoses of
	'	one or more publicly s	•	•			•	• •
	_	the box in lines 11a th						
а	ı	Type I. A supporting o	-		•			
		supported organization organization			-	ty of the directo	ors or trustees of the	supporting
b	\sqcap	Type II. A supporting				with its suppor	rted organization(s), l	by having control or
		management of the su	pporting organ	nization vested in the s				
_	_	must complete Part I\	•				d & k 11 k	
C	ı	Type III functionally i supported organization						grated with, its
d	\sqcap	Type III non-function						janization(s) that is
		not functionally integra	ated The orga	inization generally mu	st satisfy a dist	rıbutıon require		
_	_	(see instructions) You					T I T II T	
е	,	Check this box if the or integrated, or Type III					s a Type I, Type II, T	ype III functionally
f		Enter the number of su						
g		Provide the following in	nformation abo	out the supported orga	ınızatıon(s)			
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of
		organization		organization	listed in your		monetary support	other support (see
				(described on lines 1-9 above or IRC	docume	1111	(see instructions)	instructions)
				section (see				
				instructions))				
					Yes	No		
Total								

Schedule A (Form 990 or 990-EZ) 2014 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (d) 2013 (c) 2012 (e) 2014 (f) Total in) 🕨 1 Gifts, grants, contributions, and membership fees received (Do 8,849,120 12,954,105 12,758,642 16,642,346 17,224,591 68,428,804 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either n paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit 0 to the organization without charge 8,849,120 12,954,105 12,758,642 16,642,346 17,224,591 68,428,804 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 21,877,873 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 46,550,931 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total beginning in) 🟲 8,849,120 12,954,105 12,758,642 16,642,346 17,224,591 68,428,804 Amounts from line 4 Gross income from interest, dividends, payments received on 90,651 70,901 71,400 52,997 31,419 317,368 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or 0 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 1.646 1,863 23,785 4,699 2,023 34,016 capital assets (Explain in Part VI) 11 Total support Add lines 7 68,780,188 through 10 Gross receipts from related activities, etc (see instructions) 12 12 3,579,757 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 14 67 681 % Public support percentage for 2013 Schedule A, Part II, line 14 15 15 68 369 % 16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 **(e)** 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 10a 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 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2013 Schedule A, Part III, line 15 16

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

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

33 1/3% support tests—2013. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Section D. Computation of Investment Income Percentage

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

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

17

18

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

17

18

Part IV Supporting Organizations

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

Se	ection A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)^2$ If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section $501(c)(4)$, (5) , or (6) ? If "Yes," answer (b) and (c) below.	За		
t	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	: Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4 c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
Ŀ	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
t	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
Ŀ	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
L1	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	112		
ŀ	• A family member of a person described in (a) above?	11a 11b		
	A 135% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		

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

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

3b

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

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

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom			
2 A mounts paid to perform activity that directly furthe excess of income from activity			
3 Administrative expenses paid to accomplish exemp	anızatıons		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	ICTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is re	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdist ribut ions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
 h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) 			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			1
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 31 and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

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

Facts And Circumstances Test

Return Reference Explanation

Schedule A (Form 990 or 990-EZ) 2014

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

DLN: 93493103004146

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► 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.

Supplemental Financial Statements

► Attach to Form 990.

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

Open to Public Inspection

	ne of the organization FEDERALIST SOCIETY FOR LAW AND		Employer identification number
	LIC POLICY STUDIES		36-3235550
aı	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.	
	Tabal number at and afterna	(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the organization or the organization of	ganization's exclusive legal control?	☐ Yes ☐ No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?		
į	t II Conservation Easements. Complete if	the organization answered "Yes"	to Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the orga Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education) Preservation of	an historically important land area a certified historic structure
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution i	n the form of a conservation
	,,		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 histo	rıc structure ıncluded ın (a)	2c
	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d
	Number of conservation easements modified, transferr	ed, released, extinguished, or termina	ated by the organization during
	the tax year 🛌		
	Number of states where property subject to conservati	on easement is located be	
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?		
	Staff and volunteer hours devoted to monitoring, inspect	cting, and enforcing conservation eas	ements during the year
	A mount of expenses incurred in monitoring, inspecting • \$, and enforcing conservation easeme	nts during the year
	Does each conservation easement reported on line 2 (c) and section $170(h)(4)(B)(II)$?	I) above satisfy the requirements of s	ection 170(h)(4)(B)(i)
	In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financ	
1	Complete if the organization answered "Yes		s, or Other Similar Assets.
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education	n, or research in furtherance of public
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to these	ts held for public exhibition, education	
	(i) Revenue included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$
	If the organization received or held works of art, historic following amounts required to be reported under SFAS		for financial gain, provide the
	Revenue included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		. · · · ·
	maacca meruucu mii oiiii aav, rait A		F P

