** Return of Organization Exempt From Income Tax **

A For the 2016 calendar year, or tax year beginning and ending

<table>
<thead>
<tr>
<th>B Name of organization</th>
<th>D Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>NATIONAL COUNCIL OF NONPROFITS</td>
<td>52-1689643</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E Telephone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>(202) 962-0322</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>F Name and address of principal officer: CHARLES T. DELANEY</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAME AS C ABOVE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>G Gross receipts $</th>
</tr>
</thead>
<tbody>
<tr>
<td>755,749.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>H(a) Is this a group return for subordinates?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes X No</td>
</tr>
</tbody>
</table>

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) [ ] (insert no.) 4947(a)(1) or [ ] 527

J Website: [ ] Corporation [ ] Trust [ ] Association [ ] Other [ ]

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other [ ]

L Year of formation: 1990 M State of legal domicile: DC

### Part I Summary

<table>
<thead>
<tr>
<th>1 Briefly describe the organization’s mission or most significant activities: TO ADVANCE THE VITAL ROLE, CAPACITY, AND VOICE OF CHARITABLE NONPROFIT ORGANIZATIONS THROUGH</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.</td>
</tr>
<tr>
<td>3 Number of voting members of the governing body (Part VI, line 1a)</td>
</tr>
<tr>
<td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td>
</tr>
<tr>
<td>5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)</td>
</tr>
<tr>
<td>6 Total number of volunteers (estimate if necessary)</td>
</tr>
<tr>
<td>7a Total unrelated business revenue from Part VIII, column (C), line 12</td>
</tr>
<tr>
<td>7b Net unrelated business taxable income from Form 990-T, line 34</td>
</tr>
</tbody>
</table>

### Revenue

<table>
<thead>
<tr>
<th>8 Contributions and grants (Part VIII, line 1h)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Program service revenue (Part VIII, line 2g)</td>
</tr>
<tr>
<td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td>
</tr>
<tr>
<td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td>
</tr>
<tr>
<td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td>
</tr>
<tr>
<td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td>
</tr>
<tr>
<td>16a Professional fundraising fees (Part IX, column (A), line 11e)</td>
</tr>
<tr>
<td>b Total fundraising expenses (Part IX, column (D), line 25)</td>
</tr>
<tr>
<td>17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)</td>
</tr>
<tr>
<td>18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>19 Revenue less expenses. Subtract line 18 from line 12</td>
</tr>
</tbody>
</table>

### Net Assets or Fund Balances

<table>
<thead>
<tr>
<th>20 Total assets (Part X, line 16)</th>
</tr>
</thead>
<tbody>
<tr>
<td>21 Total liabilities (Part X, line 26)</td>
</tr>
<tr>
<td>22 Net assets or fund balances. Subtract line 21 from line 20</td>
</tr>
</tbody>
</table>

### Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

** Signature of officer **

<table>
<thead>
<tr>
<th>1 Sign Here</th>
<th>2 Type or print name and title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of officer</td>
<td>CHARLES T. DELANEY, PRESIDENT AND CEO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3 Print/Type preparer's name</th>
<th>4 Preparer's signature</th>
<th>5 Date</th>
<th>6 Check 7 self-employed</th>
<th>8 PTIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>R MICHAEL SORRELLS</td>
<td>TATE AND TRYON</td>
<td>(202) 293-2200</td>
<td>P00001737</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9 Firm's name</th>
<th>10 Firm's EIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>TATE AND TRYON</td>
<td>52-1855942</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11 Firm's address</th>
<th>12 Phone number (202) 293-2200</th>
</tr>
</thead>
<tbody>
<tr>
<td>2021 L STREET, NW SUITE 400</td>
<td>WASHINGTON, DC 20036</td>
</tr>
</tbody>
</table>

** Information about Form 990 and its instructions is at www.irs.gov/form990. **
### Part III Statement of Program Service Accomplishments

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

<table>
<thead>
<tr>
<th>Code</th>
<th>Expenses $</th>
<th>Grant $</th>
<th>Revenue $</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a</td>
<td>615,905</td>
<td></td>
<td>76,450</td>
</tr>
<tr>
<td>4b</td>
<td>426,706</td>
<td></td>
<td>289,047</td>
</tr>
<tr>
<td>4c</td>
<td>180,204</td>
<td></td>
<td>14,130</td>
</tr>
</tbody>
</table>

#### 1 Briefly describe the organization's mission:

**TO ADVANCE THE VITAL ROLE, CAPACITY, AND VOICE OF CHARITABLE NONPROFIT ORGANIZATIONS THROUGH OUR STATE AND NATIONAL NETWORKS.**

#### 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? 

Yes [X] No  

If "Yes," describe these new services on Schedule O.

#### 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? 

Yes [X] No  

If "Yes," describe these changes on Schedule O.

#### 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

- **PUBLIC POLICY/ADVOCACY** - The National Council of Nonprofits helps charitable nonprofits advance their missions by building their capacity to engage in everyday advocacy, assisting them in shaping a positive policy environment, and defending against attempts by state and local governments to take resources away from nonprofit missions.

  (CONTINUED ON SCHEDULE O)

- **NETWORK SUPPORT** - The National Council of Nonprofits is a trusted resource and advocate for America's charitable nonprofits. Our mission is to advance the vital role, capacity, and voice of charitable nonprofit organizations. We do so primarily through our network of state associations of nonprofits, their more than 25,000 nonprofit members, and our other members, that together create the nation's largest network of nonprofits. By tracking trends, sharing knowledge, and serving as a central coordinator and mobilizer, we build connections, leverage capacity, and amplify voices to achieve greater collective impact in local communities across the country.

  (CONTINUED ON SCHEDULE O)

- **COMMUNICATIONS** - All of the strategic initiatives of the National Council of Nonprofits strive to increase the public's understanding of nonprofits. We work to raise public awareness about nonprofits and their role: what they are, what they do, and how their actions as problem solvers benefit individuals and communities.

  (CONTINUED ON SCHEDULE O)

#### 4d Other program services (Describe in Schedule O.)

<table>
<thead>
<tr>
<th>Expenses $</th>
<th>Grant $</th>
<th>Revenue $</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,130</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total program service expenses**  

$1,224,945.

SEE SCHEDULE O FOR CONTINUATION(S)
Part IV Checklist of Required Schedules

1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
   If "Yes," complete Schedule A
   X

2. Is the organization required to complete Schedule B, Schedule of Contributors?
   X

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
   X

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
   X

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
   X

6. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
   X

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
   X

8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
   X

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
   X

10. Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V
    X

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
      X

   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
      X

   c. Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
      X

   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
      X

   e. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
      X

   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 XI
      X

12a. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
   X

   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
      X

13. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
   X

14a. Did the organization maintain an office, employees, or agents outside of the United States?
    X

   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
      X

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
    X

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
    X

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
    X

18. Did the organization report more than $15,000 of fundraising event gross income and contributions on Part VIII, line 1c and 8a? If "Yes," complete Schedule G, Part II
    X

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
    X
Part IV Checklist of Required Schedules (continued)

20a Did the organization operate one or more hospital facilities?  If "Yes," complete Schedule H
   b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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

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 II

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization’s current
and former officers, directors, trustees, key employees, and highest compensated employees?  If "Yes," complete
Schedule J

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the
last day of the year, that was issued after December 31, 2002?  If "Yes," answer lines 24b through 24d and complete
Schedule K.  If "No", go to line 25a
   b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
   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?
   d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

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
   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?

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

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

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV
instructions for applicable filing thresholds, conditions, and exceptions):
   a A current or former officer, director, trustee, or key employee?  If "Yes," complete Schedule L, Part IV
   b A family member of a current or former officer, director, trustee, or key employee?  If "Yes," complete Schedule L, Part IV
   c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,
director, trustee, or direct or indirect owner?  If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than $25,000 in non-cash contributions?  If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation
contributions?  If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations?
   a Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete
Schedule N, Part II
   b Did the organization own 100% of an entity disregarded as separate from the organization under Regulations
sections 301.7701-2 and 301.7701-3?  If "Yes," complete Schedule R, Part I
   c 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

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
   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

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

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

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note.  All Form 990 filers are required to complete Schedule O
### 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

<table>
<thead>
<tr>
<th>Line</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 1a Enter the number reported in Box 3 of Form 1096. Enter **-0** if not applicable

