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Return of Organization Exempt From Income Tax

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

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

AUG 33 1

A For the 2014 calendar year, or tax year beginning

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

and ending

Inspection

В	Check if applicab	C Name of organization		D Employer identific	cation number
г	Addre				
늗	lchane Name				021025
늗	lchang ltnitial		Room/suite		821935
늗	lreturn Final	· 1	E Telephone number		
L	return termı		350		<u>)775-0725</u>
	ated Amen	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	2,202,031.	
늗	return	WASHINGTON, DC 20036	H(a) Is this a group re		
<u> </u>	tion pendi	F Name and address of principal officer JENNIFER GENNARO O.	XLEY	for subordinates	
_		SAME AS C ABOVE		H(b) Are all subordinates in	
_		empt status	or 527	1	list (see instructions)
		te: > WWW.FULBRIGHT.ORG	1	H(c) Group exemption	
_	art I	Trust Association Other ►	L Year	of formation. 1991 N	A State of legal domicile: DC
		Summary	D. D. D. T.	TT TT: 1	
e	1	Briefly describe the organization's mission or most significant activities SEE	PART I	II, LINE 1.	
Activities & Governance	_				
ĕ	2	Check this box if the organization discontinued its operations or dispos	sed of more	1 1	
ģ	3	Number of voting members of the governing body (Part VI, line 1a)		3	25
<u>مح</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	25
ţį	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	4
ξį	6	Total number of volunteers (estimate if necessary)		6	250
ĕ		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	B	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
		Contributions and grants (Part VIII line 1h)		Prior Year 560,338.	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	\neg	72,840.	766,989. 87,438.
	10	Program service revenue (Part VIII, line 2g)		123,946.	195,403.
æ	11	Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8e, 02, 10e, AhlC115), 7	250-5	2,339.	4,811.
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 26 0cAhl (11) 12015 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12	1911	759,463.	1,054,641.
	13	Grants and similar amounts paid (Part IX, column (A), line (A), line (A)	121	18,000.	227,329.
	14	Benefits paid to or for members (Part IX, column (A) line 250EN, UT	~= -	0.	0.
ro.	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		345,951.	322,681.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	_	0.	36,000.
be	b	Total fundraising expenses (Part IX, column (D), line 25) 108, 3	39.		30,000
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		508,583.	531,518.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		872,534.	1,117,528.
	19	Revenue less expenses Subtract line 18 from line 12		-113,071.	-62,887.
50	3		Be	ginning of Current Year	End of Year
Net Assets	20	Total assets (Part X, line 16)		3,854,984.	3,623,997.
ASS	21	Total liabilities (Part X, line 26)		358,730.	240,797.
<u>SE</u>	22	Net assets or fund balances_Subtract line 21 from line 20		3,496,254.	3,383,200.
	art II	Signature Block			
Unc	ler pen	alties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my	y knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	hich preparer	has any knowledge.	
				8/6/2 Date	215
Sig	ın	Signature of officer		Date	
He	re	JENNIFER GENNARO OXLEY, EXECUTIVE DIR	ECTOR		
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	1	Date Check	P01329561
Pai	d	JAMIS M VARSU JEMJAN		VIGIC II sett-employe	HO 132333.
Pre	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Fırm's EIN ▶	52-1392008
Use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N			
		BETHESDA, MD 20814-2930		Phone no. (3	01) 951-9090

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

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

Form **990** (2014)

X Yes

432002 11-07-14

	•		Yes	<u>No</u>
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
٠,	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	^	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	•		v
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		х	
	during the tax year? If "Yes," complete Schedule C, Part II	4		
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	•		
•	Schedule D, Part III	8		Х
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	Х	
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		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
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			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		
ı	the organization's separate of consolidated infancial 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	x	
102	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111	-11	
IZU	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			-
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			47
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	امدا		v
20-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
<u> </u>	in 163 to line 204, old the diganization attach a copy of its addited illiancial statements to this return?	20b Form	990	2014

432003 11-07-14 Part IV Checklist of Required Schedules (continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
,	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			!
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		İ	
	contributions? If "Yes," complete Schedule M	30		_ <u>X</u> _
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		<u> X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701 37 If "Yes," complete Schedule R, Part I	33		<u>X</u>
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		<u> X</u>
35a	,	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		ι, Ι	
_	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2014)

	990 (2014) FULBRIGHT ASSOCIATION, INC. 52-1821	<u>935</u>	Р	<u>age 5</u>
Par				
	Check if Schedule O contains a response or note to any line in this Part V			oxdot
	t I		Yes	No
1a,	Enter the number reported in Box 3 of Form 1096 Enter ·0· if not applicable 1a 6			Ì
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_	<u>X</u>	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c_		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a_		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter			l
	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ł		l
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders N/A 11a	ł		
b	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 N/A 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40:		
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
a	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	1	l	
	Enter the amount of reserves on hand	44=	 	X
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes " has it filed a Form 730 to report these payments? If "No." provide an explanation in Schedule O.	14a	 	 ^-
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b Form	900	(2014)
		1 (011)		(2U 14)

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Form 990 (2014) FULBRIGHT ASSOCIATION, INC. 52-1821935 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI					
Sec	tion A. Governing Body and Management					
		1.	ا م	_	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	25			
	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 0.	۱.,	25			
_	Enter the number of voting members included in line 1a, above, who are independent	1b_	25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ııp with	any otner			v
_	officer, director, trustee, or key employee?			2		<u> X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	ne aire	ct supervision			v
_	of officers, directors, or trustees, or key employees to a management company or other person?	000	6140	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form		as filed /	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets		5	Х	
6	Did the organization have members or stockholders?			6		
/a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or		х	
	more members of the governing body?		-1-1	7a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members,	Stockn	olders, or			v
_	persons other than the governing body?	b 41		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	ear by ii	ie ionowing.	_	v	
a	The governing body? Find compatible with outbority to get an helpful of the governing heads?			8a	X	
ь	Each committee with authority to act on behalf of the governing body?	لدحماده	4 db	8b	Λ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	acned	at the	9		x
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal F	Davagu	o Codo I	9		
360	tion B. Policies (this Section B requests information about policies not required by the internal r	revenu	e Code)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?			10a	X	INO
	If "Yes," did the organization have written policies and procedures governing the activities of such or	chanta	e affiliatos	iva	Λ	
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	chapter	s, annates,	10b	Х	
110	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy hafa	are filing the form?	11a		x
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	dy Deit	ire ming the form.	1 la		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	se to cor	oflicts?	12b		Х
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			120		
·	in Schedule O how this was done	703, 0	COCIDC	12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approximate the following persons in the following	val by ii	ndenendent			<u> </u>
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision		idoponido.ii.			
а	The organization's CEO, Executive Director, or top management official			15a	Х	
h	Other officers or key employees of the organization			15b		Х
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					_ -
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	vith a			
	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its	participation			
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization.		•			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ► NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (Sec	tion 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply	-				
	Own website Another's website X Upon request Other (explain	ın ın Sc	hedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, c			d finan	cial	
	statements available to the public during the tax year		, ,,			
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks a	nd records 🕨			
	JENNIFER GENNARO OXLEY - (202)775-0725					
		2003	16			
43200	3 11-07-14			Form	990	(2014)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$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