	Organizations Maintaining Co	ilections of Alt,	IIISU	OFIC	ai ii	easui	res, or c	une	r Siiiiiiar	ASSET	S (co.	ntinuea)
	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ls, che	ck a	ny of th	ne follo	wing that	are a	sıgnıfıcant	use of i	ts	
а	Public exhibition		d	Γ	Loan	rexch	ange prog	rams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
	Provide a description of the organization's co Part XIII	llections and explai	n how	they	furthe	r the o	rganızatıoı	ı's ex	empt purpo	se in		
	During the year, did the organization solicit o		,						ıılar	_		_
	assets to be sold to raise funds rather than t	-							aall ta Farr	<u> </u>		No
Part	Part IV, line 9, or reported an an	•			_		answere	u r	es to ron	11 990,		
	Is the organization an agent, trustee, custod included on Form 990, Part X?						r other as:	setsı	not	ΓY	es	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the f	followi	ng ta	able							
							[Amour	it	
c	Beginning balance							1 c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1 f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21, fo	res	crow or	custo	dıal accou	ınt lıa	ıbılıty?	ΓY	es	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	explar	natio	n has b	een pi	rovided in	Part :	XIII			Γ
Par		f the organization	answ	vere	d "Yes	" to F	orm 990	, Par	t IV, line 1			
		(a)Current year 10,000	(b) P	rior y	ear 10,000	b (c) Tw	o years bac 10,00	+	Three years ba	_	our ye	ars back
1a	Beginning of year balance	10,000			10,000		10,00	'	10,0	00		10,000
	Contributions							+				
С	Net investment earnings, gains, and losses											
d	Grants or scholarships							_				
	Other expenditures for facilities and programs											
	Administrative expenses							+				
	End of year balance	10,000			10,000		10,00	0	10,0	00		10,000
_	Provide the estimated percentage of the curr	ent vear end balanc	e (line	1 a .	columr	n (a)) h	eld as					
	Board designated or quasi-endowment F	,	- (- 51		. (=//						
	Permanent endowment ► 100 000 %											
	Temporarily restricted endowment ►											
	The percentages in lines 2a, 2b, and 2c shot	ıld equal 100%										
За	Are there endowment funds not in the posses	ssion of the organiza	tion th	nat a	re held	and a	dmınıstere	d for	the			
	organization by								_		Yes	No
	(i) unrelated organizations			•				•	<u> </u>	3a(i)		No No
	(ii) related organizations							•		Ba(ii)		N o
	(ii) related organizations									7h	1	
b	If "Yes" to 3a(II), are the related organization	ns listed as required	on Sc	hed	ule R?			•	[3b		
b	If "Yes" to 3a(11), are the related organization Describe in Part XIII the intended uses of th	ns listed as required e organization's end	on Sc Iowme	hedi nt fu	ule R? nds			· s' to	· · · <u>L</u>		 V, lır	ie
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1	ns listed as required e organization's end nt. Complete if tl	on Sc Iowme	hedi nt fu gani	ule R? nds ization	answ	ered 'Ye:			Part I		
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the compact of the compact is the compact of the	ns listed as required e organization's end nt. Complete if tl	on Sc Iowme	hedi nt fu gani	ule R? nds	answ other		other	Form 990, (c) Accumu depreciati	Part I		ok value
b 4 Part	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1	ns listed as required e organization's end nt. Complete if tl	on Sc Iowme	hedi nt fu gani	ule R? nds ization) Cost or	answ other	ered 'Ye	other	(c) Accumu	Part I		
b 4 Part	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1 Description of property	ns listed as required e organization's end nt. Complete if tl	on Sc Iowme	hedi nt fu gani	ule R? nds ization) Cost or	answ other	ered 'Ye	other	(c) Accumu	Part I		
b 4 Part	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of th VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1 Description of property and	ns listed as required e organization's end nt. Complete if tl	on Sc Iowme	hedi nt fu gani	ule R? nds ization) Cost or	answ other	(b)Cost or basis (oth	other	(c) Accumu depreciati	Part I		
part la L b B c L	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1 Description of property and	ns listed as required e organization's end nt. Complete if tl	on Sc Iowme	hedi nt fu gani	ule R? nds ization) Cost or	answ other	(b)Cost or basis (oth	other ner)	(c) Accumu depreciati	Part I		ok value
1a L b B c L d E e O	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the state of the	ns listed as required e organization's end int. Complete if the .0.	on Sc lowme he org	thedint funt fundament fun	ule R? nds Zation Cost or s (Invest	answ other tment)	(b)Cost or basis (oth	other ner) 8,677	(c) Accumu depreciati	Part I ated on		ok value