#### 1b Enter the number of Forms W-2G included in line 1a. Enter **-0** if not applicable

#### 1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

#### 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return

#### 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?

**Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to **e-file** (see instructions)

#### 3a Did the organization have unrelated business gross income of $1,000 or more during the year?

#### 3b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O

#### 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

#### 4b If "Yes," enter the name of the foreign country:


#### 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

#### 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

#### 5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?

#### 6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?

#### 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

#### 7 Organizations that may receive deductible contributions under section 170(c).

#### 7a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?

#### 7b If "Yes," did the organization notify the donor of the value of the goods or services provided?

#### 7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

#### 7d If "Yes," indicate the number of Forms 8282 filed during the year

#### 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

#### 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

#### 7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?

#### 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?

#### 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?

#### 9 Sponsoring organizations maintaining donor advised funds.

#### 9a Did the sponsoring organization make any taxable distributions under section 4966?

#### 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?

#### 10 Section 501(c)(7) organizations. Enter:

#### 10a Initiation fees and capital contributions included on Part VIII, line 12

#### 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

#### 11 Section 501(c)(12) organizations. Enter:

#### 11a Gross income from members or shareholders

#### 11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)

#### 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

#### 12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

#### 13 Section 501(c)(29) qualified nonprofit health insurance issuers.

#### 13a Is the organization licensed to issue qualified health plans in more than one state?

**Note.** See the instructions for additional information the organization must report on Schedule O.

#### 13b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

#### 13c Enter the amount of reserves on hand

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

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

#### 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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632005 11-11-16

04390906 790809 52-1689643  2016.04020 NATIONAL COUNCIL OF NONPR 52-16891
Part VI Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year 1a

Yes No

11

b Enter the number of voting members included in line 1a, above, who are independent 1b

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

X

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of directors, officers, or trustees, or key employees to a management company or other person? 3

X

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4

X

5 Did the organization become aware during the year of a significant diversion of the organization’s assets? 5

X

6 Did the organization have members or stockholders? 6

X

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a

X

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b

X

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8

a The governing body? 8a

X

b Each committee with authority to act on behalf of the governing body? 8b

X

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address? If "Yes," provide the names and addresses in Schedule O 9

X

Section B. Policies

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

10a Did the organization have local chapters, branches, or affiliates? 10a

X

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

X

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a

X

b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 11b

X

12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a

X

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b

X

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c

X

13 Did the organization have a written whistleblower policy? 13

X

14 Did the organization have a written document retention and destruction policy? 14

X

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15

X

a The organization’s CEO, Executive Director, or top management official 15a

X

b Other officers or key employees of the organization 15b

X

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a

X

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate 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 in which a copy of this Form 990 is required to be filed 17

CA, MI, NY

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X Own website  X Another’s website  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:

CHARLES T. DELANEY – (202) 962-0322

1001 G STREET, NW #700E, WASHINGTON, DC 20001
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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 all of the organization's current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than $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.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) RENNY FAGAN</td>
<td>3.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>BOARD CHAIR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) DONNA MURRAY-BROWN</td>
<td>3.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>BOARD VICE CHAIR</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) ANNE HINDERY</td>
<td>3.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>BOARD TRASURER</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) DOUG SAUER</td>
<td>3.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>BOARD SECRETARY</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) DOUG BAUER</td>
<td>1.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>(6) HENRY BERMAN</td>
<td>1.00</td>
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<td>0.00</td>
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<td>0.00</td>
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<tr>
<td>DIRECTOR</td>
<td></td>
<td>X</td>
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<td></td>
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<tr>
<td>(7) TRISHA LESTER</td>
<td>1.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) LISA T. MARUYAMA</td>
<td>1.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(9) LIZ MOORE</td>
<td>1.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10) VAL PORTER</td>
<td>1.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td>X</td>
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<td></td>
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</tr>
<tr>
<td>(11) MARNIE TAYLOR</td>
<td>1.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12) KYLE CALDWELL</td>
<td>1.00</td>
<td>X</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>PAST CHAIR/DIRECTOR THRU 7/2016</td>
<td>1.00</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13) CHARLES T. DELANEY</td>
<td>40.00</td>
<td>X</td>
<td>270,456.</td>
<td>0.00</td>
<td>25,698.</td>
</tr>
<tr>
<td>PRESIDENT &amp; CEO</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14) JENNIFER CHANDLER HAUGE</td>
<td>40.00</td>
<td>X</td>
<td>135,986.</td>
<td>0.00</td>
<td>20,308.</td>
</tr>
<tr>
<td>VICE PRESIDENT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15) DAVID L. THOMPSON</td>
<td>40.00</td>
<td>X</td>
<td>152,788.</td>
<td>0.00</td>
<td>10,899.</td>
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<tr>
<td>VICE PRESIDENT OF PUBLIC POLICY</td>
<td>40.00</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(16) RICHARD COHEN</td>
<td>40.00</td>
<td>X</td>
<td>101,940.</td>
<td>0.00</td>
<td>10,521.</td>
</tr>
<tr>
<td>DIRECTOR OF COMMUNICATIONS AND OPERA</td>
<td>40.00</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Individual trustee or director</td>
<td>Officer</td>
<td>Key employee</td>
<td>Former</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total from continuation sheets to Part VII, Section A**

1b Sub-total  
1c Total from continuation sheets to Part VII, Section A  
1d Total (add lines 1b and 1c)  

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  

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

### Section B. Independent Contractors

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

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

|  |  
|---|---
|  | 0 

Form 990 (2016)
### Part VIII  Statement of Revenue

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>318,060.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f: $</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total, Add lines 1a-1f</td>
<td>318,060.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2 a MEMBERSHIP DUES</td>
<td>900099</td>
<td>243,462.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b PROGRAM/SERVICE FEES</td>
<td>900099</td>
<td>149,870.</td>
<td>136,165.</td>
<td>13,705.</td>
</tr>
<tr>
<td>2c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total, Add lines 2a-2f</td>
<td>393,332.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Investment income (including dividends, interest, and other similar amounts) | Add lines 3a-3d | 13,796.                                  |                               |                                                  |

| Income from investment of tax-exempt bond proceeds | Add lines 4a-4d | 13,796.                                  |                               |                                                  |

| Royalties                                             | Add lines 5a-5d |                                           |                               |                                                  |
|                                                      | (i) Real        |                                           |                               |                                                  |
|                                                      | (ii) Personal   |                                           |                               |                                                  |

| Gross rents                                           | Add lines 6a-6d |                                           |                               |                                                  |
|                                                      | (i) Real        |                                           |                               |                                                  |
|                                                      | (ii) Personal   |                                           |                               |                                                  |

| Less: rental expenses                                  | Add lines 6b-6d |                                           |                               |                                                  |
|                                                      | (i) Real        |                                           |                               |                                                  |
|                                                      | (ii) Personal   |                                           |                               |                                                  |

| Rental income or (loss)                               | Add lines 6c-6d |                                           |                               |                                                  |
|                                                      | (i) Real        |                                           |                               |                                                  |
|                                                      | (ii) Personal   |                                           |                               |                                                  |

| Net rental income or (loss)                           | Add lines 6d-6d |                                           |                               |                                                  |
|                                                      | (i) Real        |                                           |                               |                                                  |
|                                                      | (ii) Personal   |                                           |                               |                                                  |

| Gross amount from sales of assets other than inventory | Add lines 7a-7d |                                           |                               |                                                  |
|                                                       | (i) Securities  |                                           |                               |                                                  |
|                                                       | (ii) Other      |                                           |                               |                                                  |

| Less: cost or other basis and sales expenses          | Add lines 7b-7c |                                           |                               |                                                  |
|                                                       | (i) Real        |                                           |                               |                                                  |
|                                                       | (ii) Personal   |                                           |                               |                                                  |

| Gain or (loss)                                        | Add lines 7c-7c |                                           |                               |                                                  |
|                                                       | (i) Real        |                                           |                               |                                                  |
|                                                       | (ii) Personal   |                                           |                               |                                                  |

| Net gain or (loss)                                    | Add lines 7d-7d |                                           |                               |                                                  |
|                                                       | (i) Real        |                                           |                               |                                                  |
|                                                       | (ii) Personal   |                                           |                               |                                                  |

| Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18 | Add lines 8a-8a |                                           |                               |                                                  |

| Less: direct expenses                                 | Add lines 8b-8b |                                           |                               |                                                  |
|                                                       | (i) Real        |                                           |                               |                                                  |
|                                                       | (ii) Personal   |                                           |                               |                                                  |

| Net income or (loss) from fundraising events          | Add lines 8c-8c |                                           |                               |                                                  |
|                                                       | (i) Real        |                                           |                               |                                                  |
|                                                       | (ii) Personal   |                                           |                               |                                                  |

| Gross income from gaming activities. See Part IV, line 19 | Add lines 9a-9a |                                           |                               |                                                  |

| Less: direct expenses                                 | Add lines 9b-9b |                                           |                               |                                                  |
|                                                       | (i) Real        |                                           |                               |                                                  |
|                                                       | (ii) Personal   |                                           |                               |                                                  |

| Net income or (loss) from gaming activities            | Add lines 9c-9c |                                           |                               |                                                  |
|                                                       | (i) Real        |                                           |                               |                                                  |
|                                                       | (ii) Personal   |                                           |                               |                                                  |

| Gross sales of inventory, less returns and allowances | Add lines 10a-10a |                                           |                               |                                                  |

| Less: cost of goods sold                               | Add lines 10b-10b |                                           |                               |                                                  |
|                                                       | (i) Real        |                                           |                               |                                                  |
|                                                       | (ii) Personal   |                                           |                               |                                                  |

| Net income or (loss) from sales of inventory           | Add lines 10c-10c |                                           |                               |                                                  |
|                                                       | (i) Real        |                                           |                               |                                                  |
|                                                       | (ii) Personal   |                                           |                               |                                                  |

| MISCELLANEOUS INCOME                                   | 900099           | 30,561.                                   |                               |                                                  |