(A)	(B)			((2)			(D)	(E)	(F)
Name and Title	Average	(do		Posi		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	s bot	h an	compensation	compensation	amount of
	week	_		uau	recic	1711143	(66)	from	from related	other
	(list any	Individual trustee or director						the	organizations (W-2/1099-MISC)	compensation from the
	hours for related	eord	활			sated		organization (W-2/1099-MISC)	(44-2/1099-141130)	organization
	organizations	ruste	Institutional trustee		yee	m pe		(** 27 1000 101100)		and related
	below	qual	l fig	_	Key employee	st co	ä			organizations
	line)		Instit	Officer	Key e	Highest compensated employee	Former			
(1) JOHN VOGEL	5.00									
PRESIDENT		Х		X				0.	0.	0.
(2) MARY ELLEN SCHMIDER	3.00									
VICE PRESIDENT		Х		X		<u> </u>		0.	0.	0.
(3) JOHN AUSURA	5.00							_	_	_
TREASURER		X		X				0,	0.	0.
(4) PHILIP RAKITA	3.00									
SECRETARY	1 22	X		Х	ļ	-	_	0.	0.	0.
(5) JERRY COOPER	1.00									_
DIRECTOR	1 00	X				-		0.	0.	0.
(6) PAULINE M. EVEILLARD	1.00					İ				
DIRECTOR	1 00	X				<u> </u>		0.	0.	0.
(7) ROBERT W. HELM	1.00	.,			i			0.	0.	_
DIRECTOR	1.00	X	-			├	├	<u> </u>	0.	0
(8) KEISUKE NAKAGAWA	1.00	X				ŀ		0.	0.	0
DIRECTOR	1.00	^	 			<u> </u>		0.	.	
(9) ANDREA NEVES DIRECTOR	1.00	X						0.	0.	0.
(10) JOHN SARGENT	1.00									
DIRECTOR	1100	x						0.	0.	
(11) GWENDOLYN WILLIS-DARPOH	1.00									
DIRECTOR		X						0.	0.	0
(12) KIM EGER	1.00									
DIRECTOR	- "	X						0.	0.	0
(13) RAMESH RAMAKRISHNAN	1.00									
DIRECTOR		X	<u> </u>					0.	0.	0
(14) HERMA WILLIAMS	1.00	1						1		
DIRECTOR		X	ļ				<u> </u>	0.	0.	0
(15) ROBERT RUMINSKI	1.00							_		
DIRECTOR		X	<u> </u>	<u> </u>	<u> </u>	 	<u> </u>	0.	0.	0
(16) LORI ALSPAUGH	1.00	\ 	1						_	_
DIRECTOR	1 22	X	\vdash	<u> </u>	<u> </u>	├	<u> </u>	0.	0.	0
(17) GAIL DERRICK	1.00	 								_
DIRECTOR 432007 11-07-14		X	<u> </u>	<u> </u>		<u> </u>		0.	0.	Form 990 (2014

432007 11-07-14

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(A) Name and business address	NONE	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but	t not limited to those liste	ed above) who received more than	

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0

\$100,000 of compensation from the organization

Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response	e or note to any line	e in this Part VIII		 -	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a					1 222 311
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b	287,868.				
E,	С	Fundraising events	1c					
ar /		Related organizations	1d					
S,E		Government grants (contribut		10,000.				
no s	f	All other contributions, gifts, gran	ts, and	,				
the		similar amounts not included abor	I +	469 121.				
100	g	Noncash contributions included in lines	1a-1f \$					
<u>3 E</u>	h	Total, Add lines 1a-1f	`	•	766 989			
				Business Code				
9	2 a	MEETINGS/CONFERENCE		900099	87,438.	87,438.		
e Š	þ							
S III	С			1				
le ve	d							
Program Service Revenue	е							
	f	All other program service reve	nue					
\rightarrow	g	Total. Add lines 2a-2f		•	87,438,			
	3	Investment income (including	dıvıdends, ınte	rest, and				
		other similar amounts)		▶	105,910.			105,910.
	4	Income from investment of tax	x-exempt bond	proceeds -				1
	5	Royalties						
			(ı) Real	(II) Personal				
	6 a	Gross rents		<u> </u>				
	þ	Less rental expenses						
	С	Rental income or (loss)		1				
	d	Net rental income or (loss)		.				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	1,231,133					
	b	Less cost or other basis						
		and sales expenses	1,141,640					
		Gain or (loss)	89,493					
		Net gain or (loss)			89,493.			89,493,
<u>e</u>	8 a	Gross income from fundraising	g events (not					
l en		including \$						
è		contributions reported on line	1c) See					
Other Revenue		Part IV, line 18	•	a				
₹		Less direct expenses		b [}		
		Net income or (loss) from fund	-	D				
	9 a	Gross income from gaming ac						
	_	Part IV, line 19		3				
		Less direct expenses						
		Net income or (loss) from gam	-	P				
	то а	Gross sales of inventory, less						
	L	and allowances	•	4,778.				
l		Less cost of goods sold		5,750.	A=-			
ł	с	Net income or (loss) from sale		Dunin On da	-972.			-972.
ł	11 -	Miscellaneous Revenu	<u> </u>	Business Code	E 300			5 700
		MISCELLANEOUS		900099	5,783.			5,783.
	b			 				
	Q C	All other revenue		 				
		Total, Add lines 11a-11d			5.783.	-		
	12	Total revenue See instructions.			1 054 641.	87,438,		200 214
432001	9			P 1	**************************************	1 07,430,1		Form 990 (2014)

Form 990 (2014) FULBRIGHT ASSOCIATION, INC. Part IX | Statement of Functional Expenses