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other (A) WHITEBOX MULTI-STRATEGY FD LTD	1,192,868	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	1,192,868	
Part VIII Investments—Program Related. Co See Form 990, Part X, line 13.	omplete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
(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)	P .	
Part IX Other Assets. Complete if the organization (a) Description		, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization Form 990, Part X, line 25.	anization answered 'Yes' to	Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Pederal income taxes DEFERRED LEASE OBLIGATION	445,065	
DEFENCED LEASE OBLIGATION	443,003	
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	445.005	
	445,065 le the text of the footnote to the	

1	Total revenue, gains, and othe	r support per audited financial statements	1	18,083,638		
2	Amounts included on line 1 bu	t not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	on investments 2a -117,937				
b	Donated services and use of fa	acilities				
c	Recoveries of prior year grants	5				
d	Other (Describe in Part XIII)	2d				
e	Add lines 2a through 2d .		2e	-117,937		
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	18,201,575		
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b . 4a				
b	Other (Describe in Part XIII)	4b -3,677				
c	Add lines 4a and 4b		4c	-3,677		
5	Total revenue Add lines 3 and	l 4c. (This must equal Form 990, Part I, line 12)	5	18,197,898		
Part		xpenses per Audited Financial Statements With Expenses	per	Return. Complete		
		swered 'Yes' to Form 990, Part IV, line 12a.				
1	Total expenses and losses pe	audited financial statements	1	15,081,367		
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25				
а	Donated services and use of fa	acılıtıes				
b	Prior year adjustments	2b				
c	Other losses	2c				
d	Other (Describe in Part XIII)					
e	Add lines 2a through 2d		2e	3,677		
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	15,077,690		
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b 4a				
b	Other (Describe in Part XIII)	4b				
c	Add lines 4a and 4b		4 c			
5	Total expenses Add lines 3 ai	nd 4c. (This must equal Form 990, Part I, line 18)	5	15,077,690		
Part	XIII Supplemental Inf	ormation				
Part	V, line 4, Part X, line 2, Part XI mation	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional		
	Return Reference	Explanation				
PART X, LINE 2 - FIN 48 FOOTNOTE		Accounting principles generally accepted in the United States of America require that management of an organization evaluate tax positions taken by the organization and recognize a tax liability if it is more likely than not that the position will not be sustained upon examination by the Internal Revenue Service Management has analyzed the Society's tax positions and has concluded that as of September 30, 2015, there are no uncertain positions taken or expected to be taken that would require disclosure in the financial statements. The Society is subject to routine audits by taxing jurisdictions, however, there are currently no audits in progress for any tax periods.				
REVE	XI, LINE 4B-OTHER NUES INCLUDED ON FORM BUT NOT FINANCIALS	COST OF SALES \$(3,677)				
EXPE	XII, LINE 2D-OTHER NSES INCLUDED ON NCIALS, BUT NOT FORM 990	COST OF SALES \$3,677				

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if

the organization answered 'Yes' to Form 990, Part IV, line 12a.