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11 a MISCELLANEOUS INCOME</td>
<td>900099</td>
<td>30,561.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11d All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11e Total, Add lines 11a-11d</td>
<td>30,561.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Total revenue. See instructions.                       | Add lines 12a-12d | 755,749.                                  | 379,627.                      | 13,705.                                          |

| All other revenue                                      | Add lines 12a-12d | 44,357.                                   |                               |                                                  |

|                                                                                       | 755,749.          | 379,627.                                  | 13,705.                      | 44,357.                                          |
### Part IX: Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>305,265</td>
<td>250,124</td>
<td>42,570</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>553,182</td>
<td>453,649</td>
<td>76,842</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>28,039</td>
<td>22,919</td>
<td>3,949</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>118,138</td>
<td>95,925</td>
<td>17,154</td>
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<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>55,910</td>
<td>45,865</td>
<td>8,162</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>220</td>
<td>220</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>35,091</td>
<td>27,534</td>
<td>6,945</td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>24,851</td>
<td>11,882</td>
<td>12,794</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>28,629</td>
<td>22,361</td>
<td>5,118</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>22,278</td>
<td>20,676</td>
<td>1,230</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>201,939</td>
<td>170,184</td>
<td>23,165</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>20,563</td>
<td>12,857</td>
<td>4,776</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>56,115</td>
<td>52,217</td>
<td>3,898</td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>50,592</td>
<td>19,203</td>
<td>30,426</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>4,919</td>
<td>3,848</td>
<td>877</td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>BOOKS AND SUBSCRIPTIONS</td>
<td>12,491</td>
<td>11,372</td>
<td>978</td>
</tr>
<tr>
<td>b</td>
<td>STAFF DEVELOPMENT</td>
<td>5,954</td>
<td>2,789</td>
<td>3,110</td>
</tr>
<tr>
<td>c</td>
<td>MEMBERSHIP DUES</td>
<td>1,540</td>
<td>1,540</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>1,525,716</td>
<td>1,224,945</td>
<td>242,214</td>
</tr>
</tbody>
</table>

**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here if following SOP 98-2 (ASC 958-720)
### Balance Sheet

#### Part X

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

<table>
<thead>
<tr>
<th>Assets</th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cash - non-interest-bearing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Savings and temporary cash investments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Pledges and grants receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Accounts receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees’ beneficiary organizations (see instr). Complete Part II of Sch L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Notes and loans receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Prepaid expenses and deferred charges</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>433,738.</td>
<td>357,105.</td>
</tr>
<tr>
<td>11. Investments - publicly traded securities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Investments - other securities. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Investments - program-related. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Other assets. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>2,283,498.</td>
<td>1,545,927.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Accounts payable and accrued expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td>423,642.</td>
<td>475,966.</td>
</tr>
</tbody>
</table>

#### Organizations that follow SFAS 117 (ASC 958), check here [X] and complete lines 27 through 29, and lines 33 and 34.

| 27. Unrestricted net assets | 780,598. | 649,575. |
| 28. Temporarily restricted net assets | 940,000. | 309,238. |
| 29. Permanently restricted net assets | | |

#### Organizations that do not follow SFAS 117 (ASC 958), check here [ ] and complete lines 30 through 34.

| 30. Capital stock or trust principal, or current funds | | |
| 31. Paid-in or capital surplus, or land, building, or equipment fund | | |
| 32. Retained earnings, endowment, accumulated income, or other funds | | |
| 33. Total net assets or fund balances | 1,720,598. | 958,813. |
| 34. Total liabilities and net assets/fund balances | 2,283,498. | 1,545,927. |
### Part XI  Reconciliation of Net Assets

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>755,749</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>1,525,716</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>-769,967</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>1,720,598</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>8,182</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>0</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>958,813</td>
</tr>
</tbody>
</table>

### Part XII  Financial Statements and Reporting

- **Accounting method used to prepare the Form 990:**
  - Cash: No
  - Accrual: Yes
  - Other: No

- **Were the organization's financial statements compiled or reviewed by an independent accountant?**
  - Yes: Yes
  - No: No

- **Were the organization's financial statements audited by an independent accountant?**
  - Yes: Yes
  - No: No

- **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?**
  - Yes: No
  - No: Yes

- **If "Yes," did the organization undergo the required audit or audits?**
  - Yes: Yes
  - No: No

Form 990 (2016)
Name of the organization: NATIONAL COUNCIL OF NONPROFITS

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1  ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2  ☐ A school described in section 170(b)(1)(A)(ii).  (Attach Schedule E (Form 990 or 990-EZ).)
3  ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4  ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state:
5  ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).  (Complete Part II.)
6  ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7  X ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).  (Complete Part II.)
8  ☐ A community trust described in section 170(b)(1)(A)(vi).  (Complete Part II.)
9  ☐ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2).  (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

12 ☐ An organization organized and operated exclusively to perform the functions of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a  ☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.

b  ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.

c  ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.

d  ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

e  ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f  Enter the number of supported organizations .................................................................

g  Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
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<td></td>
</tr>
</tbody>
</table>

Total

LHA  For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632021 09-21-16 Schedule A (Form 990 or 990-EZ) 2016

04390906 790809 52-1689643 2016.04020 NATIONAL COUNCIL OF NONPR 52-16891 13

OMB No. 1545-0047
### Part II: Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>1767935</td>
<td>523,380</td>
<td>697,201</td>
<td>1467146</td>
<td>318,060</td>
<td>4773722</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>1767935</td>
<td>523,380</td>
<td>697,201</td>
<td>1467146</td>
<td>318,060</td>
<td>4773722</td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>1767935</td>
<td>523,380</td>
<td>697,201</td>
<td>1467146</td>
<td>318,060</td>
<td>4773722</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>27,892</td>
<td>11,670</td>
<td>15,113</td>
<td>12,786</td>
<td>13,796</td>
<td>81,257</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td>3,476</td>
<td>705</td>
<td>32,963</td>
<td>348,870</td>
<td>30,561</td>
<td>416,575</td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 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.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Public support percentage from 2015 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16a 33 1/3% support test - 2016. 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16b 33 1/3% support test - 2015. 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17a 10% -facts-and-circumstances test - 2016. 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 &quot;facts-and-circumstances&quot; test, check this box and stop here. Explain in Part VI how the organization meets the &quot;facts-and-circumstances&quot; test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17b 10% -facts-and-circumstances test - 2015. 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 &quot;facts-and-circumstances&quot; test, check this box and stop here. Explain in Part VI how the organization meets the &quot;facts-and-circumstances&quot; test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

Schedule A (Form 990 or 990-EZ) 2016  NATIONAL COUNCIL OF NONPROFITS  52-1689643  Page 2
### Part III: Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support

**Calendar year (or fiscal year beginning in)** | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total
--- | --- | --- | --- | --- | --- | ---

1. Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")

2. Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose

3. Gross receipts from activities that are not an unrelated trade or business under section 513

4. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf

5. The value of services or facilities furnished by a governmental unit to the organization without charge

6. **Total.** Add lines 1 through 5

7a. Amounts included on lines 1, 2, and 3 received from disqualified persons

7b. 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

8. **Public support.** (Subtract line 7c from line 6)

#### Section B. Total Support

**Calendar year (or fiscal year beginning in)** | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total
--- | --- | --- | --- | --- | --- | ---

9. Amounts from line 6

10a. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources

10b. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975

11. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on

12. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)

13. **Total support.** (Add lines 9, 10c, 11, and 12)

14. **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

#### Section C. Computation of Public Support Percentage

15. Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))

16. Public support percentage from 2015 Schedule A, Part III, line 15

#### Section D. Computation of Investment Income Percentage

17. Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))

18. Investment income percentage from 2015 Schedule A, Part III, line 17

19a. **33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

19b. **33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Section A. All Supporting Organizations

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.*

2. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If “Yes,” explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).*

3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If “Yes,” answer (b) and (c) below.*

   b. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If “Yes,” describe in Part VI when and how the organization made the determination.*

   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.*

4a. Was any supported organization not organized in the United States (“foreign supported organization”)? *If “Yes,” and if you checked 12a or 12b in Part I, answer (b) and (c) below.*

   b. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If “Yes,” describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*

   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)? *If “Yes,” explain in Part VI how the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*

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).*

   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?

   Substitutions only. Was the substitution the result of an event beyond the organization’s control?

6. Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.*

7. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If “Yes,” complete Part I of Schedule L (Form 990 or 990-EZ).*

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 I of Schedule L (Form 990 or 990-EZ).*

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.*

   b. Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If “Yes,” provide detail in Part VI.*

   c. Did a disqualified person (as defined in line 9a) 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.*

10a. Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If “Yes,” answer 10b below.*

   b. Did the organization have any excess business holdings in the tax year? *If “Yes,” provide detail in Part VI.*

   (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)
### Part IV Supporting Organizations (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 Has the organization accepted a gift or contribution from any of the following persons?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a 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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b A family member of a person described in (a) above?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c A 35% controlled entity of a person described in (a) or (b) above?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Type I Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 &quot;No,&quot; describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Type II Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 &quot;No,&quot; 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).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section D. All Type III Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section E. Type III Functionally Integrated Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a The organization satisfied the Activities Test. Complete line 2 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b The organization is the parent of each of its supported organizations. Complete line 3 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Activities Test. Answer (a) and (b) below.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 &quot;Yes,&quot; 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; 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.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Parent of Supported Organizations. Answer (a) and (b) below.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If &quot;Yes,&quot; describe in Part VI the role played by the organization in this regard.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Schedule A (Form 990 or 990-EZ) 2016  NATIONAL COUNCIL OF NONPROFITS  
52-1689643  Page 6

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 (explain in Part VI.)  See instructions.  All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section B - Minimum Asset Amount

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

### Section C - Distributable Amount

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

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.
Section D - Distributions

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions</td>
</tr>
<tr>
<td>7</td>
<td>Total annual distributions. Add lines 1 through 6</td>
</tr>
</tbody>
</table>

Part VI

(i) Excess Distributions

(ii) Underdistributions Pre-2016

(iii) Distributable Amount for 2016

Distributable amount for 2016 from Section C, line 6

Line 8 amount divided by Line 9 amount

Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2016 from Section C, line 6</td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2016 (reasonable cause required - explain in Part VI). See instructions</td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2016:</td>
</tr>
<tr>
<td>a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>From 2013</td>
</tr>
<tr>
<td>d</td>
<td>From 2014</td>
</tr>
<tr>
<td>e</td>
<td>From 2015</td>
</tr>
<tr>
<td>f</td>
<td>Total of lines 3a through e</td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2016 distributable amount</td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2011 not applied (see instructions)</td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2016 from Section D, line 7:</td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2016 distributable amount</td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4</td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions</td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions</td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2017. Add lines 3j and 4c</td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
</tr>
<tr>
<td>a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2013</td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2014</td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2015</td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2016</td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2016
OTHER INCOME

2012 AMOUNT: $ 3,476.

2013 AMOUNT: $ 705.

2014 AMOUNT: $ 32,963.

2015 AMOUNT: $ 348,870.

2016 AMOUNT: $ 30,561.

SCHEDULE A, PART II, LINE 15

THE 2015 RETURN INCORRECTLY INCLUDED A PUBLICLY SUPPORTED CHARITY IN THE EXCESS CONTRIBUTIONS REPORTED ON LINE 5 OF SCHEDULE A RESULTING IN AN INCORRECT PUBLIC SUPPORT CALCULATION OF 32.66% REPORTED ON LINE 14 OF THAT RETURN. WHEN THE PUBLICLY SUPPORTED CHARITY WAS REMOVED FROM THE LINE 5 CALCULATION, THE CORRECTED PUBLIC SUPPORT PERCENTAGE FOR THAT YEAR IS 40.02%. THUS, LINE 15 OF THE 2016 SCHEDULE A, PART II IS NOW CORRECTLY REPORTED AS 40.02%.
Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization

NATIONAL COUNCIL OF NONPROFITS

Employer identification number

52-1689643

Organization type (check one):

Filers of: Section:

Form 990 or 990-EZ 3 501(c)(3) (enter number) organization
4947(a)(1) nonexempt charitable trust not treated as a private foundation
527 political organization

Form 990-PF 501(c)(3) exempt private foundation
4947(a)(1) nonexempt charitable trust treated as a private foundation
501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor’s total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) $5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don’t complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year

Caution: An organization that isn’t covered by the General Rule and/or the Special Rules doesn’t file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer “No” on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn’t meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)
### Part I: Contributors

(See instructions. Use duplicate copies of Part I if additional space is needed.)

<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$250,000</td>
<td>Person ✗ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$25,000</td>
<td>Person ✗ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$25,000</td>
<td>Person ✗ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
### Part II: Noncash Property

(See instructions. Use duplicate copies of Part II if additional space is needed.)

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (See instructions)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td></td>
</tr>
<tr>
<td></td>
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<tr>
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<td></td>
<td>$</td>
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</tr>
</tbody>
</table>
Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Transferee's name, address, and ZIP + 4</td>
</tr>
<tr>
<td></td>
<td></td>
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</tr>
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<td></td>
</tr>
</tbody>
</table>

Use duplicate copies of Part III if additional space is needed.
### SCHEDULE C
(Describe and explain here)

#### Part I-A
Complete if the organization is exempt under section 501(c) or is a section 527 organization.

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td>Provide a description of the organization’s direct and indirect political campaign activities in Part IV.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>Political campaign activity expenditures</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td><strong>3</strong></td>
<td>Volunteer hours for political campaign activities</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Part I-B
Complete if the organization is exempt under section 501(c)(3).

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td>Enter the amount of any excise tax incurred by the organization under section 4955</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>Enter the amount of any excise tax incurred by organization managers under section 4955</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td><strong>3</strong></td>
<td>If the organization incurred a section 4955 tax, did it file Form 4720 for this year?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td><strong>4a</strong></td>
<td>Was a correction made?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td><strong>4b</strong></td>
<td>If &quot;Yes,&quot; describe in Part IV.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Part I-C
Complete if the organization is exempt under section 501(c), except section 501(c)(3).

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td>Enter the amount directly expended by the filing organization for section 527 exempt function activities</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>Enter the amount of the filing organization’s funds contributed to other organizations for section 527 exempt function activities</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td><strong>3</strong></td>
<td>Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td><strong>4</strong></td>
<td>Did the filing organization file Form 1120-POL for this year?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

#### Part I-D
Complete if the organization answered "Yes," on Form 990, Part V, line 46 (Political Campaign Activities), then

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>5</strong></td>
<td>Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization’s funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization’s funds. If none, enter -0-.</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

<table>
<thead>
<tr>
<th></th>
<th>(a) Filing organization's totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Total lobbying expenditures to influence public opinion (grass roots lobbying)</td>
<td>2,130.</td>
</tr>
<tr>
<td>1b</td>
<td>Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td>0.</td>
</tr>
<tr>
<td>1c</td>
<td>Total lobbying expenditures (add lines 1a and 1b)</td>
<td>2,130.</td>
</tr>
<tr>
<td>1d</td>
<td>Other exempt purpose expenditures</td>
<td>1,501,562.</td>
</tr>
<tr>
<td>1e</td>
<td>Total exempt purpose expenditures (add lines 1c and 1d)</td>
<td>1,503,692.</td>
</tr>
<tr>
<td>1f</td>
<td>Lobbying nontaxable amount. Enter the amount from the following table in both columns.</td>
<td>225,185.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If the amount on line 1e, column (a) or (b) is:</th>
<th>The lobbying nontaxable amount is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not over $500,000</td>
<td>20% of the amount on line 1e.</td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
<td>$100,000 plus 15% of the excess over $500,000.</td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
<td>$175,000 plus 10% of the excess over $1,000,000.</td>
</tr>
<tr>
<td>Over $1,500,000 but not over $17,000,000</td>
<td>$225,000 plus 5% of the excess over $1,500,000.</td>
</tr>
<tr>
<td>Over $17,000,000</td>
<td>$1,000,000.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Lobbying Expenditures During 4-Year Averaging Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Calender year (or fiscal year beginning in))</td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
</tr>
<tr>
<td>2b Lobbying ceiling amount (150% of line 2a, column(e))</td>
</tr>
<tr>
<td>2c Total lobbying expenditures</td>
</tr>
<tr>
<td>2d Grassroots nontaxable amount</td>
</tr>
<tr>
<td>2e Grassroots ceiling amount (150% of line 2d, column(e))</td>
</tr>
<tr>
<td>2f Grassroots lobbying expenditures</td>
</tr>
</tbody>
</table>
Schedule C (Form 990 or 990-EZ) 2016 NATIONAL COUNCIL OF NONPROFITS 52-1689643 Page 3

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>1a</td>
<td>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Media advertisements?</td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td>Mailings to members, legislators, or the public?</td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td>Publications, or published or broadcast statements?</td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td>Grants to other organizations for lobbying purposes?</td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td>Direct contact with legislators, their staffs, government officials, or a legislative body?</td>
<td></td>
</tr>
<tr>
<td>1g</td>
<td>Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</td>
<td></td>
</tr>
<tr>
<td>1h</td>
<td>Other activities?</td>
<td></td>
</tr>
<tr>
<td>1i</td>
<td>Total. Add lines 1c through 1i</td>
<td></td>
</tr>
</tbody>
</table>

Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

1. Were substantially all (90% or more) dues received nondeductible by members? 1

Part III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1. Dues, assessments and similar amounts from members 1

2. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).

   a. Current year 2a

   b. Carryover from last year 2b

   c. Total 2c

3. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3

4. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4

5. Taxable amount of lobbying and political expenditures (see instructions) 5

Part IV  Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.
SCHEDULE D (Form 990) 2016

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

1 Total number at end of year ........................................... (a) Donor advised funds (b) Funds and other accounts  
2 Aggregate value of contributions to (during year) ...........................................  
3 Aggregate value of grants from (during year) ...........................................  
4 Aggregate value at end of year ...........................................  