Doj	Check if Schedule O contains a response to tinclude amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations	155 300	155 200		
	and domestic governments. See Part IV, line 21	177,329.	177,329.		
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	50,000.	E0 000		
	individuals See Part IV, lines 15 and 16	50,000.	50,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	137,105.	69,227.	47,276.	20,602
6	trustees, and key employees Compensation not included above, to disqualified	137,103.	09,221•	47,270.	20,002
6	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	146,144.	110,809.	27,744.	7,591
8	Pension plan accruals and contributions (include	140,144.	110,000.	27,744	7,331
0	section 401(k) and 403(b) employer contributions)	7,048.	5,594.	756.	698
9	Other employee benefits	11,432.	9,075.	1,224.	1,133
10	Payroll taxes	20,952.	16,631.	2,246.	2,075
11	Fees for services (non-employees)	20/3020	20,0020	2/2200	<u> </u>
 а	Management				
b	[*]				
c	, · .	54,224.	24,303.	26,033.	3,888
	Lobbying			•	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Professional fundraising services. See Part IV, line 17	36,000.			36,000
f	Investment management fees				•
g	Other (If line 11g amount exceeds 10% of line 25,				
Ī	column (A) amount, list line 11g expenses on Sch O.)	9,044.	8,944.	100.	
12	Advertising and promotion				
13	Office expenses	88,290.	39,282.	22,861.	26,147
14	Information technology	8,714.	6,648.	1,521.	545
15	Royalties				
16	Occupancy	85,678.	53,322.	23,824.	<u>8,532</u>
17	Travel	16,424.	13,988.	1,871.	565
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	225,245.	219,146.	5,838.	261
20	Interest	-			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,372.		2,372.	
23	Insurance	7,036.		7,036.	
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	CDDDIM CARD BROCHGGING	14,367.	13,867.	500.	
b	DUDG & GUDGGDTDMTONG	10,096.	8,920.	1,077.	99
c	DOADD DYDDMADA	6,242.		6,242.	
d		1,500.		1,500.	
е	All other expenses	2,286.	1,517.	566.	203
25	Total functional expenses Add lines 1 through 24e	1,117,528.	828,602.	180,587.	108,339
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2014)

Part X Balance Sheet

Pa	<u>rt X</u>	Balance Sheet			
	•	Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	140,167.	1	103,339.
	2	Savings and temporary cash investments	106,207.	2	70,028.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	9		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ts		employees' beneficiary organizations (see instr) Complete Part II of Sch L	•	6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	7,056.	9	860.
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 29, 208			
	b	Less accumulated depreciation 10b 28,407		10c	801. 3,445,169.
	11	Investments - publicly traded securities	3,594,581.	11	3,445,169.
	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		15	3,800.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	3,623,997.
	17	Accounts payable and accrued expenses	• • • • • • • • • • • • • • • • • • • •	17	51,614.
	18	Grants payable		18	100 100
	19	Deferred revenue		19	189,183.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Labilities	22	Loans and other payables to current and former officers, directors, trustees,			
Ē		key employees, highest compensated employees, and disqualified persons		_	
Ľ		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24	
	25	parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	050 500	26	240,797.
	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	330,730.	20	240,131.
S		complete lines 27 through 29, and lines 33 and 34.		-	
Š	27	Unrestricted net assets	2,298,704.	27	2,281,776.
<u>aa</u>	28	Temporarily restricted net assets	10-0-0	28	331,150.
Ö.	29	Permanently restricted net assets	550 054	29	770,274.
Š		Organizations that do not follow SFAS 117 (ASC 958), check here	7.0/2.20		7.072710
F.		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ť.	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances		33	3,383,200.
	34	Total liabilities and net assets/fund balances		34	3,623,997.
				J.	Form 990 (2014)

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or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization Employer identification number FULBRIGHT ASSOCIATION. 52-1821935 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). l x l An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in 7 section 170(b)(1)(A)(vi), (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (IV) is the organization (i) Name of supported (ii) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions)) Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990 EZ) 2014 FULBRIGHT ASSOCIATION, INC. 52-1821935 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	Section A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received (Do not								
	include any "unusual grants ")	621,380.	527,233.	601,667.	560,338.	766,989.	3,077,607.		
2	Tax revenues levied for the organ-						, -		
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	621,380.	527,233.	601,667.	560,338.	766,989.	3,077,607.		
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)						29,518.		
6	Public support. Subtract line 5 from line 4						3 048 089		
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning ın) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
7	Amounts from line 4	621,380.	527,233.	601,667.	560,338.	766,989.	3,077,607.		
8	Gross income from interest,			;					
	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources	84,979.	81,028.	83,919.	64,053.	105,910.	419,889.		
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 VI)	3,605.	8,082.	6,791.	2,339.	5,783.	26,600.		
11	Total support. Add lines 7 through 10				·		3,524,096.		
12	Gross receipts from related activities,	etc (see instruction	ons)			12	520,729.		
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	_		
	organization, check this box and stor	here							
Sec	ction C. Computation of Publ	ic Support Pe	rcentage						
14	Public support percentage for 2014 (line 6, column (f) d	vided by line 11, c	olumn (f))		14	86.49 %		
15	Public support percentage from 2013	Schedule A, Part	II, line 14			15	<u>86.79 %</u>		
16a	33 1/3% support test - 2014. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo			
	stop here. The organization qualifies	as a publicly supp	orted organization	1			►X		
b	33 1/3% support test - 2013. If the	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box		
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶ ـ		
17a	10% -facts-and-circumstances tes	t - 2014. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	iere. Explain in Pai	rt VI how the orgar	nization		
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	d organization				
b	10% -facts-and-circumstances tes	t - 2013. If the org	anızatıon dıd not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or		
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explair	in Part VI how the			
	organization meets the "facts-and-cire		-		• • • •		▶□		
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	ind see instruction	s ▶ □		
					Sche	dule A (Form 990	or 990-EZ) 2014		

432022 09-17-14

Schedule A (Form 990 or 990 EZ) 2014 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

