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DLN: 93493315003434

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

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

OMB No 1545-0047

2013

Open to Public Inspection

2025 BENJAMIN FRANKLIN PARKWAY	s No s No tions)
Name change	tions) domicile PA
Number and street (or P O box if mail is not delivered to street address) Room/suite	tions) domicile PA
Terminated Amended return Application pending F Name and address of principal officer MARGARET B ZMINDA 2025 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130 F Name and address of principal officer MARGARET B ZMINDA 2025 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130 H(a) Is this a group return for subordinates? Ye 1 Tax-exempt status Solic)(3) Solic)() () (insert no) 4947(a)(1) or 527 H(b) Are all subordinates Included? If "No," attach a list (see instruction of organization Corporation Trust Association Other Deducational Institution K Form of organization Corporation Trust Association Other Deducational Institution Briefly describe the organization's mission or most significant activities TO PROMOTE THE ADVANCEMENT OF EDUCATION AND THE APPRECIATION OF THE FINE ARTS AND HORTICU TO MAINTAIN AN ART GALLERY CONTAINING WORKS OF ANCIENT AND MODERN ART, AS WELL AS AN ARBORE Check this box F if the organization discontinued its operations or disposed of more than 25% of its net assets	tions) domicile PA
Amended return Application pending F Name and address of principal officer MARGARET B ZMINDA 2025 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130 H(a) Is this a group return for subordinates? Ye included? I Tax-exempt status 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527 I Website: WWW BARNESFOUNDATION ORG K Form of organization Corporation Trust Association Other DUCATIONAL INSTITUTION Briefly describe the organization's mission or most significant activities TO PROMOTE THE ADVANCEMENT OF EDUCATION AND THE APPRECIATION OF THE FINE ARTS AND HORTICU TO MAINTAIN AN ART GALLERY CONTAINING WORKS OF ANCIENT AND MODERN ART, AS WELL AS AN ARBORE 2 Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets	tions) domicile PA
Amended return Application pending City or town, state or province, country, and ZIP or foreign postal code PHILADELPHIA, PA 19130 F Name and address of principal officer MARGARET B ZMINDA 2025 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130 H(a) Is this a group return for subordinates? Ye subordinates? Ye H(b) Are all subordinates included? If "No," attach a list (see instruct If "No," attach a list (see ins	tions) domicile PA
F Name and address of principal officer MARGARET B ZMINDA 2025 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130 I Tax-exempt status	tions) domicile PA
MARGARET B ZMINDA 20 25 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130 H(b) Are all subordinates Y e included? If "No," attach a list (see instruct Website: ► WWW BARNESFOUNDATION ORG K Form of organization Corporation Trust Association Other ► EDUCATIONAL INSTITUTION L Year of formation 1922 M State of legals Part I Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE THE ADVANCEMENT OF EDUCATION AND THE APPRECIATION OF THE FINE ARTS AND HORTICU TO MAINTAIN AN ART GALLERY CONTAINING WORKS OF ANCIENT AND MODERN ART, AS WELL AS AN ARBORE 2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets	tions) domicile PA
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TO MAINTAIN AN ART GALLERY CONTAINING WORKS OF ANCIENT AND MODERN ART, AS WELL AS AN ARBORE Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets	
a 3 Namber of Voting members of the governing body (1 dic V1, mer 1d) 3	14
4 Number of independent voting members of the governing body (Part VI, line 1b)	14
5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	209
6 Total number of volunteers (estimate if necessary)	293
7a Total unrelated business revenue from Part VIII, column (C), line 12	302,149
b Net unrelated business taxable income from Form 990-T, line 34	-1,459
Prior Year Current \	
	,904,566
	,984,747
9 Program service revenue (Part VIII, line 2g)	,349,741
Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	,356,699
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	,595,753
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 0	0
14 Benefits paid to or for members (Part IX, column (A), line 4) 0	
	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines	,372,276
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	213,559
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	,372,276 213,559
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	,372,276 213,559 ,698,305
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	,698,305 ,284,140
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	,698,305 ,284,140
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	,698,305 ,284,140
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	,372,276 213,559 ,698,305 ,284,140 ,688,387
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 6,873,537 8 8 16a Professional fundraising fees (Part IX, column (A), line 11e) 752,904	,372,276 213,559 ,698,305 ,284,140 ,688,387 /ear