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization’s property, subject to the organization’s exclusive legal control? □ Yes □ No  
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? □ Yes □ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
   □ Preservation of land for public use (e.g., recreation or education) □ Preservation of natural habitat  
   □ Preservation of open space □ Preservation of a historically important land area  
   □ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.  
   a Total number of conservation easements ...........................................  2a  
   b Total acreage restricted by conservation easements ...........................................  2b  
   c Number of conservation easements on a certified historic structure included in (a) ...........................................  2c  
   d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register ...........................................  2d  

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

4 Number of states where property subject to conservation easement is located □  

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? □ Yes □ No  

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? □ Yes □ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements.

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ........................................... □ $  
(ii) Assets included in Form 990, Part X ........................................... □ $  

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

2a Revenue included on Form 990, Part VIII, line 1 ........................................... □ $  
2b Assets included in Form 990, Part X ........................................... □ $  

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

Schedule D (Form 990) 2016

OMB No. 1545-0047
Department of the Treasury
Internal Revenue Service

Open to Public Inspection

Name of the organization NATIONAL COUNCIL OF NONPROFITS Employer identification number 52-1689643

2016.04020 NATIONAL COUNCIL OF NONPR 52-16891

LHA 04390906 790809 52-1689643 632051 08-29-16
### Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3. Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
   - Public exhibition
   - Scholarly research
   - Preservation for future generations

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

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

### Part IV: Escrow and Custodial Arrangements

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

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

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

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a. Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? [ ] Yes [ ] No

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

### Part V: Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

1a. Beginning of year balance

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

b. Contributions

c. Net investment earnings, gains, and losses

d. Grants or scholarships

e. Other expenditures for facilities and programs

f. Administrative expenses

g. End of year balance

2. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   
   a. Board designated or quasi-endowment [ ] %
   
   b. Permanent endowment [ ] %
   
   c. Temporarily restricted endowment [ ] %

   The percentages on lines 2a, 2b, and 2c should equal 100%.

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

   (i) unrelated organizations [ ]
   
   (ii) related organizations [ ]

   b. If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? [ ] Yes [ ] No

3b. Describe in Part XIII the intended uses of the organization's endowment funds.

### Part VI: Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Leasinghold improvements</td>
<td>284,981.</td>
<td>42,723.</td>
<td>242,258.</td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td>116,919.</td>
<td>71,767.</td>
<td>45,152.</td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td>31,838.</td>
<td>12,735.</td>
<td>19,103.</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) [ ] 306,513.

Schedule D (Form 990) 2016
### Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(A)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(B)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(C)</em></td>
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<td></td>
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<tr>
<td><em>(D)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(E)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(F)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(G)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(H)</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

### Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

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

### Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. Description of liability
<table>
<thead>
<tr>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
</tr>
<tr>
<td>(2) <strong>DEFERRED RENT</strong> 475,966.</td>
</tr>
<tr>
<td>(3)</td>
</tr>
<tr>
<td>(4)</td>
</tr>
<tr>
<td>(5)</td>
</tr>
<tr>
<td>(6)</td>
</tr>
<tr>
<td>(7)</td>
</tr>
<tr>
<td>(8)</td>
</tr>
<tr>
<td>(9)</td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

Schedule D (Form 990) 2016
### Part XI | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

**Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.**

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>764,931</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Net unrealized gains (losses) on investments</td>
<td>8,182</td>
</tr>
<tr>
<td></td>
<td>b. Donated services and use of facilities</td>
<td>1,000</td>
</tr>
<tr>
<td></td>
<td>c. Recoveries of prior year grants</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIII.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e. Add lines 2a through 2d</td>
<td>9,182</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>755,749</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)</td>
<td>755,749</td>
</tr>
</tbody>
</table>

### Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

**Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.**

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>1,526,716</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Donated services and use of facilities</td>
<td>1,000</td>
</tr>
<tr>
<td></td>
<td>b. Prior year adjustments</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Other losses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. Other (Describe in Part XIII.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e. Add lines 2a through 2d</td>
<td>1,000</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>1,525,716</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>b. Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td></td>
<td>c. Add lines 4a and 4b</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)</td>
<td>1,525,716</td>
</tr>
</tbody>
</table>

### Part XIII | Supplemental Information.

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td><img src="X" alt="Check Box" /></td>
<td><img src="X" alt="Check Box" /></td>
</tr>
<tr>
<td></td>
<td>First-class or charter travel</td>
<td>Housing allowance or residence for personal use</td>
</tr>
<tr>
<td></td>
<td>Travel for companions</td>
<td>Payments for business use of personal residence</td>
</tr>
<tr>
<td></td>
<td>Tax indemnification and gross-up payments</td>
<td>Health or social club dues or initiation fees</td>
</tr>
<tr>
<td></td>
<td>Discretionary spending account</td>
<td>Personal services (such as, maid, chauffeur, chef)</td>
</tr>
</tbody>
</table>

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**a** Receive a severance payment or change-of-control payment?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**c** Participate in, or receive payment from, an equity-based compensation arrangement?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
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<td></td>
</tr>
</tbody>
</table>

**a** The organization?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**b** Any related organization?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If "Yes" on line 5a or 5b, describe in Part III.

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**a** The organization?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**b** Any related organization?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If "Yes" on line 6a or 6b, describe in Part III.

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2016

---

632111 09-09-16

04390906 790809 52-1689643

2016.04020 NATIONAL COUNCIL OF NONPR 52-16891
Part II  Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.

For each individual whose compensation must be reported on 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 aren’t 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.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) CHARLES T. DELANEY</td>
<td>(i) 270,456. 0. 0. 12,500.</td>
<td>22,309.</td>
<td>305,265.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>PRESIDENT &amp; CEO</td>
<td>(ii) 0. 0. 0. 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(2) JENNIFER CHANDLER HAUGE</td>
<td>(i) 135,986. 0. 0. 7,550.</td>
<td>15,761.</td>
<td>159,297.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>VICE PRESIDENT</td>
<td>(ii) 0. 0. 0. 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>(3) DAVID L. THOMPSON</td>
<td>(i) 152,788. 0. 0. 7,500.</td>
<td>6,795.</td>
<td>167,083.</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>VICE PRESIDENT OF PUBLIC POLICY</td>
<td>(ii) 0. 0. 0. 0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td></td>
</tr>
</tbody>
</table>
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.
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OUR STATE AND NATIONAL NETWORKS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

PUBLIC POLICY/ADVOCACY – THE NATIONAL COUNCIL OF NONPROFITS HELPS CHARITABLE NONPROFITS ADVANCE THEIR MISSIONS THROUGH ADVOCACY AND PUBLIC POLICY AT THE FEDERAL, STATE, AND LOCAL LEVELS. MUCH OF THIS POLICY WORK IS DEFENSIVE IN NATURE, STOPPING BAD PROPOSALS THAT WOULD HURT THE ABILITY OF NONPROFITS TO SERVE INDIVIDUALS AND COMMUNITIES;

SOME OF THIS WORK IS PROACTIVE, AS IN SEEKING TO REFORM BROKEN GOVERNMENT SYSTEMS; AND PART OF THIS WORK INVOLVES HELPING NONPROFITS BUILD THEIR CAPACITY TO ENGAGE IN EVERYDAY ADVOCACY THAT ADVANCES THEIR MISSIONS.

THROUGH OUR NETWORK OF STATE ASSOCIATIONS OF NONPROFITS AND THEIR MORE THAN 25,000 NONPROFIT MEMBERS IN LOCAL COMMUNITIES ACROSS THE COUNTRY, WE USE OUR UNIQUE POSITION TO FOCUS ON STATE POLICY MATTERS VIA MONITORING ACTIVITIES, IDENTIFYING AND HIGHLIGHTING TRENDS, AND SUPPORTING NONPROFITS ACROSS STATE LINES AS THE ONLY NATIONAL NONPROFIT INFRASTRUCTURE GROUP FOCUSING ON SECTOR-WIDE ISSUES IN COMMUNITIES ACROSS THE COUNTRY.