Section A. Public Support	s listed below, please com	picto i art ii j				
Calendar year (or fiscal year beginning	ng in) (a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, a	· /					
membership fees received ([Do not					
include any "unusual grants '					l	
2 Gross receipts from admission			 	 		
merchandise sold or services	•					
formed, or facilities furnished		İ	•			
any activity that is related to						
organization's tax-exempt pu		-			 	
3 Gross receipts from activities						
are not an unrelated trade or	bus-				İ	
iness under section 513						
4 Tax revenues levied for the o	rgan-					
ization's benefit and either pa	aid to					
or expended on its behalf						
5 The value of services or facili	ties					
furnished by a governmental						
, •						
the organization without char	ye	 	1	-		
6 Total. Add lines 1 through 5		1	1	1	1	
7a Amounts included on lines 1,	· · ·		1			
3 received from disqualified p	persons	ļ	ļ	1	1	
b Amounts included on lines 2 and 3 rec						
from other than disqualified persons the exceed the greater of \$5,000 or 1% of	l l					
amount on line 13 for the year	ine .					
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from	n line C \					
Section B. Total Support	inite 0)			. I	1	·
Calendar year (or fiscal year beginning	ng in)	(h) 2011	(=) 2012	(4) 2012	(-) 2014	(f) Total
, , ,	ng in) (a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received	d on					
securities loans, rents, royalti						
and income from similar sour	ces					
b Unrelated business taxable incon	ne					
(less section 511 taxes) from but	sinesses					
acquired after June 30, 1975						
c Add lines 10a and 10b		1		<u> </u>		
11 Net income from unrelated be	usiness					
activities not included in line			!			ĺ
whether or not the business	ıs					
regularly carried on		 	<u> </u>	 		
12 Other income Do not include or loss from the sale of capita						
assets (Explain in Part VI)	<u> </u>				ļ	
13 Total support. (Add lines 9, 10c, 11	, and 12)		1		<u> </u>	<u></u>
14 First five years. If the Form 9	390 is for the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
check this box and stop here	e				<u> </u>	
Section C. Computation of	of Public Support Pe	ercentage				
15 Public support percentage for	or 2014 (line 8, column (f) o	divided by line 13,	column (f))		15	%
16 Public support percentage from		•			16	%
Section D. Computation of						
17 Investment income percenta					17	%
18 Investment income percenta	•	•	, (.,,		18	%
19a 33 1/3% support tests - 201	-		on line 14 and lin	a 15 is more than		
* *	*					17 IS NOT
more than 33 1/3%, check th	•	•	•			. ▶□
b 33 1/3% support tests - 20	*					
line 18 is not more than 33 1/			-		•	▶Щ
20 Private foundation. If the organic	ganization did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	
432023 09-17-14				Sc	hedule A (Form 99	0 or 990-EZ) 2014

Part IV | Supporting Organizations

Section A. All Supporting Organizations

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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by		i	
	class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a_		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			ı
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			ı
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			ı
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			ı
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			ı
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			i
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			:
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,		İ	
	(III) the authonty under the organization's organizing document authorizing such action, and (IV) how the action		•	
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		

- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

6 7 8 9a 9b 9с 10a

Sobr	dule A (Form 990 or 990-EZ) 2014 FULBRIGHT ASSOCIATION,	TNC		52-1821935 Page 6
	Type III Non-Functionally Integrated 509(a)(3) Supporting		izations	JZ IUZIJJJ Faget
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			tructions. All
	other Type III non-functionally integrated supporting organizations must co	-		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			·
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
_3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
-	Income tay imposed in prior year			

Check here if the current year is the organization's first as a non functionally-integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2014

and 4c

b

Breakdown of line 7

d Excess from 2013
e Excess from 2014

chedule A	(Form 990 or 990-EZ) 2014 FULBRIGHT ASSOCIATION, INC.	52-1821935 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line	17a or 17b, and Part III, line 12
	Also complete this part for any additional information (See instructions)	
•		
		
	<u> </u>	
	•	
		<u> </u>
		·

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

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

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

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

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

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

, (see separate moductions, then				
• Se	ection 501(c)(4), (5), or (6) organiza	tions Complete Part III			
Name	of organization	-	-	Empl	oyer identification number
	FULBRIG	HT ASSOCIATION,	INC.		52-1821935
Parl	I-A Complete if the org	janization is exempt un	der section 501(c) or is a section 527 o	rganization.
2 F	Provide a description of the organize of the o	zation's direct and indirect politi	cal campaign activities		
Parl	I-B Complete if the ord	ganization is exempt un	der section 501(c)(3).	
	inter the amount of any excise tax			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
	inter the amount of any excise tax	· -			
	the organization incurred a section	, ,		•	Yes No
	Vas a correction made?		, , , , , , , , , , , , , , , , , , , ,		Yes No
	"Yes," describe in Part IV				
		janization is exempt un	der section 501(c), except section 501(c)(3).
1 E	inter the amount directly expended	by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2 E	inter the amount of the filing organ	ization's funds contributed to o	ther organizations for s	section 527	
е	xempt function activities		•	▶ \$	
3 T	otal exempt function expenditures	Add lines 1 and 2 Enter here	and on Form 1120-POI		
	ne 17b				
4 C	old the filing organization file Form	1120-PQL for this year?			Yes No
n c	inter the names, addresses and er nade payments. For each organiza ontributions received that were pr olitical action committee (PAC). If	tion listed, enter the amount pa omptly and directly delivered to	id from the filing organ a separate political org	ization's funds Also enter th ganization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2014

LHA 432041 10-21-14

Schedule C (Form 990 or 990-EZ) 2014	FULBRIGHT A	ASSOCIATION.	INC.	52-1	821935 Page 2		
Part II-A Complete if the org	janization is exe	mpt under section	n 501(c)(3) and fil	ed Form 5768 (e	lection under		
section 501(h)).							
A Check 🕨 🔲 if the filing organiza	ition belongs to an aff	iliated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,		
expenses, and sha	re of excess lobbying	expenditures)					
B Check 🕨 🔛 if the filing organiza	tion checked box A a	nd "limited control" pro	visions apply				
	ts on Lobbying Expe ditures" means amo	enditures unts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals		
1a Total lobbying expenditures to infli	uence public opinion	(grass roots lobbying)			-		
b Total lobbying expenditures to infli	uence a legislative bo	dy (direct lobbying)			-		
c Total lobbying expenditures (add li	ines 1a and 1b)	, , ,					
d Other exempt purpose expenditure	es			1,117,528.			
e Total exempt purpose expenditure	es (add lines 1c and 1	d)		1,117,528.			
f Lobbying nontaxable amount Enter	er the amount from th	e following table in both	n columns	186,753.			
If the amount on line 1e, column (a) of	or (b) is: The lot	bying nontaxable amo	ount is:				
Not over \$500,000	20% of	the amount on line 1e					
Over \$500,000 but not over \$1,000	0,000 \$100,0	00 plus 15% of the exc	ess over \$500,000				
Over \$1,000,000 but not over \$1,5	500,000 \$175,0	00 plus 10% of the exc	ess over \$1,000,000.				
Over \$1,500,000 but not over \$17,	,000,000 \$225,0	00 plus 5% of the exce	ss over \$1,500,000				
Over \$17,000,000							
g Grassroots nontaxable amount (er	•			46,688.			
h Subtract line 1g from line 1a If zer	•			0.			
i Subtract line 1f from line 1c If zero	•			0.			
j If there is an amount other than ze		line 1i, did the organiza	ation file Form 4720	Г			
reporting section 4911 tax for this			-		YesNo		
4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)							
	Lobbying Expe	nditures During 4-Yea	r Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total		
2a Lobbying nontaxable amount	119,629.	161,737.	155,880.	186,753.	623,999.		
b Lobbying ceiling amount (150% of line 2a, column(e))					935,999.		
c Total lobbying expenditures	17,973.				17,973.		
		i l					
d Grassroots nontaxable amount e Grassroots ceiling amount	29,907.	40,434.	38,970.	46,688.	155,999.		