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

✓ Yes 厂No

Par	3 111	Statement of Check if Schedule			lishments o any line in this Pa	rt III	· · · · · ·
1	Briefl	y describe the orga	anızatıon's mıssı	ion			
						N OF THE FINE ARTS AND RN ART, AS WELL AS AN A	
2					rvices during the y	ear which were not listed or	
	If"Ye	s," describe these	new services or	n Schedule O			
3	servic	e organization ceases: es? s," describe these			t changes in how it	conducts, any program	
4	Descr expen	ribe the organizatio	n's program serv c)(3) and 501(c	vice accomplishm)(4) organizations	are required to rep	three largest program serv port the amount of grants ar	
4a	COLLE TEMP AND A 50,00 THE C FOUN FOUR RECO FOUN FEATU COLLE 2012,	COUNDATION ENGAGES ECTION, INCLUDING PA ORARY EXHIBITION PRO AESTHETIC THEORIES O O VISITORS DURING THE COLLECTION, AS WELL A DATION HAS A ROBUST BOOKS UNDER DEVELO RDS AND DOCUMENTS DATION'S STUDENTS, I JRING A LIVING COLLECTECTION A PORTION OF	INTINGS, FRAMES, OGRAM IN 2013, PR OF ALBERT BARNES, HE RUN OF THE SHC AS THE HISTORY OF PUBLICATIONS PROPMENT THE FOUN TION RELATED TO TO TOCKETS AND OUTS CITON OF 3,000 RAIS THE COLLECITON OF Y IMPROVED THE O	WORKS ON PAPER, F ESENTING THE CONC AND AN EXHIBITION DOW THE FOUNDATION THE ORGANIZATION OGRAM, WHICH PUBLIDATION ALSO MAINTA THE HISTORY OF THE SIDE SCHOLARS AND IN RE PLANT SPECIES AN CARE EXPENSES REFL UALITY OF THE FACIL	URNITURE AND DECOR CLUSION OF ITS ARCHIV OF THE CONTEMPOARY OF CONDUCTS ONGOING AND ITS FOUNDERS A ISHED A CATALOGUE TO AINS AND OPERATES AN ORGANIZATION THE A RESEARCHERS IN ADD ID 31 "STATE CHAMPIO ECTS A PRO-RATA POR	ATIVE METALWORK IN ADDITION VALEXHIBITION ENTITLED ENSEMINY ARTIST, ELLSWORTH KELLY, WHIS SCHOLARSHIP AND RESEARCH OF SPART OF ITS COLLECTION CARE DO ACCOMPANY THE ELLSWORTH KIND ARCHIVE CONTAINING THE PAPER RCHIVE, AS WELL AS THE LIBRARITION, THE FOUNDATION MAINTAN" TREES IN 2013, 335 SPECIES	FINE AND DECORATIVE ARTS IN ITS , THE FOUNDATION CONTINUED ITS BLE, REGARDING THE COLLECTING ICH WAS VISITED BY APPROXIMATELY IN OBJECTS AND WORKS OF ART IN AND EDUCATION ACTIVITIES, THE IELLY EXHIBITION IN 2013, AND HAD ERS OF DR BARNES AND OTHER IES ARE MADE AVAILABLE TO THE INS A 12 ACRE ARBORETUM, WERE ADDED TO THE LIVING THE NEW BUILDING, OCCUPIED SINCE
4b	MEME THE A DEPR	OUNDATION'S ART GAL BERS A GALLERY SHOP BRT COLLECTION AND A	IS OPERATED IN CO ARBORETUM THE AF	ONNECTION WITH THI RBORETUM WAS NOT	YS PER WEEK, WITH VI E PUBLIC VISITATION A OPEN TO THE PUBLIC I) (Revenue SITATION IN 2013 OF 300,000 VIS ND SELLS REPRODUCTIONS, BOOI IN 2013 THE EXPESES REFLECTS THE FOUNDATION TO GREATLY IN	STORS, INCLUDING OVER 21,000 KS AND OTHER ITEMS RELATED TO A PRO-RATA SHARE OF THE
	(6-1-) (F	1 711 120) (D	244.050.)
4 c	PROG DISTR IN-CL APPRI PROG GROU ADDIT EDUC THE S	OUNDATION SPONSOR: RAM IN HORTICULTUR: RICT OF PHILADELPHIA, ASS LEARNING LED BY ECIATION AND REINFOI RAM SERVED APPROXII PIS (KINDERGARTEN TI TION, THE FOUNDATION ATION PROGRAM EXPE	E, AS WELL AS SPEC HAS DEVELOPED AI FOUNDATION EDUC RCES READING COM MATELY 7,500 PHILA HROUGH UNDERGR, N HAS DEVELOPED E NSES REFLECTS A P THE FACILITIES AVA	ERTIFICATE PROGRAM CIAL WORKSHOPS ANI N OUTREACH PROGRA CATORS WITH A STRU APREHENSION, MATH, ADELPHIA SCHOOL CH ADUATE PROGRAM) D COUCATIONAL FAMILY PRO-RATA SHARE OF	D EDUCATIONAL PUBIC AM TO KINDERGARTEN CTURED TOUR OF THE SCIENCE, HISTORY, A LILDREN IN 2013 THE FOURING THE ACADEMIC PROGRAMS, OFFERING THE DEPRECIATION OF	THROUGH EIGHTH GRADE PUBLIC FOUNDATION'S ART COLLECTION ND SOCIAL STUDIES, DEPENDING OUNDATION ALSO PROVIDES DOC YEAR WHICH SERVED AN ADDITI 6 89 PROGRAMS IN 2013 WHICH S THE NEW BUILDING, OCCUPIED S	RATE THREE-YEAR CERTIFICATE N COLLABORATION WITH THE SCHOOL C SCHOOL CLASSES THAT COMBINES , WHICH DEVELOPS STUDENTS' ART ON THE GRADE LEVEL, THIS CENT-LED TOURS FOR SCHOOL ONAL 2,500 STUDENTS IN 2013 IN
	(Code	<u> </u>) (Expenses \$	1,380,837	including grants of \$) (Revenue	\$ 62,169)
	THE F		TS NEW FACILITY IN			, ,	COSTS TO COMPLETE ADDITIONAL
4d		er program services enses \$		chedule O) including grants o	f \$) (Revenue \$	62,169)
4e	Tota	l program service e	xpenses ►	12,172,221			

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
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? <i>If "Yes," complete Schedule C, Part II</i>	4		N o
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part x^{*}	11e		Νo
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
1.5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L 6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
L 7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
L8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

G	Check of School of Contracts a vegence of note to any line in the Part V			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 86			
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
2	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
3	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
,				
	If "Yes," enter the name of the foreign country ►			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	2	5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g 		
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
,	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		

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

Check if Schedule O contains a response or note to any line in this Part VI							▽
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36	ection A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	La 14			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	Lb 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a busin other officer, director, trustee, or key employee?	• •	2	l	No
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management comp	by or under the direct	3		No
4	Did the organization make any significant changes to its governing documents since the			V	
_	filed?		4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization o	anization's assets? .	5		No
6	Did the organization have members or stockholders?		6		No
	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval bor persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	s undertaken during the			
а	The governing body?		8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, whorganization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No
Se	ection B. Policies (This Section B requests information about policies not re		eveni	ue Cod	e.)
	,	<u>, </u>		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		No
	If "Yes," did the organization have written policies and procedures governing the activ				
_			10b		
	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its	's exempt purposes?		Yas	
11a	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form?	's exempt purposes? governing body before filing	10b 11a	Yes	
11a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form?	's exempt purposes? governing body before filing	11a		
11a b 12a	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form?	's exempt purposes? governing body before filing		Yes	
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?	's exempt purposes? governing body before filing	11a		
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done.	's exempt purposes? governing body before filing	11a 12a	Yes	
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy?	's exempt purposes? governing body before filing rm 990 interests that could give ne policy? If "Yes," describe	11a 12a 12b	Yes Yes	
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done.	's exempt purposes? governing body before filing rm 990 interests that could give ne policy? If "Yes," describe	11a 12a 12b	Yes Yes	
11a b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy?	's exempt purposes? governing body before filing	11a 12a 12b 12c 13	Yes Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Ford Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review	's exempt purposes? governing body before filing	11a 12a 12b 12c 13	Yes Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Ford Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the	's exempt purposes? governing body before filing	11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Ford Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official	's exempt purposes? governing body before filing	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	's exempt purposes? governing body before filing	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or taxable entity during the year?	's exempt purposes? governing body before filing	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the In Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take is	's exempt purposes? governing body before filing	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
11a b 12a c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the In Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take sorganization's exempt status with respect to such arrangements?	's exempt purposes? governing body before filing	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the In Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take sorganization's exempt status with respect to such arrangements?	's exempt purposes? governing body before filing	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take sorganization's exempt status with respect to such arrangements?	's exempt purposes? governing body before filing	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this For Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the In Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take sorganization's exempt status with respect to such arrangements?	's exempt purposes? governing body before filing	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	

interest policy, and financial statements available to the public during the tax year