THE NATIONAL COUNCIL OF NONPROFITS ALSO WORKS TO PROTECT THE NONPROFIT SECTOR ON A VARIETY OF FEDERAL POLICY ISSUES WHERE OUR UNIQUE GRASSROOTS NETWORKS CAN MOST EFFECTIVELY AFFECT POLICY DECISIONS. FOR EXAMPLE, 2016 BEGAN WITH A VICTORY FOR ALL CHARITABLE NONPROFITS, AND...
THE PUBLIC, AS THE IRS WITHDREW ITS PROPOSED RULE FOR NONPROFITS TO
SUBSTANTIATE CONTRIBUTIONS THEY RECEIVED BY COLLECTING AND REPORTING
DONORS' SOCIAL SECURITY NUMBERS. WE AGGRESSIVELY OPPOSED THE PROPOSAL
THROUGH THE MEDIA AND OUR WORK BUILDING A BROAD COALITION BECAUSE IT
WOULD HAVE MADE DONORS VULNERABLE TO IDENTITY THEFT, CURTAILED
FUNDRAISING, AND EXPOSED NONPROFITS TO LIABILITY. THE IRS'S CHANGE OF
HEART WAS UNQUESTIONABLY INFLUENCED BY OUR NETWORK'S AND COALITION'S
SUCCESS IN MOBILIZING MORE THAN 37,000 PEOPLE TO FILE COMMENTS IN
OPPOSITION.

IN 2016, OUR NETWORK PREVENTED THE DIVERSION OF RESOURCES DEVOTED TO
ADVANCING CHARITABLE MISSIONS IN COMMUNITIES BY WORKING TO DEFEAT
POLICY THREATS TO CHARITABLE GIVING INCENTIVES, PROPERTY AND SALES TAX
EXEMPTIONS, AND NONPROFIT INDEPENDENCE IN MULTIPLE STATES.

THE NATIONAL COUNCIL OF NONPROFITS CONTINUED ITS EFFORTS IN 2016 TO
REFORM FLAWED GOVERNMENT-NONPROFIT GRANTMAKING AND CONTRACTING SYSTEMS
BECAUSE DATA DEMONSTRATE THAT THIS WORK CAN HAVE THE MOST IMMEDIATE AND
SIGNIFICANT IMPACT ON NONPROFIT PERFORMANCE AND SUSTAINABILITY. BECAUSE
GOVERNMENTS DEPEND ON NONPROFITS TO DELIVER SERVICES TO THE PUBLIC, THE
NONPROFIT SECTOR AS A WHOLE EARNS ALMOST A THIRD OF ITS REVENUE (32.5
PERCENT) BY CONTRACTING TO PROVIDE SERVICES TO THE PUBLIC ON BEHALF OF
GOVERNMENTS. OUR FOCUS PRIMARILY IS ON COLLABORATIVE PROBLEM-SOLVING
WITH GOVERNMENTS TO REDUCE REDUNDANCIES, ENSURE REIMBURSEMENT OF
NONPROFIT INDIRECT COSTS (PER THE OMB UNIFORM GUIDANCE), EDUCATE
NONPROFITS AND GOVERNMENT OFFICIALS ON EFFECTIVE REFORMS AND PROMISING
PRACTICES – ALL DESIGNED TO REDUCE COSTS FOR GOVERNMENTS AND NONPROFITS
ALIKE, WHILE ENHANCING TRANSPARENCY AND IMPROVING PERFORMANCE FOR THE
network support - the national council of nonprofits is a trusted resource and advocate for america's charitable nonprofits. our mission is to advance the vital role, capacity, and voice of charitable nonprofit organizations. we do so primarily through our networks, composed of our member state associations of nonprofits, their members, and our other members, that together create the largest network of nonprofits in the country.

network support refers to our role coordinating many common activities of the state association network as well as identifying emerging trends, sharing proven practices, and promoting solutions that benefit all charitable nonprofits and the communities they serve. we convened our core network more than 25 times throughout the year, in person, and via teleconferences/webinars, to gather and circulate information that informs the state association network about public policies and promising practices for their own capacity building work in their states.

in 2016, our network invested significant energy working to help the nonprofit community be in a position to comply with the u.s. department of labor's overtime final rule, released in may and to become effective in december (but ultimately blocked by a federal judge shortly before it became effective). among other activities, we conducted a national survey to learn what the effect would be on nonprofits with fixed rates.
IN CONTRACTS/GRANTS WITH FEDERAL, STATE, AND LOCAL GOVERNMENTS. USING THAT DATA, WE DEVELOPED SOLUTIONS AND LED EDUCATION EFFORTS TO MAKE THE CASE TO REOPEN OR RENEGOTIATE EXISTING AGREEMENTS SO NONPROFITS WERE COMPENSATED FOR THE MANDATED HIGHER OPERATING COSTS. WE ALSO PROVIDED AND COORDINATED TRAINING PROGRAMMING TO PROMOTE AND SUPPORT FULL COMPLIANCE WITH FEDERAL AND STATE WAGE AND HOUR LAWS.

WE PROMOTE "BEST PRACTICES" BECAUSE WITHOUT PRUDENT AND ETHICAL OPERATIONS, NONPROFITS WON'T BE EITHER SUSTAINABLE OR CREDIBLE AND TRUSTED PARTNERS FOR INVESTMENTS BY GOVERNMENT, PHILANTHROPY, OR PRIVATE DONORS. WE ALSO PROMOTE FAIR AND EFFECTIVE STATE AND FEDERAL REGULATIONS, AND ENFORCEMENT OF THOSE REGULATIONS, TO ENSURE THAT NONPROFITS EARN AND CONTINUE TO DESERVE THE PUBLIC'S TRUST.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

COMMUNICATIONS - THE NATIONAL COUNCIL OF NONPROFITS UTILIZES MULTIPLE COMMUNICATIONS VEHICLES TO SPREAD TRUSTED INFORMATION ABOUT NONPROFITS. FOR INSTANCE, THROUGH OUR WEBSITE THAT IS UPDATED DAILY, WE WELCOMED 1.3 MILLION UNIQUE VISITORS TO OUR WEBSITE IN 2016.

THROUGH OUR BI-WEEKLY ENEWSLETTER "NONPROFIT ADVOCACY MATTERS," AND OUR MONTHLY CAPACITY BUILDING ENEWSLETTER "NONPROFIT KNOWLEDGE MATTERS," THE COUNCIL OF NONPROFITS KEEPS MORE THAN 24,000 NONPROFIT STAFF MEMBERS, BOARD MEMBERS, ATTORNEYS, CONSULTANTS, CPAS, ACADEMICS, JOURNALISTS, AND ELECTED AND APPOINTED GOVERNMENT OFFICIALS INFORMED ABOUT NONPROFIT ISSUES AND SOLUTIONS FROM ACROSS THE COUNTRY. THE 36 REGULAR EDITIONS OF THE TWO NEWSLETTERS, AND OCCASIONAL SPECIAL
EDITIONS, HELP TO SPREAD INFORMATION, GATHER INFORMATION, PROVIDE SENSE-MAKING, AND OFFER PERSPECTIVE.

NATIONAL COUNCIL OF NONPROFITS STAFF MEMBERS ALSO WROTE NUMEROUS ARTICLES, OP-EDS, AND OTHER PIECES THAT WERE PUBLISHED IN MAINSTREAM AND NONPROFIT PUBLICATIONS, AND RESPONDED TO FREQUENT REQUESTS FROM REPORTERS FOR INFORMATION AND QUOTES.

ADDITIONALLY, COUNCIL OF NONPROFITS STAFF MEMBERS DELIVERED SPEECHES, PRESENTATIONS, AND WEBINARS ACROSS THE COUNTRY ON A WIDE VARIETY OF TOPICS FROM ADVOCACY AND PUBLIC POLICY TO ETHICS AND LEADERSHIP.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

LEGISLATIVE/LOBBYING ACTIVITIES - THE NATIONAL COUNCIL OF NONPROFITS EXERCISES THE FIRST AMENDMENT AND STATUTORY RIGHTS ENJOYED BY CHARITABLE NONPROFITS TO PETITION GOVERNMENTS BY ENGAGING IN DIRECT AND GRASSROOTS LOBBYING TO PROMOTE LEGISLATION THAT SUPPORTS THE WORK OF THE NONPROFIT COMMUNITY AND OPPOSE PROPOSALS THAT WOULD HINDER THE ABILITY OF NONPROFITS TO IMPROVE THE QUALITY OF LIFE FOR INDIVIDUALS AND COMMUNITIES.

THE NATIONAL COUNCIL OF NONPROFITS HAS ELECTED TO APPLY THE COST-EXPENDITURE STANDARDS AVAILABLE UNDER SECTION 501(H) OF THE INTERNAL REVENUE CODE BECAUSE THAT SECTION PROVIDES CHARITABLE NONPROFIT ORGANIZATIONS WITH CLEAR AND OBJECTIVE GUIDELINES FOR ENSURING FULL COMPLIANCE WITH THE LAW AND THEIR RIGHTS AND OBLIGATIONS TO PURSUE THEIR MISSIONS THROUGH ADVOCACY. THE NATIONAL COUNCIL OF NONPROFITS AND ITS STAFF COMPLY IN ALL RESPECTS WITH FEDERAL LOBBYING
DISCLOSURE LAWS.