Schedule C (Form 990 or 990-EZ) 2014

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2014 FULBRIGHT ASSOCIATION, INC. 52-1821935 Page 3

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

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)
	e lobbying activity	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
1	Other activities?				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>			
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	on 501(c))(5), or se	ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
	t III-B Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ical			
	expenses for which the section 527(f) tax was paid).				
	Current year		2a		
	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
_	expenditure next year?		4		<u> </u>
5 Par	Taxable amount of lobbying and political expenditures (see instructions)		5		
		- (-A) D (1.4.1		
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	p list), Part i	I-A, lines I a	ına 2 (see	
1115111	uctions), and Part II-B, line 1 Also, complete this part for any additional information				
		-			
				·	
			·		

SCHEDULE D

Department of the Treasury

(Form 990)

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. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. DMB No 1545-0047 Open to Public Inspection

Name of the organization

FULBRIGHT ASSOCIATION, INC. **Employer identification number**

52-1821935 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014

<u>1</u>	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	>

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

Schedule D (Form 990) 2014

2 , Ar	(I Reconciliation of Revenue per)	ASSOCIATION,			.821935 P
2 , Ar				per Return.	
2 , Ar	Complete if the organization answered "Y		line 12a		1 010 2
	tal revenue, gains, and other support per audi nounts included on line 1 but not on Form 990			1	1,010,2
	t unrealized gains (losses) on investments	, Fait VIII, line 12	2a -50,3	167	
	nated services and use of facilities		2b 20 / 2	-0/-	
	coveries of prior year grants		2c		
	her (Describe in Part XIII)			750.	
	d lines 2a through 2d			2e	-44,4
	btract line 2e from line 1			3	1,054,6
4 Ar	nounts included on Form 990, Part VIII, line 12	, but not on line 1			
a In	restment expenses not included on Form 990,	, Part VIII, line 7b	4a		
b Ot	her (Describe in Part XIII)		4b		
c Ad	d lines 4a and 4b			4c	
	tal revenue Add lines 3 and 4c. (This must eq			5	1,054,6
Part)	III Reconciliation of Expenses per		•	s per Retur	n.
	Complete if the organization answered "Y		ine 12a		
	tal expenses and losses per audited financial			1 1	<u>1,123,2</u>
	nounts included on line 1 but not on Form 990), Part IX, line 25	1 1		
	nated services and use of facilities		2a		
	or year adjustments		2b		
	her losses		2c	750.	
	her (Describe in Part XIII)		2d 5,		F 7
	d lines 2a through 2d btract line 2e from line 1			2e 3	5,7 1,117,5
	nounts included on Form 990, Part IX, line 25,	but not on line 1		3	<u> </u>
	restment expenses not included on Form 990,		4a		
	her (Describe in Part XIII)	, rait viii, iiito 7 b	4b		
	d lines 4a and 4b		48.	4c	
	tal expenses Add lines 3 and 4c. (This must e	gual Form 990. Part I. line	18)	5	1,117,5
Part)	III Supplemental Information.				
mes zu	and 4b, and Part XII, lines 2d and 4b Also cor	npiete this part to provide	any additional information		
ART	V, LINE 4:				
	V, LINE 4: 21ST CENTURY COHEN FUND	ENDOWMENT SU	PPORTS AN ANNUAL	LECTURE	ON DANC
HE		-			
HE RESE	21ST CENTURY COHEN FUND	THE FULBRIGHT	ASSOCIATION'S AL	NUAL ME	ETING AN
THE RESE	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A	THE FULBRIGHT	ASSOCIATION'S AN	NUAL ME	ETING AN
THE RESE CONF	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A GNATED TO SUPPORT THE B	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI	ASSOCIATION'S AN	NUAL ME	ETING AN
CONF	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI	ASSOCIATION'S AN	NUAL ME	ETING AN
CONF CONF	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A GNATED TO SUPPORT THE B RNATIONAL UNDERSTANDING	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI	ASSOCIATION'S AN	NUAL ME	ETING AN
CHE RESE CONF DESI	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A GNATED TO SUPPORT THE B	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI	ASSOCIATION'S AN	NUAL ME	ETING AN
CHE CONF CONF	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A GNATED TO SUPPORT THE B RNATIONAL UNDERSTANDING	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI	ASSOCIATION'S ANST CENTURY PRIZE	NUAL ME	ETING AN
CONF DESIGNATE	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A GNATED TO SUPPORT THE B RNATIONAL UNDERSTANDING X, LINE 2:	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI .	ASSOCIATION'S ANST CENTURY PRIZE	NUAL ME FUND IS PRIZE FO	ETING AN
CONFIDENCE ON SECONS	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A GNATED TO SUPPORT THE B RNATIONAL UNDERSTANDING X, LINE 2: THE YEAR ENDED DECEMBER	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI . 31, 2014, TH	ASSOCIATION'S ANST CENTURY PRIZE LLIAM FULBRIGHT IN THE ASSOCIATION HAS	NUAL ME FUND IS PRIZE FO DOCUME	ETING AND
CHE CONFIDENTE CONFIDENTE CONSIDER CONS	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A GNATED TO SUPPORT THE B RNATIONAL UNDERSTANDING X, LINE 2: THE YEAR ENDED DECEMBER IDERATION OF FASB ASC 7	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI . 31, 2014, TH 40-10, INCOME	ASSOCIATION'S ANSTERNATION S ANSTERNATION S ANSTERNATION HAS TAXES, THAT PROVIDED HAS DETERMINED	FUND IS PRIZE FO DOCUME THAT NO	ETING AND THE STATE OF THE STAT
CONS CONS CONS	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A GNATED TO SUPPORT THE B RNATIONAL UNDERSTANDING X, LINE 2: THE YEAR ENDED DECEMBER IDERATION OF FASB ASC 7	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI 31, 2014, TH 40-10, INCOME COME TAXES AN	ASSOCIATION'S ANSTERNATION S ANSTERNATION S ANSTERNATION HAS TAXES, THAT PROVIDED HAS DETERMINED	FUND IS PRIZE FO DOCUME THAT NO	ETING AND THE STATE OF THE STAT
E NF SI TE	21ST CENTURY COHEN FUND ARCH OR SCHOLARSHIP AT ERENCE. THE FULBRIGHT A GNATED TO SUPPORT THE B RNATIONAL UNDERSTANDING X, LINE 2: THE YEAR ENDED DECEMBER	THE FULBRIGHT SSOCIATION 21 IENNIAL J. WI .	ASSOCIATION'S ANST CENTURY PRIZE	NUAL ME FUND IS PRIZE FO	ETING AN