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

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

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

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

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

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

(A) (B) (C) (D) (E)										
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ecto	not box h an or/tr	change Highest compensated	ess er e)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) DR BERNARD C WATSON	1 00					À				
	1 00	х						0	0	0
CHAIRMAN (2) JOSEPH NEUBAUER	1 00									
VICE CHAIRMAN		×						0	0	0
(3) SHELDON M BONOVITZ ESQ	1 00									
TRUSTEE		×						0	0	0
(4) THE HONORABLE JACQUELINE F ALLEN	1 00	,,								
SECRETARY		Х						0	0	0
(5) STEPHEN J HARMELIN ESQ	1 00	х						0	0	0
TREASURER		_ ^						0	0	
(6) ANDRE V DUGGIN	1 00	×						0	0	0
TRUSTEE								Ŭ.	-	
(7) AILEEN KENNEDY ROBERTS	1 00	×						0	0	0
TRUSTEE										
(8) DR NEIL L RUDENSTINE	1 00	×						0	0	0
TRUSTEE (9) DR BRENDA T THOMPSON	1 00				_					
	1 00	×						0	0	0
TRUSTEE (10) RAJIV SAVARA	1 00									_
TRUSTEE (1/1/13-12/6/13)	100	x						0	0	0
(11) DONN G SCOTT	1 00									
TRUSTEE (1/1/13-12/6/13)		Х						0	0	0
(12) DR ERNEST C LEVISTER JR	1 00									
TRUSTEE		X						0	0	0
(13) DR KHALIL GIBRAN MUHAMMAD	1 00	V							0	0
TRUSTEE		Х						0	0	0
(14) THOMAS K WHITFORD	1 00	×						0	0	0
TRUSTEE										
(15) TORY BURCH	1 00	x						0	0	0
TRUSTEE										
(16) DANIEL DILELLA	1 00	×						0	0	0
TRUSTEE (17) DEREK A GILLMAN	40 00									
	40 00			х				346,189	0	15,660
EXECUTIVE DIRECTOR & PRES						<u> </u>				Form 990 (2013)

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) (D) (E) Position (do not check more than one box, unless person is both an officer and a director/trustee) (M) (D) (E) Reportable compensation compensation organization organization (M) (D) (E)								5	(F Estim amount (compen from	ated of other sation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)		organız and re organız	lated
(18) MARGARET B ZMINDA	40 00			х				179,694		0		21,680
EXECUTIVE VP, CFO AND COO (19) SARA GEELAN	40 00									+		
GENERAL COUNSEL AND ASST SECRETARY	40 00			х				88,353		0		7,690
(20) DIANA D DUNCAN	40 00									+		
SR VP, EXTERNAL AFFAIRS					Х			261,483		0		18,748
(21) JAN ROTHSCHILD	40 00				х			199,741		0		22,512
SVP FOR COMMUNICATIONS (22) WILLIAM W MCDOWELL	40 00									+		
SR BUILDING PROJ EXEC						Х		192,644		0		11,358
(23) LINDA SCRIBNER PASKIN	40 00					l ,		102.102				F 000
DIRECTOR OF MAJOR GIFTS						Х		182,193		0		5,989
(24) MARK R MILLS	40 00					x		113,334		0		10,412
SR DIR OF EXT AFFAIRS FOR								113,331				10,112
(25) STEVEN BRADY DIRECTOR OF INFORMATION TECHNOLOGY	40 00					x		108,651		o		17,217
(26) VINCENT D'ANTONIO SNR DIR OF OPERATIONS & GROUNDS	40 00					х		110,208		0		2,555
								<u> </u>		\perp		
1b Sub-Total			•	•		<u> </u>						
c Total from continuation sheets to Part				•				1,782,490	(\perp		133,821
d Total (add lines 1b and 1c)						<u> </u>				<u>′</u>		133,021
Total number of individuals (including be \$100,000 of reportable compensation f				ed ar	oove	e) wno	rec	eived more than				
									_		Yes	No
3 Did the organization list any former office on line 1a? <i>If "Yes," complete Schedule J</i>						yee, o			d employee	3		No
4 For any individual listed on line 1a, is the organization and related organizations g									om the			
ındıvıdual			•	•	•	•	•			4	Yes	
5 Did any person listed on line 1a receive services rendered to the organization?		-						_		5		No

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
ALLIED BARTON SECURITY PO BOX 828854 PHILADELPHIA PA 19182	SECURITY SERVICES	1,455,051
LF DRISCOLL 9 PRESIDENTIAL BLVD BALA CYNWYD PA 19004	CONSTRUCTION AND MANAGEMENT	684,014
ELLIOTT LEWIS 2900 BLACK LAKE PLACE PHILADELPHIA PA 19154	FACILITIES MANAGEMENT	475,162
TEAM CLEAN 4747 SOUTH BROAD STREET BUILDING 1 PHILADELPHIA PA 19112	JANITORIAL SERVICES	404,806
THE LUKENS GROUP 2800 SHIRLINGTON ROAD 9TH FLOOR ARLINGTON VA 222063613	CONSULTING SERVICES	269,373

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 ►25

Part V	/ † † †	Statement o			Line on the Post VIII						
		Check If Schedi	<u>ule O contains a respor</u>	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
s	1a	Federated cam	paigns 1a								
s, Grants Amounts	ь	Membership du	es 1b								
, E	c	Fundraising eve	ents 1 c								
	d	Related organiz	ations 1d								
ons, Gift Similar	e	Government grants	s (contributions) 1e	37,315							
Contributions, and Other Sim	f f	All other contribution	ons, gifts, grants, and 1f	8,867,251							
tributio Other		sımılar amounts no	ot included above								
r di	g	1a-1f \$	ons included in lines								
Con	h	Total. Add lines	s 1a-1f	· · · •	8,904,566						
<u> </u>				Business Code							
Program Serwce Revenue	2a	ADMISSION, AUDIO	O RENTALS	900099	5,739,408	5,739,408					
<u> </u>	b	EDUCATION	_	611600	214,059	214,059					
¥5e	C	PUBLICATIONS		900004	31,280	31,280					
Š	d e		_								
ran	f	All other progra	am service revenue								
्रे				_							
	g 3		ome (including dividen		5,984,747						
		and other simila	aramounts)	▶	1,187,434			1,187,434			
	4		tment of tax-exempt bond	proceeds							
	5	Royalties	(ı) Real	(II) Personal							
	6a	Gross rents	(I) Real	(II) I CISOIIII							
	b	Less rental expenses									
	С	Rental income or (loss)									
	d	, ,	me or (loss)								
			(ı) Securities	(II) Other							
	7a	Gross amount from sales of	13,131,574								
		assets other than inventory									
	b	Less cost or other basis and	12,969,267								
	c	sales expenses Gain or (loss)	162,307								
	d	Net gain or (los	s)		162,307			162,307			
	8a	Gross income f events (not inc									
Other Revenue		\$	reported on line 1c)								
ŗ.			а								
₽			penses b								
0	C 9a		(loss) from fundraising rom gaming activities	events p-							
	_	See Part IV, lin	e 19 a								
	b c		penses b (loss) from gaming acti	vities - •							
		Gross sales of returns and allo	inventory, less owances .	·							
	 	lace cost of a	a oods sold b	2,205,027							
			(loss) from sales of inve	945,041 entory p -	1,259,986		302,149	957,837			
		Miscellaneous		Business Code							
	11a	MISCELLANEC	DUSINCOME	900099	62,169	62,169					
	Ь	LICENSING & MERCHANDIS	ING	900099	34,544			34,544			
	С	ALL CHANDIS									
	d	All other reven	ue								
	e	Total. Add lines	s 11a-11d	🕨	96,713						
	12	Total revenue.	See Instructions .	🛌	17,595,753	6,046,916	302,149	2,342,122			