EXPENSES $ 2,130. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

FORM 990, PART VI, SECTION A, LINE 6:
THE MEMBERS OF THE BOARD OF DIRECTORS ARE ELECTED EACH YEAR BY FULL STATE ASSOCIATION MEMBERS IN GOOD STANDING.

FORM 990, PART VI, SECTION A, LINE 7A:
ONLY STATE ASSOCIATION MEMBERS SHALL HAVE THE RIGHT TO VOTE ON THE ELECTION OF DIRECTORS, AND AS PROVIDED BY THE D.C. CODE ON ANY AMENDMENT TO THE ARTICLES OF INCORPORATION, ON THE DISPOSITION OF ALL OR SUBSTANTIALLY ALL OF THE CORPORATION'S ASSETS, OR TO APPROVE ANY MERGER OR CONSOLIDATION, OR DISSOLUTION. OTHER RIGHTS OF MEMBERS ARE DETERMINED BY THE BOARD OF DIRECTORS OF THE NATIONAL COUNCIL OF NONPROFITS FROM TIME TO TIME.

FORM 990, PART VI, SECTION A, LINE 7B:

FORM 990, PART VI, SECTION B, LINE 11B:
ANNUALLY, THE ORGANIZATION'S FINANCIAL AUDIT AND DRAFT FORM 990 ARE REVIEWED BY THE AUDIT COMMITTEE FOR APPROVAL, THEN PRESENTED TO THE BOARD.
OF DIRECTORS FOR FINAL REVIEW AND APPROVAL.

FORM 990, PART VI, SECTION B, LINE 12C:
ANNUALLY, THE BOARD AND STAFF REVIEW AND DISCUSS THE CONFLICT OF INTEREST POLICY AND EACH BOARD AND STAFF MEMBER COMPLETES A CONFLICT DISCLOSURE QUESTIONNAIRE.

FORM 990, PART VI, SECTION B, LINE 15:
THE PRESIDENT & CEO'S COMPENSATION IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS AFTER A REVIEW OF COMPARABLE DATA.

FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION PROVIDES DOCUMENTS IT IS LEGALLY REQUIRED TO MAKE PUBLICLY AVAILABLE VIA ITS WEBSITE AND UPON REQUEST.

FORM 990, PART XII, LINE 2C:
THE AUDIT OVERSIGHT PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR.
### Exempt Organization Business Income Tax Return

**Form 990-T**

**Part I**

<table>
<thead>
<tr>
<th>Unrelated Trade or Business Income</th>
<th>(A) Income</th>
<th>(B) Expenses</th>
<th>(C) Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Gross receipts or sales</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less returns and allowances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Balance</td>
<td>1c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cost of goods sold (Schedule A, line 7)</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross profit. Subtract line 2 from line 1c</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a Capital gain net income (attach Schedule D)</td>
<td>4a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4b Capital loss deduction for trusts</td>
<td>4b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4c Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)</td>
<td>4c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Income (loss) from partnerships and S corporations (attach statement)</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Rent income (Schedule C)</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Unrelated debt-financed income (Schedule E)</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)</td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Exploited exempt activity income (Schedule I)</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Advertising income (Schedule J)</td>
<td>11</td>
<td>13,705.</td>
<td>15,346.</td>
</tr>
<tr>
<td>12 Other income (See instructions; attach schedule)</td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total. Combine lines 3 through 12</td>
<td>13</td>
<td>13,705.</td>
<td>15,346.</td>
</tr>
</tbody>
</table>

**Part II**

<table>
<thead>
<tr>
<th>Deductions Not Taken Elsewhere</th>
<th>(A) Income</th>
<th>(B) Expenses</th>
<th>(C) Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Compensation of officers, directors, and trustees (Schedule K)</td>
<td>14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Salaries and wages</td>
<td>15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Repairs and maintenance</td>
<td>16</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 Bad debts</td>
<td>17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Interest (attach schedule)</td>
<td>18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Taxes and licenses</td>
<td>19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Charitable contributions (See instructions for limitation rules)</td>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Depreciation (attach Form 4562)</td>
<td>21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Less depreciation claimed on Schedule A and elsewhere on return</td>
<td>22a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Depletion</td>
<td>23</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Contributions to deferred compensation plans</td>
<td>24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Employee benefit programs</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26 Excess exempt expenses (Schedule I)</td>
<td>26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27 Excess readership costs (Schedule J)</td>
<td>27</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28 Other deductions (attach schedule)</td>
<td>28</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29 Total deductions. Add lines 14 through 28</td>
<td>29</td>
<td>500.</td>
<td></td>
</tr>
<tr>
<td>30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13</td>
<td>30</td>
<td>-2,391.</td>
<td></td>
</tr>
<tr>
<td>31 Net operating loss deduction (limited to the amount on line 30)</td>
<td>31</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30</td>
<td>32</td>
<td>-2,391.</td>
<td></td>
</tr>
<tr>
<td>33 Specific deduction (Generally $1,000, but see line 33 instructions for exceptions)</td>
<td>33</td>
<td>1,000.</td>
<td></td>
</tr>
<tr>
<td>34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32</td>
<td>34</td>
<td>-2,391.</td>
<td></td>
</tr>
</tbody>
</table>

---

**Notes:**
- **OMB No. 1545-0687**
- **Department of the Treasury Internal Revenue Service**
- **Form 990-T** for calendar year 2016 or other tax year beginning ___________ and ending ___________.

**Important:** Information about Form 990-T and its instructions is available at [www.irs.gov/form990t](http://www.irs.gov/form990t).

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

**Contact:**
- **Name:** NATIONAL COUNCIL OF NONPROFITS
- **Identification number:** 52-1689643
- **Address:** 1001 G STREET, NW, NO. 700E WASHINGTON, DC 20001
- **Phone number:** (202) 962-0322

**Inspection:**
- The books are in care of CHARLES T. DELANEY.
- Open to Public Inspection for [ ] 30 years.

**Exempt Organization Business Income Tax Return**

1. **During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?** [ ] No [X] Yes

2. **Describe the organization's primary unrelated business activity.**

3. **Check organization type: X 501(c) corporation [ ] 501(c) trust [ ] 401(a) trust [ ] Other trust**

4. **Book value of all assets at end of year:** 1,545,927.

5. **Group exemption number:** (See instructions.)

6. **Employer identification number:** 52-1689643

7. **Nonprofit corporation number:** (See instructions.)

---

**For Paperwork Reduction Act Notice, see instructions.**
Part III  Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation.
   Controlled group members (sections 1561 and 1563) check here ▶ See instructions and:
   a Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order):
   (1) $ ▶ (2) $ ▶ (3) $ ▶
   b Enter organization's share of: (1) Additional 5% tax (not more than $11,750) $ ▶
   (2) Additional 3% tax (not more than $100,000) $ ▶
   c Income tax on the amount on line 34 ▶ 35c 0.
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:
   ▶ Tax rate schedule or ▶ Schedule D (Form 1041) ▶
37 Proxy tax. See instructions ▶
38 Alternative minimum tax ▶
39 Tax on Non-Compliant Facility Income. See instructions ▶
40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies ▶

Part IV  Tax and Payments

41a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) ▶ 41a
   b Other credits (see instructions) ▶ 41b
   c General business credit. Attach Form 3800 ▶ 41c
   d Credit for prior year minimum tax (attach Form 8801 or 8827) ▶ 41d
   e Total credits. Add lines 41a through 41d ▶ 41e
42 Subtract line 41e from line 40 ▶
43 Other taxes. Check if from: ▶ Form 4255 ▶ Form 8611 ▶ Form 8697 ▶ Form 8866 ▶ Other (attach schedule) ▶ 43
44 Total tax. Add lines 42 and 43 ▶

45 a Payments: A 2015 overpayment credited to 2016 ▶ 45a
   b 2016 estimated tax payments ▶ 45b
   c Tax deposited with Form 8868 ▶ 45c
   d Foreign organizations; Tax paid or withheld at source (see instructions) ▶ 45d
   e Backup withholding (see instructions) ▶ 45e
   f Credit for small employer health insurance premiums (Attach Form 8941) ▶ 45f
   g Other credits and payments: ▶ Form 2439 ▶ Form 4136 ▶ Other ▶
   ▶ Total ▶ 45g
46 Total payments. Add lines 45a through 45g ▶
47 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶
48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed ▶ 48
49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid ▶ 49
50 Enter the amount of line 49 you want: Credited to 2017 estimated tax ▶ Refunded ▶

Part V  Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2016 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶
52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.
53 Enter the amount of tax-exempt interest received or accrued during the tax year ▶