Part XIII Supplemental Information (continued)
THE FINANCIAL STATEMENTS.
THE FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS
SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR
THREE YEARS AFTER IT IS FILED.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
COST OF GOODS SOLD REPORTED AS EXPENSE ON THE FINANCIAL 5,750
STATEMENTS AND NETTED AGAINST REVENUE ON PART VIII, LINE 10.
PART_XII, LINE · 2D - OTHER ADJUSTMENTS:
COST OF GOODS SOLD REPORTED AS EXPENSE ON THE FINANCIAL 5,750
STATEMENTS AND NETTED AGAINST REVENUE ON PART VIII, LINE 10.

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

FULBRIGHT ASSOC	יד∆ידר∩אז	TNC		-	32-18219:	35
Part I General Info	rmation on A	ctivities Out	tside the United States. Comple			
Form 990, Part IV			· · · · · · · · · · · · · · · · · · ·		,	
	=		ds to substantiate the amount of its gra the selection criteria used to award the			Yes X No
United States			procedures for monitoring the use of its		r assistance out	tside the
3 Activities per Region (Ti	he following Part (b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity is a progra describe sp of service(s	m service, ecific type	(f) Total expenditures for and investments in region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION			50,000.
 						
3 a Sub-totalb Total from continuation sheets to Part I	0	0				50,000.
c Totals (add lines 3a and 3b) LHA For Paperwork Reduct	tion Act Notice	0 see the Instruc	tions for Form 990.		Schedule F	50 000 (Form 990) 2014

432071 09-24-14

Page 2

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any FULBRIGHT ASSOCIATION, INC. Schedule F (Form 990) 2014

recipient who received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name of organization	and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of the IRS, or for which	f recipient organization	is listed above that are r	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-ex	empt by		:
2 Enter total pumper of other	f other organizations of	2011				A		

Schedule F (Form 990) 2014

FULBRIGHT ASSOCIATION, INC.

Page 3

52-1821935

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16 Schedule F (Form 990) 2014

Part III can be duplicated if additional space is needed

_]				
(h) Method of valuation (book, FMV, appraisal, other)						
(g) Description of non-cash assistance						
(f) Amount of non-cash assistance	0					
(e) Manner of cash disbursement	НЕСК					
(d) Amount of cash grant	50 000 CHECK					
(c) Number of recipients						
(b) Region	EUROPE (INCLUDING ICELAND & GREENLAND)					
(a) Type of grant or assistance (b) Region	PRIZE AWARD					

432073 09-24-14

Schedule F (Form 990) 2014

the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Foreign Partnerships (see Instructions for Form 8865)

for Form 5713, do not file with Form 990)

Schedule F (Form 990) 2014

Yes X No

Yes X No

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990. Name of the organization Employer identification number 52-1821935 FULBRIGHT ASSOCIATION, Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply X Mail solicitations Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants c Phone solicitations Special fundraising events In person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or No X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (III) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid to (or retained by) (i) Name and address of individual (iv) Gross receipts (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) COMMUNITY COUNSELING SERVICES DEVELOPMENT/OUTREACH Yes No 36,000 -36,000 LLC - P.O. BOX 824885 STRATEGIES Total -36,000 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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

Schedule G (Form 990 or 990-EZ) 2014

432081 08-28-14

Sch P:	edu art I	le G (Form 990 or 990-EZ) 2014 FULBRIG Fundraising Events. Complete if th	HT ASSOCIATI	ON, INC.	52-	1821935 Page 2	
	41 (1	of fundraising event contributions and great					
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through	
Θŗ			(event type)	(event type)	(total number)	col (c))	
Revenue	1	Gross receipts					
	2	Less Contributions					
	3	Gross income (line 1 minus line 2)					
	4	Cash prizes					
"	5	Noncash prizes					
Direct Expenses	6	Rent/facility costs					
Irect E	7	Food and beverages					
	8	Entertainment					
	9	Other direct expenses			<u> </u>		
	10	Direct expense summary Add lines 4 through Net income summary Subtract line 10 from li			>		
Pa	Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than						
	1	\$15,000 on Form 990-EZ, line 6a					
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))	
Ř	1	Gross revenue					
_	Ċ						
ct Expenses	2	Cash prizes					
	3	Noncash prizes					
Direct	4	Rent/facility costs	-				
	5	Other direct expenses					
	6	Volunteer labor	Yes% No	Yes % No	Yes% No		
	7	Direct expense summary Add lines 2 through	n 5 ın column (d)		•		
	8	Net gaming income summary Subtract line 7	from line 1, column (d)				
â	9 Enter the state(s) in which the organization conducts gaming activities a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain Yes No						
		re any of the organization's gaming licenses re Yes," explain	•	_	year?	Yes No	
4320	82 08	3-28-14			Schedule G (Fo	rm 990 or 990-EZ) 2014	

Schedule G (Form 990 or 990-EZ) 2014 FULBRIGHT ASSOCIATION,INC.	52-1821935 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in	
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and record	ds
Name ▶	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amo	unt
of gaming revenue retained by the third party ►\$ c If "Yes," enter name and address of the third party	
Name	
Address ▶	
16 Gaming manager information	
Name	
Gaming manager compensation ▶ \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	
organization's own exempt activities during the tax year \$\bigseleft\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Part III lines 9 9h 10h 15h
15c, 16, and 17b, as applicable Also provide any additional information (see instructions)	art III, III 163 9, 95, 105, 135,
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRA	ISERS:
	·
(I) NAME OF FUNDRAISER: COMMUNITY COUNSELING SERVICES CO. LL	ıC
(I) ADDRESS OF FUNDRAISER: P.O. BOX 824885, PHILADELPHIA, PA	19182-4885
432083 08-28-14 Schedule	G (Form 990 or 990-EZ) 2014

Schedule G	G (Form 990 or 990-EZ)	FULBRIGHT ASSOCIATION.	INC.	52-1821935 Page 4
Part IV	Supplemental Info	FULBRIGHT ASSOCIATION, rmation (continued)		
1,00.0	- Cappionioniai inio	Continued)		
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SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

INC.