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

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

THE FEDERALIST SOCIETY FOR LAW AND

As Filed Data -

DLN: 93493103004146

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public **Inspection**

Employer identification number

POR	IC POLICY STUDIES				36-3235550	
Pa	General Information "Yes" to Form 990, Pa			he United States. C	omplete if the organiza	ation answered
1	For grantmakers. Does the of and other assistance, the grants or a used to award the grants or a	the selection criteria	┌ Yes ┌ No			
2	For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitori	ng the use of its grant	s and other
3	Activites per Region (The follow	ung Part I, line 3	3 table can be d	uplicated if additional spa	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	Europe (Including Iceland and Greenland)		1	Program Services	conference & seminars	871,030
(2)	South Asia			Program Services	conference	40,378
(3)	Central America and the Caribbean			Investments		1,192,868
(4)						
(5)						
	Sub-total Total from continuation sheets to Part I		1			2,104,276
	Totals (add lines 3a and 3b)		1			2,104,276
For Pa	aperwork Reduction Act Notice, see	the Instructions	for Form 990.	Cat	No 50082W Schedu	le F (Form 990) 2014

Pā						ited States. Comp duplicated if additioi			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2						les by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganızatıons or ent	ities					

Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Facility Facility	Part III can be duplicated if additional space is needed.										
Care		(b) Region		(d) A mount of cash grant	(e) Manner of cash disbursement	non-cash	of non-cash	valuation (book, FMV,			
(3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (15) (16) (17) (17) (18) (18) (19) (19) (10) (11) (11) (12) (13) (14) (15) (15) (17)	(1) Olin/Searle fellowship foreign recipients										
(4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17)	(2)										
(5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17)	(3)										
(6) (7) (8) (8) (10) (11) (12) (13) (14) (15) (16) (17) (17)	(4)										
(7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17)	(5)										
(8) (9) (10) (11) (12) (13) (14) (15) (16) (17)	(6)										
(9) (10) (11) (12) (13) (14) (15) (16) (17)	(7)										
(10) (11) (12) (13) (14) (15) (16) (17)	(8)										
(11) (12) (13) (14) (15) (16) (17)	(9)										
(12) (13) (14) (15) (16) (17)	(10)										
(13) (14) (15) (16) (17)	(11)										
(14) (15) (16) (17)	(12)										
(15) (16) (17)	(13)										
(16)	(14)										
(17)	(15)										
	(16)										
(18)	(17)										
	(18)										

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	্	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>\</u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	ি	Yes	Г	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	▽	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	모	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Γ	Yes	~	Νo

Schedule F (Form 990) 2014

Additional Data

Software ID:

Software Version:

EIN: 36-3235550

Name: THE FEDERALIST SOCIETY FOR LAW AND

PUBLIC POLICY STUDIES

Schedule F (Form 990) 2014

Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493103004146 Schedule I OMB No 1545-0047 Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization THE FEDERALIST SOCIETY FOR LAW AND 36-3235550 PUBLIC POLICY STUDIES Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable cash valuation non-cash assistance grant orassistance or government assistance (book, FMV, appraisal, other)

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) MISCELLANEOUS TRAVEL	400	149,592			
(2) OLIN/SEARLE FELLOWSHIPS	7	169,796			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							
Return Reference	Explanation						
procedures for monitoring use of grant	Olin/Searle Fellows are subject to a process of constructive monitoring which begins at the start of their fellowship and continues after, as they embark upon the academic job market. We enlist faculty at their host law schools (members of the fellowship selection committee where possible) to keep track of their scholarly projects as they progress, offering helpful feedback and giving us their views of the progress made. We also touch base with them periodically ourselves to discuss their topics and progress. We also, where possible, ask our Fellows to attend a workshop toward the beginning and toward the end of their tenure, at which they discuss potential article topics and rehearse the job talks they plan to give on the basis of their fellowship projects before a number of professors and members of our staff. After the fellowship is over we keep track of all of our former fellows, providing assistance and encouragement on the academic job market. We prepare an annual report on their status. Each Searle Young Legal Scholar Fellows is assigned a mentor from among the senior professors who comprise the Searle selection committee, who review drafts of the papers they are working on and provide feedback.						

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

DLN: 93493103004146

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number

	me of the organization	Employer identificati	on nur	nber	
	FEDERALIST SOCIETY FOR LAW AND BLIC POLICY STUDIES	36-3235550			
Pa	rt I Questions Regarding Compensation	, , , , , , , , , , , , , , , , , , , ,			
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regards				
	First-class or charter travel Housing allowance or residence for	r personal use			
		onal residence			
	Tax idemnification and gross-up payments Health or social club dues or initia	tion fees			
	Discretionary spending account Personal services (e.g., maid, chair	uffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding reimbursement or provision of all of the expenses described above? If "No," complete Part III to		1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred b directors, trustees, officers, including the CEO/Executive Director, regarding the items checke		2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation organization's CEO/Executive Director Check all that apply Do not check any boxes for methoused by a related organization to establish compensation of the CEO/Executive Director, but es	ods			
	▼ Compensation committee ▼ Written employment contract				
	Form 990 of other organizations Approval by the board or compens	ation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to or a related organization	the filing organization			
а	Receive a severance payment or change-of-control payment?		4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item	ın Part III			
5	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue compensation contingent on the revenues of	any			
а	The organization?		5a		No
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue compensation contingent on the net earnings of	any			
а	The organization?		6a		No
b	Any related organization?		6b		No
	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 no payments not described in lines 5 and 6? If "Yes," describe in Part III	on-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If in Part III		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure describ section 53 4958-6(c)?	ed in Regulations	9		14.0