	770 (2013)				Page 10
	Statement of Functional Expenses	. k.l		1-1	
ectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
	Check if Schedule O contains a response or note to any line in this		(B)	(c)	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,707,500		1,115,341	592,159
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,394,037	2,786,220	1,878,969	728,848
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	89,127	50,711	28,440	9,976
9	Other employee benefits	662,826	375,139	182,209	105,478
10	Payroll taxes	518,786	248,275	182,743	87,768
11	Fees for services (non-employees)				
а	Management				
b	Legal	141,545	26,214	115,331	
С	Accounting	49,245		49,245	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	213,559			213,559
f	Investment management fees	286,666		286,666	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	3,822,522	2,387,414	965,936	469,172
12	Schedule O)	369,499	369,499	903,930	409,172
13	Office expenses	681,576	107,569	337,816	236,191
14	Information technology	237,902	132,256	· · ·	34,529
1 5	Royalties	237,902	132,230	71,117	34,329
16	Occupancy	1,866,386	927,724	693,656	245,006
10 17	Travel	128,647	59,076	52,917	16,654
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	120,047	39,070	32,917	10,034
19	Conferences, conventions, and meetings	23,509	8,406	10,468	4,635
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,566,017	3,993,162	1,572,855	
23	Insurance	485,442	202,284	283,158	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	CREDIT CARD FEES	351,382	257,504	29,485	64,393
b	MISCELLANEOUS	262,497	125,341	46,031	91,125
С	SUPPLIES	255,673	115,427	121,845	18,401
d	EQUIPMENT RENTAL	169,797		169,797	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	23,284,140	12,172,221	8,194,025	2,917,894
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

reli	τX	Check if Schedule O contains a response or note to any line i	n this Pa	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			106,175	1	296,593
	2	Savings and temporary cash investments			13,402,671	2	14,815,897
	3	Pledges and grants receivable, net			21,103,546	3	12,839,942
	4	Accounts receivable, net	59,218	4	61,938		
Assets	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete Schedule L	f		5		
	6	Loans and other receivables from other disqualified persons ($4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedule	uting employers		6		
	7	Notes and loans receivable, net		7			
₹	8	Inventories for sale or use		713,998		860,260	
	9	Prepaid expenses and deferred charges			347,118		677,483
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	140,772,059	3 11,1 13		511,135
	ь	·	10b	17,789,949	127,955,276	10c	122,982,110
	11	Investments—publicly traded securities	40,141,807	11	48,661,474		
	12	Investments—other securities See Part IV, line 11		12			
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			6,667,127	15	6,607,423
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			210,496,936		207,803,120
	17	Accounts payable and accrued expenses	2,815,952		2,181,001		
	18	Grants payable	_,_,_,	18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability Complete Part IV of Sc		21			
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua	ctors, tr			21	
Liabiliti		persons Complete Part II of Schedule L				22	
ä	23	Secured mortgages and notes payable to unrelated third part			23		
	24	Unsecured notes and loans payable to unrelated third parties			24		
	25	Other liabilities (including federal income tax, payables to reand other liabilities not included on lines 17-24) Complete P					
		D				25	
	26	Total liabilities. Add lines 17 through 25			2,815,952	26	2,181,001
ces		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	√ ⊽ and	complete			
lan I	27	Unrestricted net assets	139,094,753	27	133,639,945		
Ba	28	Temporarily restricted net assets	34,873,564	28	25,400,841		
덛	29	Permanently restricted net assets		33,712,667	29	46,581,333	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here ►	┌─ and			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
AS	32	Retained earnings, endowment, accumulated income, or other	r funds			32	
≱	33	Total net assets or fund balances			207,680,984	33	205,622,119
Z	34	Total liabilities and net assets/fund balances			210,496,936	34	207,803,120
		•	Total liabilities and net assets/fund balances				

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				r
1	Total revenue (must equal Part VIII, column (A), line 12)	1		17,!	595,753
2	Total expenses (must equal Part IX, column (A), line 25)	2		23,	284,140
3	Revenue less expenses Subtract line 2 from line 1	3		-5,6	588,387
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		207,6	580,984
5	Net unrealized gains (losses) on investments	5			529,522
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		205,6	522,119
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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As Filed Data -

DLN: 93493315003434

Public Charity Status and Public Support

SCHEDULE A (Form 990 or 990EZ)

Department of the

Internal Revenue Service

Treasury

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

▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

OMB No 1545-0047

Open to Public **Inspection**

Name	of	the	orga	niza	tion
HE BA	RNE	S FC	UNDA	NOITA	l

Employer identification number

	rt I			blic Charity Sta						<u>nstructions</u>	<u> </u>
	_		-	te foundation becaus	•		-	•	-		
1			-	on of churches, or a				ection 1/0(i))(1)(A)(I).		
2	고			in section 170(b)(1				470(1)(4)	(.) ()		
3	<u> </u>			perative hospital se						434434***	
4	1			h organization operat	tea in conjun	ction with a	nospital des	cribed in sec	Tion 1/0(B)(1)(A)(III). E	nter the
5	Г	Anora	anızatıon op	ty, and state erated for the benefi	t of a college	or universi	tv owned or o	perated by a	a governmen	tal unit desc	ribed in
	•			(A)(iv). (Complete P			,	'	3		
6	Г	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7	Ē			at normally receives	=					rom the gen	eral public
	_	describ	ed in sectio	on 170(b)(1)(A)(vi).	(Complete F	art II)		_		_	·
8				described in section							
9	ı			at normally receives							
				ities related to its e							
		•		oss investment inco				•		tax) from bu	isinesses
	_			ganızatıon after June 							
10	<u> </u>			ganızed and operated							
11	Г			ganized and operated ly supported organiz							
			•	bes the type of supp				•		ee section s	os(u)(s). eneck
				b						on-functiona	lly integrated
е	Γ		_	ox, I certify that the	_		•			•	•
				on managers and ot	her than one	or more pub	olicly support	ed organizat	tions describ	ed in sectioi	n 509(a)(1) or
f			1 509(a)(2) Irganization	received a written de	etermination	from the IR	Sthatitisa	Type I Typ	e II orTvne	III supporti	ing organization
•			this box	received a miceen a	ccommucion		o chache io a	. , pc 1, . , p	c 11, or . , pc	III Support	ту отуати <u>г</u> астоп,
g				2006, has the organ	ızatıon accep	oted any gift	or contributi	on from any	of the		
			ng persons?	rectly or indirectly o	controls auth	eralone ort	together with	nercone de	scribed in (ii)	•	Yes No
				governing body of th			_	persons de.	seribed iii (ii)	11g	
		-		er of a person descr		_				11g	
				lled entity of a perso			above?			11g	
h				ng information about						[5	
				J	• •	J	. ,				
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notıfy	(vi) Is	the	(vii) A mount of
	suppoi			organization	organizati		the organi		organizat		monetary
0	rganiz	ation		(described on	col (i) lis		in col (i) o	'	col (i) org		support
lines 1- 9 above your governing support? in the U.S.? or IRC section document?											
(see											
				instructions))	Yes	No	Yes	No	Yes	No	1
									-	<u> </u>	
Tota	ī								1		