FULBRIGHT ASSOCIATION,

General Information on Grants and Assistance

Part I

Open to Public OMB No 1545-0047 Inspection Employer identification number

52-1821935

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

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select		
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	stance? ocedures for monif	toring the use of grant	funds in the Unitec	States			. Yes	ž
12	Domestic Organı	zations and Domestic	: Governments. Co	omplete if the orga	nization answered "Y	es" to Form 990, Part	IV, line 21, for any	
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	\$5,000 Part II can	be duplicated if additi	onal space is need	ed				
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	rant
							EDUCATIONAL AND C	CULTURAL
SAN ANTONIO CHAPTER OF THE							PROGRAMS FOR	
FULBRIGHT ASSOCIATION - 4301							INTERNATIONAL VISITING	ITING
BROADWAY - SAN ANTONIO, TX 78209	37-1734361	501(C)(3)	5,400.	0			FULBRIGHTERS AND US	US
NORTHERN CALIFORNIA CHAPTER OF THE							EDUCATIONAL AND CULTURAL	ULTURAL
FULBRIGHT ASSOCIATION - 211							PROGRAMS FOR	
CAMBRIDGE AVENUE - KENSINGTON, CA				-			INTERNATIONAL VISITING	ITING
94708	94-3252582	501(C)(3)	8,000.	0			FULBRIGHTERS AND US	US
							EDUCATIONAL AND CULTURAL	ULTURAL
NORTH FLORIDA CHAPTER OF THE							PROGRAMS FOR	
FULBRIGHT ASSOCIATION - 130 EDDIE							INTERNATIONAL VISITING	TING
BLAKE ROAD - QUINCY, FL 32351	45-5263884	501(C)(3)	6,750.	0.			FULBRIGHTERS AND US	US
NATIONAL CAPITAL AREA CHAPTER OF							EDUCATIONAL AND CULTURAL	ULTURAL
THE FULBRIGHT ASSOCIATION - 119 N.							PROGRAMS FOR	
PATRICK STREET - ALEXANDRIA, VA							INTERNATIONAL VISITING	ITING
22314	54-1737237	501(C)(3)	11,900,	0.			FULBRIGHTERS AND US	US
MASSACHUSETTS CHAPTER OF THE							EDUCATIONAL AND CULTURAL	ULTURAL
FUBRIGHT ASSOCIATION - 97							PROGRAMS FOR	
BLOSSOMCREST ROAD - LEXINGTON, MA							INTERNATIONAL VISITING	TING
24210	04-3251132	501(C)(3)	12,250,	0			FULBRIGHTERS AND US	US
MID FLORIDA CHAPTER OF THE							EDUCATIONAL AND CULTURAL	ULTURAL
FULBRIGHT ASSOCIATION - 2410							PROGRAMS FOR	
HAMPTON LANE W SAFETY HARBOR,							INTERNATIONAL VISITING	ITING
FL 34695	43-1958361	501(C)(3)	6,500.	0			FULBRIGHTERS AND	ns
2 Enter total number of section 501(c)(3) and government organizations	nd government or		listed in the line 1 table				•	15.
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					•	0

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2014)

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Schedule I (Form 990) FULBRIGHT ASSOCIATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II	ASSOCIAT	ION, INC.	uzations in the Un	ited States (Sche	dule I (Form 990), Pa		52-1821935, Page 1
(a) Name and address of organization or government	(b) E!N	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNESOTA CHAPTER OF THE FULBRIGHT ASSOCIATION - 3327 MINNEHAHA PARKWAY EAST - MINNEAPOLIS, MN	NCC NOT 1-1N	501(0)(3)	c c	c			EDUCATIONAL AND CULTURAL PROGRAMS FOR INTERNATIONAL VISITING
CENTRAL NEW YORK CHAPTER OF THE FULBRIGHT ASSOCIATION - 310 WALNUT PLACE - SYRACUSE NY 13210	16-154122	501(C)(3)	5 750				EDUCATIONAL AND CULTURAL PROGRAMS FOR INTERNATIONAL VISITING FULBRIGHTERS AND US
CHICAGO CHAPTER OF THE FULBRIGHT ASSOCIATION - 555 W. CORNELIA AVENUE, APT 2004 - CHICAGO, IL 60657	91-2078024	501(C)(3)		0			EDUCATIONAL AND CULTURAL PROGRAMS FOR INTERNATIONAL VISITING FULBRIGHTERS AND US
MICHIGAN CHAPTER OF THE FULBRIGHT ASSOCIATION - 1631 LEXINGTON DRIVE - TROY MI 48084	38-3204314	501(C)(3)	002 8	0			EDUCATIONAL AND CULTURAL PROGRAMS FOR INTERNATIONAL VISITING FULBRIGHTERS AND US
GREATER NEW YORK CHAPTER OF THE FULBRIGHT ASSOCIATION - 4121 7TH AVENUE #D - BROOKLYN, NY 11232	11-3243986	501(C)(3)		°			EDUCATIONAL AND CULTURAL PROGRAMS FOR INTERNATIONAL VISITING FULBRIGHTERS AND US
HAPTER OF THE DN - 1430 CAM DECATUR GA 3	58-2300459	501(C)(3)		0			EDUCATIONAL AND CULTURAL PROGRAMS FOR INTERNATIONAL VISITING FULBRIGHTERS AND US
1 13 15 18	90-0114309	501(C)(3)		0			EDUCATIONAL AND CULTURAL PROGRAMS FOR INTERNATIONAL VISITING FULBRIGHTERS AND US
CENTRAL PENNSYLVANIA CHAPTER OF THE FULBRIGHT ASSOCIATION - 155 FERNLEAF COURT - STATE COLLEGE, PA 16801	25-1792599	501(C)(3)	5.500	0			EDUCATIONAL AND CULTURAL PROGRAMS FOR INTERNATIONAL VISITING FULBRIGHTERS AND US
ALABAMA CHAPTER OF THE FULBRIGHT ASSOCIATION - 313 O.D. SMITH HALL-135 SOUTH COLLEGE STREET - AUBURN, AL 36830	63-1174142	501(C)(3)	7,900,	0			EDUCATIONAL AND CULTURAL PROGRAMS FOR INTERNATIONAL VISITING FULBRIGHTERS AND US Schedule I (Form 990)