Sign Here

Signature of officer Date President and CEO

Paid Preparer Use Only
Print/Type preparer's name Date Check if self-employed PTIN
Preparer's signature
R MICHAEL SORRELLS ▶
Firm's name ▶ TATE AND TRYON
Firm's address ▶ 2021 L STREET, NW SUITE 400
Firm's EIN ▶ 52-1855942
Phone no. (202) 293-2200

May the IRS disclose this return with the preparer shown below (see instructions)? ▶ Yes ▶ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

R MICHAEL SORRELLS
PRESIDENT AND CEO
Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶ N/A

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Inventory at beginning of year</td>
</tr>
<tr>
<td>2</td>
<td>Purchases</td>
</tr>
<tr>
<td>3</td>
<td>Cost of labor</td>
</tr>
<tr>
<td>4a</td>
<td>Additional section 263A costs (attach schedule)</td>
</tr>
<tr>
<td>4b</td>
<td>Other costs (attach schedule)</td>
</tr>
<tr>
<td>5</td>
<td>Total. Add lines 1 through 4b</td>
</tr>
</tbody>
</table>

Enter here and on page 1, Part I, line 2. Enter here and on page 1, Part I, line 6, column (A) |

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

(1)  
(2)  
(3)  
(4)  

2. Rent received or accrued

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)</td>
</tr>
<tr>
<td>(b)</td>
<td>From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)</td>
</tr>
</tbody>
</table>

3a. Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
</tr>
</tbody>
</table>

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) |

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property

(1)  
(2)  
(3)  
(4)  

2. Gross income from or allocable to debt-financed property

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>Straight line depreciation (attach schedule)</td>
</tr>
<tr>
<td>(b)</td>
<td>Other deductions (attach schedule)</td>
</tr>
</tbody>
</table>

3. Deductions directly connected with or allocable to debt-financed property

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</td>
</tr>
<tr>
<td>(b)</td>
<td>Average adjusted basis of or allocable to debt-financed property (attach schedule)</td>
</tr>
<tr>
<td>(c)</td>
<td>Column 4 divided by column 5</td>
</tr>
<tr>
<td>(d)</td>
<td>Gross income reportable (column 2 x column 6)</td>
</tr>
<tr>
<td>(e)</td>
<td>Allocable deductions (column 6 x total of columns 3(a) and 3(b))</td>
</tr>
</tbody>
</table>

Totals |

Total dividends-received deductions included in column 8 |

Form 990-T (2016)
### Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations

<table>
<thead>
<tr>
<th>Exempt Controlled Organizations</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of controlled organization</td>
<td>Employer identification number</td>
<td>Net unrelated income (loss) (see instructions)</td>
</tr>
<tr>
<td>Part of column 4 that is included in the controlling organization’s gross income</td>
<td>Deductions directly connected with income in column 5</td>
<td></td>
</tr>
</tbody>
</table>

#### Nonexempt Controlled Organizations

<table>
<thead>
<tr>
<th></th>
<th>Taxable Income</th>
<th>Net unrelated income (loss) (see instructions)</th>
<th>Total of specified payments made</th>
<th>Part of column 9 that is included in the controlling organization’s gross income</th>
<th>Deductions directly connected with income in column 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Totals

<table>
<thead>
<tr>
<th>Nonexempt Controlled Organizations</th>
<th>Taxable Income</th>
<th>Net unrelated income (loss) (see instructions)</th>
<th>Total of specified payments made</th>
<th>Part of column 9 that is included in the controlling organization’s gross income</th>
<th>Deductions directly connected with income in column 10</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

#### Income From Periodicals Reported on a Consolidated Basis

<table>
<thead>
<tr>
<th>Part I Income From Periodicals Reported on a Consolidated Basis</th>
<th>(see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of periodical</td>
<td>Gross advertising income</td>
</tr>
<tr>
<td>(1) NONPROFIT</td>
<td></td>
</tr>
<tr>
<td>(2) KNOWLEDGE</td>
<td></td>
</tr>
<tr>
<td>(3) MATTERS</td>
<td>13,705.</td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
</tbody>
</table>

### Totals

<table>
<thead>
<tr>
<th>Part I Income From Periodicals Reported on a Consolidated Basis</th>
<th>(see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(carry to Part II, line (5))</td>
<td>13,705.</td>
</tr>
</tbody>
</table>
### Part II Income From Periodicals Reported on a Separate Basis

(For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Totals from Part I  
13,705  15,346  0.

Totals, Part II (lines 1-5)  
13,705  15,346  0.

### Schedule K - Compensation of Officers, Directors, and Trustees  (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>1. Name</th>
<th>2. Title</th>
<th>3. Percent of time devoted to business</th>
<th>4. Compensation attributable to unrelated business</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td>%</td>
<td></td>
</tr>
</tbody>
</table>

Total. Enter here and on page 1, Part II, line 14  
0.
<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>TAX PREPARATION FEES</td>
<td>500.</td>
</tr>
</tbody>
</table>

TOTAL TO FORM 990-T, PAGE 1, LINE 28 | 500.   |
<table>
<thead>
<tr>
<th>TAX YEAR</th>
<th>LOSS SUSTAINED</th>
<th>LOSS PREVIOUSLY APPLIED</th>
<th>LOSS REMAINING</th>
<th>AVAILABLE THIS YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/31/14</td>
<td>1,725.</td>
<td>0.</td>
<td>1,725.</td>
<td>1,725.</td>
</tr>
<tr>
<td>12/31/15</td>
<td>11,936.</td>
<td>0.</td>
<td>11,936.</td>
<td>11,936.</td>
</tr>
</tbody>
</table>

NOL CARRYOVER AVAILABLE THIS YEAR

13,661. 13,661.
Form 8868  
(Rev. January 2017)  

### Application for Automatic Extension of Time To File an Exempt Organization Return

**File a separate application for each return.**

**Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Type or print**

- **Name of exempt organization or other filer, see instructions.**
- **Enter filer’s identifying number (EIN) or Social security number (SSN).**
- **Number, street, and room or suite no. If a P.O. box, see instructions.**
- **City, town or post office, state, and ZIP code. For a foreign address, see instructions.**
- **Enter the Return Code for the return that this application is for (file a separate application for each return).**

<table>
<thead>
<tr>
<th>Type or print</th>
<th>Name of exempt organization or other filer, see instructions.</th>
<th>Employer identification number (EIN) or Social security number (SSN)</th>
<th>Number, street, and room or suite no. If a P.O. box, see instructions.</th>
<th>City, town or post office, state, and ZIP code. For a foreign address, see instructions.</th>
<th>Enter the Return Code for the return that this application is for (file a separate application for each return)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NATIONAL COUNCIL OF NONPROFITS</strong></td>
<td><strong>52-1689643</strong></td>
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<tr>
<td><strong>1001 G STREET, NW, NO. 700E</strong></td>
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<td><strong>WASHINGTON, DC 20001</strong></td>
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</tbody>
</table>

Enter the Return Code for the return that this application is for (file a separate application for each return).  

**Application Is For**  
**Return Code**  
**Application Is For**  
**Return Code**

- Form 990 or Form 990-EZ  
- Form 990-BL  
- Form 4720 (individual)  
- Form 990-PF  
- Form 990-T (sec. 401(a) or 408(a) trust)  
- Form 990-T (trust other than above)

### Form 990 or Form 990-EZ

1. **Calendar year 2016** or  
2. **Tax year beginning** , and ending .

### Form 990-BL

1. **Tax year beginning** , and ending .

### Form 4720 (individual)

1. **Tax year beginning** , and ending .

### Form 990-PF

1. **Tax year beginning** , and ending .

### Form 990-T (sec. 401(a) or 408(a) trust)

1. **Tax year beginning** , and ending .

### Form 990-T (trust other than above)

1. **Tax year beginning** , and ending .

**3a.** If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

**3b.** If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

**3c.** Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2017)
Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer’s identifying number

Name of exempt organization or other filer, see instructions.

NATIONAL COUNCIL OF NONPROFITS  52-1689643

Number, street, and room or suite no. If a P.O. box, see instructions.

1001 G STREET, NW, NO. 700E

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

WASHINGTON, DC  20001

Enter the Return Code for the return that this application is for (file a separate application for each return)  0  7

Application Is For

Return Code Application Is For

Form 990 or Form 990-EZ  01 Form 990-T (corporation)  07

Form 990-BL  02 Form 1041-A  08

Form 4720 (individual)  03 Form 4720 (other than individual)  09

Form 990-PF  04 Form 5227  10

Form 990-T (sec. 401(a) or 408(a) trust)  05 Form 6069  11

Form 990-T (trust other than above)  06 Form 8870  12

1 I request an automatic 6-month extension of time until NOVEMBER 15, 2017, to file the exempt organization return for the organization named above. The extension is for the organization’s return for:

X calendar year 2016 or

 tax year beginning  , and ending  .

2 If the tax year entered in line 1 is for less than 12 months, check reason:

☐ Initial return  ☐ Final return  ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  3a $ 0.

3b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b $ 0.

3c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c $ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2017)