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ □
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions								
Facts And Circumstances Test								
Retu	ırn Reference	Explanation						
		Schodulo A / Form 0	000 er 000 E7) 201					

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493315003434

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

nal Revenue Service	and its instruct	ions is at www.irs.gov/10riii990.		Inspection
ame of the organiza HE BARNES FOUNDATION			Employer identifi	cation number
E Britines I Combridge			23-6000149	
rt I Organiz	ations Maintaining Donor Adv	ised Funds or Other Similar F		ts. Complete if the
organizat	tion answered "Yes" to Form 990	· · · · · · · · · · · · · · · · · · ·	_	
		(a) Donor advised funds	(b) Funds and	d other accounts
Total number at e	nd of year			
	outions to (during year)			
	from (during year)			
Aggregate value a	•			
	ion inform all donors and donor adviso anization's property, subject to the or	ors in writing that the assets held in don ganization's exclusive legal control?	nor advised	┌ Yes ┌ No
used only for cha		onor advisors in writing that grant funds it of the donor or donor advisor, or for a		┌ Yes ┌ No
		the organization answered "Yes" t	to Form 990, Part	IV. line 7.
	nservation easements held by the org			,
	of land for public use (e g , recreation		n historically importa	nt land area
□ Protection of	natural habitat	☐ Preservation of a	certified historic stru	ıcture
☐ Preservation	of open space			
Complete lines 2	a through 2d if the organization held a	qualified conservation contribution in t	the form of a conserv	ation
easement on the	last day of the tax year			
			Held at th	e End of the Year
	onservation easements		2a	
	stricted by conservation easements		2b	
	rvation easements on a certified histo	, ,	2c	
historic structure	rvation easements included in (c) acq Isted in the National Register		2d	
Number of conse	rvation easements modified, transferr	ed, released, extinguished, or terminate	ed by the organizatio	n during
the tax year 🟲				
Number of states	where property subject to conservat	ion easement is located ►		
	ation have a written policy regarding t se conservation easements it holds?	the periodic monitoring, inspection, hand	dling of violations, ai	nd Yes No
Staff and volunted	er hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments during the yea	r
A mount of expens	— ses incurred in monitoring, inspecting	, and enforcing conservation easement	s during the year	
► \$				
Does each conse and section 170(d) above satisfy the requirements of sec	ction 170(h)(4)(B)(ı)	┌ Yes ┌ No
balance sheet, ar		nservation easements in its revenue and e footnote to the organization's financial ents		
	ations Maintaining Collection of the organization answered "Y	s of Art, Historical Treasures, es" to Form 990, Part IV, line 8.	or Other Simila	r Assets.
works of art, histo	orical treasures, or other similar asse	16 (ASC 958), not to report in its reveits held for public exhibition, education, o its financial statements that describe	or research in furthe	
If the organizatio works of art, histo	n elected, as permitted under SFAS 1	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statement and balar	
(i) Revenues inc	luded in Form 990, Part VIII, line 1		► \$	
	/ led in Form 990, Part X			5,775,386
If the organizatio	n received or held works of art, histor	ical treasures, or other similar assets fo 116 (ASC 958) relating to these items	or financial gain, prov	
-	ed in Form 990, Part VIII, line 1	<u> </u>		
Assets included i	ın Form 990, Part X		► \$	

Part	Organizations Maintaining Co	llections of Art,	, Hist	torical	Treas	ures, or O	the	r Similar Ass	sets (c	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ds, ch	eck any	of the fo	llowing that a	re a	significant use	of its	
а	Public exhibition		d	┌ Loa	an or ex	change progr	ams			
b	Scholarly research		e	▽ ot	her EDU	JCATION				
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and explai	ın how	they fur	ther the	organızatıon	's ex	empt purpose II	า	
5	During the year, did the organization solicit of								- ,,	
Dar	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to the								Yes	✓ No
Fell	Part IV, line 9, or reported an an					ili aliswelet	J I	es to roilli a	<i>3</i> 0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	for contr	ıbutıons	or other ass	ets	not 「	_ Yes	Г No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ıng table		_				
						-		Am	ount	
с	Beginning balance					-	1c			
d	Additions during the year					-	1d			
e	Distributions during the year					⊢	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					Г	Yes	Г No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	nation h	as been	provided in F	art	XIII		<u> </u>
Pa	rt V Endowment Funds. Complete						_			
1-	Beginning of year balance	(a)Current year 36,075,517	(b)	23,985,5		1wo years back 8,241,195	+ • •	Three years back 3,718,087	(e)Four y	7ears back 3,607,301
1a b	Contributions	12,868,666		10,629,4		16,555,338	-	4,118,500		224,833
c	Net investment earnings, gains, and losses	12,000,000		10,023,		10,000,000	\vdash	.,110,000		
		4,109,378		2,682,8	331	40,742		700,433		20,820
d	Grants or scholarships						_			
e	Other expenditures for facilities and programs	1,685,942		1,222,3	308	851,750		295,825		134,867
f	Administrative expenses	51,367,619		36,075,5	517	23,985,525		8,241,195		3,718,087
g	End of year balance	· · ·					<u> </u>	0,241,193		3,710,007
2	Provide the estimated percentage of the curr	-	e (line	e 1g, col	umn (a))	held as				
а	Board designated or quasi-endowment	0 %								
b	Permanent endowment ► 90 680 %									
С	Temporarily restricted endowment ► 9 3 The percentages in lines 2a, 2b, and 2c show	20 % uld equal 100%								
За	Are there endowment funds not in the posses	ssion of the organiza	ation t	hat are h	ield and	admınıstered	for	the		
	organization by (i) unrelated organizations							3a(i	Yes i) Yes	No
	(ii) related organizations						•			No
b	If "Yes" to 3a(II), are the related organization		on S	 chedule	R?		٠.	3b		1
4	Describe in Part XIII the intended uses of th	e organization's end	dowme	ent funds						
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		he or	ganızat	ion ans			Form 990, Pa	rt IV, l	ine
	Description of property			(a) Cost basıs (ınv		(b) Cost or ot basis (other		(c) Accumulated depreciation	(d) Bo	ook value
1a	Land					176	,389			176,389
b	Buildings					136,024	,822	14,716,412	1.	21,308,410
c	Leasehold improvements									
d	Equipment					602	,938	334,534		268,404
						3,967	,910	2,739,003		1,228,907
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part X	(, colui	mn (B), lı	ne 10(c)	.)			1.	22,982,110
								Schedule D	(Form 9	990) 2013

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

23,284,140

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	er Ret	urn Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	22,023,621
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII) 2d 945,041		
e	Add lines 2a through 2d	2e	4,714,534
3	Subtract line 2e from line 1	3	17,309,087
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		: , ; :
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	286,666
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	17,595,753
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per R	<u> </u>
1	If the organization answered 'Yes' to Form 990, Part IV, line 12a.	1	24.002.406
_	Total expenses and losses per audited financial statements	-	24,082,486
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	1,085,012
3	Subtract line 2e from line 1	3	22,997,474
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	286.666

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . .

Return Reference	Explanation
PART III, LINE 1A	THE FOUNDATION OWNS A COLLECTION OF PAINTINGS, SCULPTURES, ANTIQUES AND OTHER OBJECTS OF ART SUBSTANTIALLY ALL OF THE COLLECTION OBJECTS WERE DONATED TO THE FOUNDATION BY ITS FOUNDER AND ARE RECORDED AT A \$1 NOMINAL VALUE IN ACCORDANCE WITH A RESOLUTION OF THE BOARD OF TRUSTEES THE FOUNDATION HAS DETERMINED THAT IT IS NOT PRACTICAL TO ESTABLISH A FAIR VALUE OF THE FOUNDER'S ORIGINAL CONTRIBUTION BECAUSE RECORDS OF THE FAIR VALUE AT THE DATE OF THE CONTRIBUTION ARE UNRELIABLE OR DO NOT EXIST
PART III, LINE 4	THE FOUNDATION'S COLLECTIONS INCLUDE WORKS OF ANCIENT AND MODERN ART AND A SIGNIFICANT COLLECTION OF LIVING SPECIMENS OF TREES, PLANTS AND FLOWERS THE WORKS OF ART THAT ARE DISPLAYED IN THE FOUNDATION'S GALLERY ARE AVAILABLE FOR VISITATION BY THE PUBLIC AND ARE ALSO USED TO CONDUCT EDUCATIONAL ACTIVITIES TO TEACH THE PRINCIPLES OF ART APPRECIATION ESTABLISHED BY ITS FOUNDER THE LIVING COLLECTIONS ARE USED IN THE FOUNDATION'S PROGRAMS TO TEACH PRICIPLES OF AESTHETIC APPEAL OF PLANTS COMBINED WITH A BASE IN BOTANY, HORTICULTURE AND LANDSCAPE DESIGN
PART V, LINE 4	THE INCOME FROM THE FOUNDATION'S PERMANENTLY RESTRICTED ENDOWMENT FUNDS ARE INTENDED TO SUPPORT THE FOUNDATION'S PROGRAM OF COLLECTIONS AND COLLECTION CARE, EDUCATION AND UNRESTRICTED OPERATING COSTS
PART X, LINE 2	THE FOUNDATION IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE IN ADDITION, THE FOUNDATION QUALIFIES FOR CHARITABLE CONTRIBUTION DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES THE FOUNDATION PAID NET UNRELATED BUSINESS INCOME TAXES OF \$7,214 IN 2013 AND \$0 IN 2012 MANAGEMENT HAS EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS CONSEQUENTLY, NO ACCRUAL FOR INTEREST AND PENALTIES WAS DEEMED NECESSARY FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012 THE FOUNDATION FILES INCOME TAX RETURNS IN THE US FEDERAL JURISDICTION GENERALLY, THE FOUNDATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE US FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2010
PART XI, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 945,041
PART XI, LINE 4B - OTHER ADJUSTMENTS	INVESTMENT EXPENSE 286,666
PART XII, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 945,041

Part XIIII Supplemental:	Information (continued)	
Return Reference	Explanation	
PART XII, LINE 4B - OTHER ADJUSTMENTS	INVESTMENT EXPENSE 286,666	

Schedule D (Form 990) 2013

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DLN: 93493315003434

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

SCHEDULE E

(Form 990 or 990-EZ)

Schools

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

	ie of the organization BARNES FOUNDATION	Employer identification	n nun	nber	
111111111111111111111111111111111111111		23-6000149			
Pa	rt I			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in in other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student add				
_	programs, and scholarships?		2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broade the period of solicitation for students, or during the registration period if it has no solicitation pro that makes the policy known to all parts of the general community it serves? If "Yes," please des	gram, ın a way			
	please explain If you need more space use Part II	-	3	Yes	
4	Does the organization maintain the following?				
	Records indicating the racial composition of the student body, faculty, and administrative staff?	-	4a	Yes	
ı	b Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes	
•	Copies of all catalogues, brochures, announcements, and other written communications to the pu with student admissions, programs, and scholarships?	blic dealing	4 c	Yes	
•	Copies of all material used by the organization or on its behalf to solicit contributions?	L	4d	Yes	
5	Does the organization discriminate by race in any way with respect to				
ā	a Students' rights or privileges?	Ļ	5a		Νo
ı	b Admissions policies?	_	5b		Νo
•	Employment of faculty or administrative staff?	_	5c		No
•	Scholarships or other financial assistance?	-	5d		Νo
•	e Educational policies?	-	5e		Νo
	f Use of facilities?	-	5f		No
ģ	g Athletic programs?	-	5g		No
I	h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		5h		No
_	- Dear the comment of the control of				
	a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended?	-	6a 6b	Yes	Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Pa	_	_	V s =	
	or her 1736 75 50, 1575 2 6 5 507, covering racial hondiscinning don't it into, explain on ra		7	Yes	

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also complete this part to provide any other additional information (see instructions)

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	ON NOVEMBER 12, 2010, THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES OF THE BARNES FOUNDATION FORMALLY REAFFIRMED THE FOUNDATION'S COMMITMENT TO PROVIDING EQUAL OPPORTUNITIES AND A POLICY OF NONDISCRIMINATION ON THE BASIS OF RACE, COLOR, SEX, SEXUAL ORIENTATION, GENDER IDENTITY, RELIGION, CREED, NATIONAL OR ETHNIC ORIGIN, CITIZENSHIP STATUS, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER LEGALLY PROTECTED CLASS STATUS IN THE ADMINISTRATION OF ITS EDUCATIONAL PROGRAM ADMISSIONS, FINANCIAL AID, OR ANY OTHER BARNES FOUNDATION-ADMINISTERED EDUCATIONAL ACTIVITY OR RELATED EMPLOYMENT PRACTICES THIS POLICY HAS BEEN PUBLICLY DISSEMINATED AND PUBLICIZED IN BARNES FOUNDATION MATERIALS, AS APPROPRIATE, TO ALL COMMUNITIES SERVED BY THE BARNES FOUNDATION
SCHEDULE E, PART I, LINE 6	THE ORGANIZATION RECEIVES GRANTS FROM THE PENNSY LVANIA COUNCIL ON THE ARTS FOR \$37,135