Page 2

52-1821935

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
·					
Supplementa		2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information	ditional information	
FART 1, LINE 2: IN 2013, THE ASSOCIATION MADE MINI-GRANTS TO VARIOUS CHAPTERS.	-GRANTS	ro various	CHAPTERS.	GUIDELINES	
AND BUDGET FORMS ARE ISSUED, PROPOSALS	SALS ARE	ACCEPTED	AND REVIEWED,	ED, AND NOTES	
ARE KEPT ON REVIEW COMMITTEE DELIBERAT	ERATIONS.	GRANT	RECIPIENTS A	ARE PROVIDED	
WITH INFORMATION ON THEIR PROPOSALS		AND INSTRUCTIONS	ON THEIR	GRANT AWARDS.	
THE RECIPIENTS SUBMIT REPORTS AT T	THE END OF	THE GRANT	PERIOD,	DISCUSSING	
RESULTS OF THE PROGRAM AND QUANTIFYING	YING THE	IMPACT OF	THE GRANT	ON THE	
FULBRIGHT COMMUNITY.					

Schedule I (Form 990) (2014)

SCHEDULE O

(Form 990 or 990-EZ)

OMB No 1545-0047

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ. Department of the Treasury Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Name of the organization Employer identification number

Open to Public

FULBRIGHT ASSOCIATION, INC.	52-1821935
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
MEMBERSHIP	
EXPENSES \$ 119,172. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.
CHAPTERS	
EXPENSES \$ 78,550. INCLUDING GRANTS OF \$ 18,723. REVE	NUE \$ 0.
SPECIAL PROJECTS	
EXPENSES \$ 62,493. INCLUDING GRANTS OF \$ 0. REVENUE \$	18,127.
ADVOCACY	
EXPENSES \$ 18,534. INCLUDING GRANTS OF \$ 0. REVENUE \$	0.
FORM 990, PART VI, SECTION A, LINE 6:	
MEMBERS OF THE FULBRIGHT ASSOCIATION ARE FORMER FULBRIGHT	EXCHANGE PROGRAM
GRANT RECIPIENTS AND INDIVIDUALS AND INSTITUTIONS WITH IN	TEREST IN THE
FIELD OF INTERNATIONAL EDUCATION. INDIVIDUAL MEMBERSHIPS	ARE AVAILABLE IN
REGULAR ANNUAL, LIFE, STUDENT, AND ASSOCIATE CATEGORIES.	ASSOCIATE MEMBERS
HAVE NOT RECEIVED FULBRIGHT GRANT AWARDS. INSTITUTIONAL M	EMBERSHIPS ARE
AVAILABLE TO COLLEGES, UNIVERSITIES AND OTHER ORGANIZATION	NS THAT SUPPORT
THE FULBRIGHT PROGRAM PURPOSE OF INCREASING MUTUAL UNDERST	TANDING BETWEEN
THE PEOPLE OF THE UNITED STATES AND THOSE OF OTHER COUNTRY	IES.
FORM 990, PART VI, SECTION A, LINE 7A:	
MEMBERS IN GOOD STANDING MAY VOTE TO ELECT MEMBERS OF THE	BOARD OF
DIRECTORS AND THE ASSOCIATION PRESIDENT.	
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedi 432211 08-27-14	ule O (Form 990 or 990-EZ) (2014)

Employer identification number 52-1821935

FORM 990, PART VI, SECTION B, LINE 11:

THE DRAFT FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY
FULBRIGHT ASSOCIATION'S FINANCE COMMITTEE. THE FINAL FORM 990 WAS THEN
FILED WITH THE IRS AND A COPY WAS SENT TO ALL MEMBERS OF THE BOARD OF
DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH BOARD MEMBER IS REQUIRED TO INFORM THE PRESIDENT AND/OR EXECUTIVE

DIRECTOR OF POTENTIAL CONFLICTS BASED ON THE POLICY IN THE ASSOCIATION'S

BY-LAWS. WHEN ANY CONTRACT OR EMPLOYMENT OFFER IS GENERATED, THE EXECUTIVE

DIRECTOR VERIFIES THAT THERE IS NO CONFLICT OF INTEREST PURSUANT TO THE

BY-LAWS GUIDELINES.

THE EXECUTIVE DIRECTOR AND THE PRESIDENT REVIEW ALL POTENTIAL OR REAL

CONFLICTS OF INTEREST AND BRING THEM TO THE ATTENTION OF THE EXECUTIVE

COMMITTEE AND/OR THE FINANCE COMMITTEE FOR RESOLUTION IN THE BEST INTERESTS

OF THE ASSOCIATION.

FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE DIRECTOR'S REVIEW IS CONDUCTED BY THE PRESIDENT AND OTHER

MEMBERS OF THE EXECUTIVE COMMITTEE (VICE PRESIDENT, SECRETARY, AND

TREASURER). COMPENSATION REVIEWS HAVE BEEN BASED ON SALARY DATA FROM

SIMILAR ORGANIZATIONS, FROM PROFESSIONAL SOCIETIES, SUCH AS THE GREATER

WASHINGTON SOCIETY OF ASSOCIATION EXECUTIVES AND THE AMERICAN RESEARCH

COUNCIL. THE DECISION IS COMMUNICATED TO THE EXECUTIVE DIRECTOR IN WRITING.

THE LAST SALARY REVIEW FOR THE EXECUTIVE DIRECTOR WAS IN SEPTEMBER 2012.

THE EXECUTIVE DIRECTOR REVIEWS ALL OTHER EMPLOYEES' PERFORMANCES AND SETS
432212
08-27-14
Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990 EZ) (2014)	Page 2
Name of the organization - FULBRIGHT ASSOCIATION, INC.	Employer identification number 52-1821935
COMPENSATION WITHIN BUDGETARY GUIDELINES REVIEWED AND APP	ROVED BY THE
FINANCE COMMITTEE AND THE BOARD OF DIRECTORS.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTER	EST POLICY, AND
FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQ	UEST.
	_