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	FW-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 Eugene B Meyer, Director/President				144,490	18,200 0	29,821 0	742,511 0	0
2 Leonard A Leo, Director/Exec Vice President	(i) (ii)	435,000 0			18,200	30,093 	483,293 0	0
3 Lee Liberman Otis, Director/Senior Vice President	(i) (ii)	335,000 0			18,200 0	570 0	353,770 0	0
4 Dean A Reuter, Director of Practice Groups	(i) (ii)	250,000 0			17,500 0	30,095 0	297,595 0	0
5 Douglas C Ubben, Director of Finance	(i) (ii)	190,000 0			13,300			0
6 Peter K Redpath, Director of Student Division	(i) (ii)	171,000 0			11,970 0	11,569 	194,539	0
7 Paul Zimmerman, Deputy Director of Intl Affair	(i) (ii)	166,284 0			11,640 0	570 0	178,494 0	0
8 Jonathan R Bunch, State Courts, VP/Director	(i) (ii)	148,000			10,360 0	29,172 0	187,532	0

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2014

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

DLN: 93493103004146

OMB No 1545-0047

Open to Public

SCHEDULE M (Form 990)

Department of the Treasury

Noncash Contributions

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

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

Internal Revenue Service	Inspection
Name of the organization	Employer identification number
THE FEDERALIST SOCIETY FOR LAW AND	
PUBLIC POLICY STUDIES	36-3235550
Dowl T. Tunner of Dunmouter	

Pa	rt I Types of Property	_						
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermır	_	Is
1	Art—Works of art			- 9				
	Art—Historical treasures .							
	Art—Fractional Interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	6	121,914	FMV			
	Securities—Closely held stock	•						
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
17	contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxıdermy							
22	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	O ther ▶ ()							
	O ther ▶()							
	O ther ▶()							
	Other ▶ ()							
29	Number of Forms 8283 received for which the organization compl				29		v I	N-
302	During the year, did the organiz	ation receiv	e by contribution any prope	rty reported in Part I lines	1 through 28 that	\longrightarrow	Yes	No
Ju	it must hold for at least three ye							
	for exempt purposes for the ent			cion, and winem is not requi	ed to be used	202		NIo
.	If "Yes," describe the arrangem					30a		No
31	Does the organization have a gi			eview of any non-standard	contributions?	31		No
	Does the organization hire or us						j	
J∠đ	contributions?	e umu part	es of related organizations	· · · · · · · · · · ·		32a		No
b	If "Yes," describe in Part II						Ţ	
33	If the organization did not repor describe in Part II	t an amount	in column (c) for a type of	property for which column (a) is checked,			

Page 2

Schedule M (Form 990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b,

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

Return Reference Explanation

Schedule M (Form 990) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493103004146

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization
THE FEDERALIST SOCIETY FOR LAW AND
PUBLIC POLICY STUDIES

Employer identification number
36-3235550

Return Reference	Explanation
PART III, LINE 4D - OTHER PROGRAM SERVICE ACTIVITIES	EXTERNAL AFFAIRS =========== In the fall of 2006, The Federalist Society launched the State Courts Project, now known as External Affairs. This initiative is designed to spark robust public debate about the role of the state supreme courts as well as to motivate opinion leaders, the press, and the general public to be more informed about and interested in issues of judicial selection. The State Courts Project has expanded substantially since its launch, and The Federalist Society is now creating unprecedented levels of thoughtful public debate about the role of the state supreme courts and state attorneys general. GENERAL PROGRAM ====================================