Schedule E (Form 990 or 990-EZ) 2013

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DLN: 93493315003434

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Internal Revenue Service

Fundraising or Gaming Activities Department of the Treasury

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Supplemental Information Regarding

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

Open to Public Inspection

	e of the organization BARNES FOUNDATION					Employer iden	tification number
76	BARNES FOUNDATION					23-6000149	
'a		tivities. Complete s are not required			on answered "Yes" to part.	o Form 990, Part IV,	line 17.
	Indicate whether the organ	nization raised funds t	nrough ar	ny of the f	ollowing activities Che	ck all that apply	
3	Mail solicitations			e	Solicitation of non-	government grants	
b	✓ Internet and email sol	ıcıtatıons		f	☐ Solicitation of gove	ernment grants	
С	Phone solicitations			g	Special fundraising	g events	
d	In-person solicitations	S					
а	Did the organization have or key employees listed in						┌ Yes ┌ N
b	If "Yes," list the ten highe to be compensated at leas			fundraıseı	rs) pursuant to agreeme	nts under which the fur	ndraiser is
(i) Name and address of individual	(ii) Activity	fundrais) Dıd ser have	(iv) Gross receipts from activity	(v) A mount paid to (or retained by)	(vi) A mount paid to (or retained by)
	or entity (fundraiser)			ody or rol of		fundraiser listed in col (i)	organization
				utions?			
		PROVIDES DATA	Yes	No			
1	THE LUKENS GROUP	BASE					
	2800 SHIRLINGTON	CONSULTING FOR		No	293,547	269,373	24,174
	ROAD 9TH FLOOR	DIRECT MAIL, TELEPHONE AND				,	,
	ARLINGTON, VA 22206						
2	SD&A TELESERVICES	PROVIDES DATA BASE					
	INC	CONSULTING FOR					
	5757 W CENTURY BLVD	TELEPHONE		No	33,315	21,686	11,629
	LOS ANGELES, CA 90045						
3							
4							
5							
6							
7							
8							
9							
0							
ota	l			.	326,862	291,059	35,803
}	List all states in which the registration or licensing	organization is regist	ered or li	censed to	solicit contributions or	has been notified it is	exempt from
	- 	DA .V.A					
. , l	DC, FL, IL, MA, MD, NJ, NY	, r A , v A					

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribut	ion answered "Yes" to tions and gross income	Form 990, Part IV, li on Form 990-EZ, lin	ne 18, or reported es 1 and 6b. List
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	(-),
Revenue	1	Gross receipts				
eVe	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .				
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()
	11	Net income summary Subtract li	ne 10 from line 3, colum	n (d)		
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
<u>Ф</u>		\$13,000 OH FORM 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c)
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	✓ Yes % ✓ No %	Г Yes% Г Nо	☐ Yes	
	7	Direct expense summary Add lines	s 2 through 5 in column	(d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)		
9	Ent	er the state(s) in which the organiza	ition operates gaming ac	ctivities		
а		the organization licensed to operate				. Fyes Fno
b	If"	No," explain				
10a b		re any of the organization's gaming l Yes," explain				

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name ▶					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	E mployee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	∕ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u>I</u>	<u> </u>		rm 990 or 990-	7) 2012

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

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

Open to Public Inspection

Name of the organization THE BARNES FOUNDATION

Employer identification number

23-6000149

6 I	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence		Yes	No
6 I	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Travel for companions Payments for business use of personal residence			
2 [Travel for companions Payments for business use of personal residence			i
2 [
2 [C + 1			
2 [Tax idemnification and gross-up payments F Health or social club dues or initiation fees			
2 [Discretionary spending account Personal services (e g , maid, chauffeur, chef)			
	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		No
`	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
(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			
Г	☐ Compensation committee ☐ Written employment contract			
ŗ	☐ Independent compensation consultant ☐ Compensation survey or study			
Ī	Form 990 of other organizations Approval by the board or compensation committee			
	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a F	Receive a severance payment or change-of-control payment?	4a		No
b F	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c f	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
]	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5 F	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a T	The organization?	5a		No
Ь	Any related organization?	5b		No
]	If "Yes," to line 5a or 5b, describe in Part III			
	For persons listed in Form 990, Part VII, Section A, line $f 1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
a T	The organization?	6a		Νo
b A	Any related organization?	6b		No
]	If "Yes," to line 6a or 6b, describe in Part III			
	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
9	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		N.c.
9]	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)DEREK A GILLMAN EXECUTIVE DIRECTOR & PRES	(i) (ii)	290,439 0	55,750 0	0	0	15,660 0	361,849 0	0 0
(2)MARGARET B ZMINDA EXECUTIVE VP, CFO AND COO	(i) (ii)	179,694 0	0	0	5,769 0	15,911 0	201,374 0	0 0
(3)DIANA D DUNCAN SR VP, EXTERNAL AFFAIRS	(i) (ii)	221,483 0	40,000	0	16,559 0	2,189 0	280,231	0 0
(4)JAN ROTHSCHILD SVP FOR COMMUNICATIONS	(i) (ii)	199,741 0	0	0	6,491 0	16,021	222,253	0 0
(5)WILLIAM W MCDOWELL SR BUILDING PROJ EXEC	(i) (ii)	142,644 0	50,000 0	0	3,554 0	7,80 4 0	204,002	0
(6)LINDA SCRIBNER PASKIN DIRECTOR OF MAJOR GIFTS	(i) (ii)	162,193 0	20,000	0	4,94 6 0	1,043	188,182	0

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 1A	THESE PAYMENTS ARE RELATED TO THE PRESIDENT'S EMPLOYMENT CONTRACT

Schedule J (Form 990) 2013

DLN: 93493315003434

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Open to Public **Inspection**

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** THE BARNES FOUNDATION 23-6000149 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part III Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of (b) (d) Loan to (e)Original (f)Balance (i)Written (c) (g) In (h) ınterested Relationship Purpose of or from the principal due default? Approved agreement? with organization? amount person loan bν organization board or committee? Τо Yes Yes From No Yes No Total

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of assistance	(d) Type of assistance	(e) Purpose of assistance
			•	
			•	
			•	

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (b) Relationship (c) A mount of (d) Description of transaction (e) Sharing between interested transaction of organization's person and the revenues? organization Yes No (1) ARAMARK CORPORATION A TRUSTEE OF THE 397.307 THE BARNES FOUNDATION Νo BARNES FDTN HAS RETAINED ARAMARK SERVES AS CORP FOR VARIOUS FOOD CHAIRMAN OF THE SERVICES CONSISTENT BOARD OF ARAMARK WITH THE CONFLICT OF INTEREST POLICY ESTABLISHED BY THE BARNES FOUNDATION, THE INTERESTED PERSON WAS EXCLUDED FROM PARTICIPATION IN ANY AND ALL DISCUSSIONS REGARDING THE DECISION TO RETAIN ARAMARK CORP THE SELECTION OF ARAMARK CORP AS A FOOD SERVICE PROVIDER WAS MADE PURSUANT TO A COMPETITIVE BIDDING PROCESS LED BY AN INDEPENDENT CONSULTANT, AND APPROVED BY THE BOARD OF TRUSTEES, WITH THE INTERESTED PERSON RECUSED FROM PARTICIPATION PAYMENTS REFLECTED IN LINE 1 ABOVE CONSIST OF COMMISSIONS PAID TO THE BARNES FOUNDATION BY ARAMARK CORPORATION ON CATERING REVENUES (2) ARAMARK CORPORATION A TRUSTEE OF THE 229,545 TRANSACTIONS AND Νo BARNES FDTN PROCESS AS ABOVE SERVES AS PAYMENTS REFLECTED IN CHAIRMAN OF THE LINE 2 ABOVE CONSIST OF BOARD OF ARAMARK AMOUNTS PAID TO ARAMARK CORP BY BARNES FOUNDATION FOR CATERING AND RESTAURANT SERVICES

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference Explanation

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2013

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Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization THE BARNES FOUNDATION

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

23-6000149

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE FOUNDATION AMENDED ITS BY-LAWS TO ELIMINATE REFERENCES TO THE PROCESS BY WHICH THE FOUNDATION'S BOARD OF TRUSTEES WOULD GROW FROM 5 TO 15, AS THAT PROCESS HAD BEEN COMPLETED ADDITIONALLY, THE BY-LAWS WERE REVISED TO INCLUDE DESCRIPTIONS OF THE ROLES AND RESPONSIBILITIES OF SEVERAL STANDING COMMITTEES, INCLUDING AN AUDIT COMMITTEE, AND OF THE OFFICERS OF THE FOUNDATION FINALLY, THE REVISIONS INCLUDED UPDATES TO THE SECTIONS ON CONFLICTS OF INTEREST, AND LIMITATION OF LIABILITY AND INDEMNIFICATION OF TRUSTEES

Return Reference	Explanation
VI, SECTION B,	THE BARNES FOUNDATION 990 IS PREPARED BY AN INDEPENDENT FIRM AND A DRAFT IS PRESENTED TO THE EXECUTIVE VICE PRESIDENT, CFO AND COO (A MEMBER OF MANAGEMENT) FOR FINAL REVIEW THE 990 IS THEN FINALIZED BY THE INDEPENDENT FIRM AND THE BARNES FOUNDATION SUBMITS THE DRAFT 990 FOR REVIEW TO ALL BOARD MEMBERS PRIOR TO FILING AND THEN SUBMITS FORM 990 TO THE IRS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	IN ADDITION TO REQUIRING EACH TRUSTEE, OFFICER AND KEY EMPLOYEE TO MAKE A DISCLOSURE OF ANY POSSIBLE PERSONAL, FAMILIAL, OR BUSINESS RELATIONSHIP THAT COULD GIVE RISE TO A CONFLICT OF INTEREST OR THE APPEARANCE OF A CONFLICT OF INTEREST, THE FOUNDATION'S CONFLICT OF INTEREST POLICY ALSO REQUIRES THE DISCLOSURE OF ANY CHANGE OF CIRCUMSTANCE THAT WOULD GIVE RISE TO CONFLICTS CONCERNS MOREOVER, THE FOUNDATION HAS ADOPTED A WHISTLEBLOWER POLICY DESIGNED TO ENCOURAGE PROMPT DISCLOSURE BY TRUSTEES, OFFICERS AND EMPLOYEES OF ANY UNLAWFUL OR IMPROPER BEHAVIOR OR TRANSACTIONS, INCLUDING THOSE THAT RAISE POTENTIAL CONFLICT OF INTEREST CONCERNS EACH YEAR ALL DIRECTORS, OFFICERS, TRUSTEES AND KEY EMPLOYEES ARE REMINDED OF THEIR OBLIGATIONS TO COMPLY WITH THE CONFLICT ON INTEREST POLICY AT THE ORGANIZATION'S ANNUAL MEETING AND PERIODICALLY AT OTHER TIMES DURING THE YEAR

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE BARNES FOUNDATION PERFORMS A REVIEW OF COMPENSATION AND BENEFITS PACKAGES (INCLUDING FRINGE, RETIREMENT AND SEVERANCE BENEFITS) FOR KEY EMPLOYEES AT THE TIME OF HIRE. THIS REVIEW RELIES UPON COMPARABILITY DATA TO DETERMINE WHETHER THE COMPENSATION ARRANGEMENT IN ITS ENTIRETY IS REASONABLE FOR THIS PURPOSE, APPROPROPRIATE AND RELEVANT INFORMATION INCLUDES COMPENSATION PAID BY SIMILIARLY SITUATED TAX-EXEMPT AND TAXABLE ORGANIZATIONS FOR FUNCTIONALLY COMPARABLE POSITIONS. THIS REVIEW ALSO TAKES INTO ACCOUNT THE SIZE, REVENUE, GEOGRAPHIC LOCATION, STRUCTURE AND COMPLEXITY OF THE ORGANIZATION. THE SALARY AND BENEFITS FOR THE EXECUTIVE DIRECTOR AND PRESIDENT ARE DETERMINED PURSUANT TO AN EMPLOY MENT AGREEMENT. IN ADDITION, IN 2013, AN INDEPENDENT HUMAN RESOURCES AND COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES REVIEWED THE SALARIES OF THE EXECUTIVE DIRECTOR, OFFICERS, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES FOR 2013 AND 2014, CONSIDERING COMPARABILITY DATA AND A REPORT OF AN INDEPENDENT COMPENSATION CONSULTANT

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE BARNES FOUNDATION'S BY-LAWS, CHARTER, FINANCIAL STATEMENTS AND CERTAIN OTHER GOVERNING DOCUMENTS (E.G., CONFLICT OF INTEREST POLICY), ARE AVAILABLE FOR REVIEW UPON REQUEST, DIRECTED TO THE FOLLOWING GENERAL COUNSEL (A MEMBER OF MANAGEMENT), BARNES FOUNDATION, 2025 BENJAMIN FRANKLIN PARKWAY, PHILADELPHIA, PA 19130

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	FEES FOR SERVICES (OTHER-SECURITY) PROGRAM SERVICE EXPENSES 993,153 MANAGEMENT AND GENERAL EXPENSES 497,631 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,490,784 FEES FOR SERVICES (OTHER) PROGRAM SERVICE EXPENSES 1,394,261 MANAGEMENT AND GENERAL EXPENSES 468,305 FUNDRAISING EXPENSES 469,172 TOTAL EXPENSES 2,331,738

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THERE IS NO CHANGE TO THIS PROCESS FROM THE PRIOR YEAR