Return Reference	Explanation
PART VI, SECTION A, LINE 1 - EXECUTIVE COMMITTEE	THE EXECUTIVE COMMITTEE OF THE SOCIETY CONSIST OF TWO MEMBERS FROM THE BOARD OF DIRECTORS THE EXECUTIVE COMMITTEE SHALL MANAGE THE AFFAIRS OF THE CORPORATION AT THE DIRECTION OF THE BOARD OF DIRECTORS

Return Reference	Explanation
PART VI, SECTION B, LINE 11B - REVIEW PROCESS FOR FORM 990	THE FORM 990 IS REVIEWED BY THE ORGANIZATION'S DIRECTOR OF FINANCE, PRESIDENT AND AUDIT COMMITTEE PRIOR TO ITS FILING

Return Reference	Explanation
PART VI, SECTION B, LINE 12C - CONFLICT OF INTEREST POLICY COMPLIANCE	THE ORGANIZATIONS CONFLICT OF INTEREST POLICY APPLIES TO ALL DIRECTORS, OFFICERS AND EMPLOYEES OF THE SOCIETY, INCLUDING SUCH INDIVIDUALS THAT SERVE ON BOARD COMMITTES WHO ARE NOT MEMBERS OF THE BOARD If such individuals become aware of an actual or potential conflict of interest, they must disclose it promptly by following the procedures below Employees ========= Employees should report any actual or potential conflicts to their supervisor, or to the President or the Vice President and Director of Finance. The President, or his designee, will review the situation and decide what, if any, actions should be taken in response. Directors, Officers and Key Employees (as defined in 990 instructions) ====================================

Return Reference	Explanation
PART VI, SECTION B, LINES 15A/15B- REVIEW PROCESS OF OFFICER COMPENSATION	THE BOARD OF DIRECTORS SHALL AUTHORIZE A REVIEW (LAST CONDUCTED IN 2014) BY THE COMPENSATION COMMITTEE OF THE PRESIDENT'S COMPENSATION ARRANGEMENT TO BE COMPLETED IN TIME FOR THE FULL BOARD TO REVIEW DURING ITS ANNUAL MEETING AT WHICH THE BUDGET FOR THE ORGANIZATION IS APPROVED THE ANNUAL REVIEW SHOULD CONSIDER THE INTELLECTUAL RIGOR OF THE FEDERALIST SOCIETY'S PROGRAMS AND THEIR INFLUENCE IN LEGAL ACADEMIA AND PUBLIC POLICY DEBATES, THE FUNDRAISING SUCCESS OF THE CURRENT FISCAL YEAR AND THE PROJECTED REVENUE FOR THE NEXT FISCAL YEAR, AND THE OVERALL MANAGEMENT OF THE FEDERALIST SOCIETY STAFF AND IMPLEMENTATION OF ITS PROGRAMMING THE REVIEW SHALL ALSO CONSIDER THE EXECUTIVE COMPENSATION FOR SIMILAR, APPROPRIATE NATIONAL TAX-EXEMPT ORGANIZATIONS AND SEEK TO MAINTAIN EXECUTIVE COMPENSATION THAT IS COMPARABLE TAKING INTO ACCOUNT THEIR AVERAGE LEVELS OF COMPENSATION, REVENUE AND ASSETS THE Compensation Committee also review S the compensation levels set by the President for the Federalist Society staff the Board of Directors PROVIDES AUTHORITY TO the President to set salary for all other staff of the Federalist Society. The President shall send a review to the Board of Directors his plans to adjust compensation for the Executive Vice President and other senior staff based on the excellent performance of the organization, taking into account compensation comparable to similar national tax-exempt organizations considering their average levels of compensation, revenue and assets in addition, the board authorizes the president to pay any discretionary year-end bonuses to senior staff to reward strong performance, when appropriate

Return Reference	Explanation
PART VI, SECTION C, LINE 19 - GOVERNING DOCUMENTS, POLICIES & FINANCIALS	ORGANIZATIONAL DOCUMENTS ARE AVAILABLE TO ANY ONE WHO REQUESTS THEM

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION MEDIA TRAINING & CONSULTING TOTAL FEES 1537558

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION OTHER CONSULTING/PROF SERVICES TOTAL FEES 424901

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION POLLING TOTAL FEES 79650

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION VIDEO PRODUCTION TOTAL FEES 40436

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION TEMPORARY STAFFING TOTAL FEES 15776

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION PAYROLL PROCESSING TOTAL FEES 5755