Form **990** | **Return of Organization Exempt From Income Tax** | OMB No. 1545-0047

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

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

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

Department of the Treasury
Internal Revenue Service

2014
Open to Public Inspection

A For the 2014 calendar year, or tax year beginning and ending

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending

C Name of organization: CENTER FOR DEMOCRACY AND TECHNOLOGY

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 1634 I STREET, N.W. Room/suite: 1100

City or town, state or province, country, and ZIP or foreign postal code: WASHINGTON, DC 20006-4003

D Employer identification number: 52-1905358

E Telephone number: 202-637-9800

G Gross receipts $ 5,525,819.

F Name and address of principal officer: DEIRDRE MULLIGAN
SAME AS C ABOVE

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.CDT.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1994 M State of legal domicile: DC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	8
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	34
6	Total number of volunteers (estimate if necessary)	6	15
7a	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.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	3,729,074.	4,864,784.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,294.	3,617.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	57,495.	-276,876.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,792,863.	4,591,525.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,048,008.	3,343,232.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	38,424.	48,000.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 356,203.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,767,549.	1,661,657.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,853,981.	5,052,889.
	19	Revenue less expenses. Subtract line 18 from line 12	-1,061,118.	-461,364.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	3,699,307.	3,265,890.
	21	Total liabilities (Part X, line 26)	250,271.	277,428.
	22	Net assets or fund balances. Subtract line 21 from line 20	3,449,036.	2,988,462.

Part II Signature Block

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

Sign Here

▶ Nuala O'Connor — Signature of officer — Date: October 6, 2015

▶ NUALA O'CONNOR, PRESIDENT & CEO — Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: James M Lorusso | Preparer's signature: [signature] | Date: 10/5/15 | Check ☐ if self-employed | PTIN P01329561

Firm's name ▶ GELMAN, ROSENBERG & FREEDMAN | Firm's EIN ▶ 52-1392008

Firm's address ▶ 4550 MONTGOMERY AVE SUITE 650N
BETHESDA, MD 20814-2930 | Phone no. (301) 951-9090

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

WORKING TO KEEP THE INTERNET OPEN, INNOVATIVE AND FREE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 833,156. including grants of $) (Revenue $)

4TH AMENDMENT PRIVACY:
CONDUCTED RESEARCH AND PUBLISHED ANALYSIS AND COMMENTARY ON GOVERNMENT SURVEILLANCE, CYBER SECURITY AND OTHER ISSUES CONCERNING CIVIL LIBERTIES AND NEW TECHNOLOGIES; DEVELOPED AND PUBLISHED POLICY PROPOSALS; CONVENED STAKEHOLDER DIALOGUE TO IDENTIFY BALANCED SOLUTIONS TO NATIONAL SECURITY CHALLENGES AFFECTING PRIVACY; TESTIFIED PURSUANT TO CONGRESSIONAL INVITATIONS.

4b (Code:) (Expenses $ 666,439. including grants of $) (Revenue $)

INTERNATIONAL HUMAN RIGHTS:
WORK WITH GLOBAL CIVIL SOCIETY PARTNERS TO REPRESENT THE HUMAN RIGHTS PERSPECTIVE IN INTERNET GOVERNANCE PROCEEDINGS, INCLUDING FORMAL SESSIONS OF THE INTERNET GOVERNANCE FORUM, AT ICANN, IN THE IETF, AND THROUGH THE FREEDOM ONLINE COALITION. CONDUCT AND PRESENT RESEARCH AND ANALYSIS OF THE HUMAN RIGHTS IMPLICATIONS OF GOVERNMENT MASS SURVEILLANCE AND CYBER SECURITY POLICES.

4c (Code:) (Expenses $ 632,797. including grants of $) (Revenue $)

CONSUMER PRIVACY:
WORK TO PROTECT CONSUMERS BY DEVELOPING PRIVACY STANDARDS AND SAFEGUARDS FOR THEIR DIGITAL INFORMATION AND DATA. PUBLISH COMMENTS AND ANALYSIS TO ADVANCE NATIONAL CONSUMER PRIVACY LEGISLATION, ENHANCE HEALTH PRIVACY LAWS AND PRACTICES, AND SUPPORT NATIONAL STUDENT PRIVACY LAW. CONDUCT RESEARCH AND ANALYSIS AROUND BEST CORPORATE PRACTICES FOR PRIVACY POLICIES AND DATA STEWARDSHIP, WITH THE GOAL OF ENHANCING CONSUMER CONTROL OF PERSONAL INFORMATION.

4d Other program services (Describe in Schedule O.)
(Expenses $ 1,948,174. including grants of $) (Revenue $)

4e Total program service expenses ▶ 4,080,566.

Part IV Checklist of Required Schedules

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

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		X
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		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		X
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):			
a	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
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
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 contributions? *If "Yes," complete Schedule M*	30		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	14		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
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	34		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		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		
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
c	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).**				
a	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	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
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		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? N/A		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	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:				
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders N/A	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	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.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		14b		

Form **990** (2014)

432005
11-07-14

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 [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	8		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ SEE SCHEDULE O

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

[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

FRIEDMAN & ASSOCIATES, P.C. - 301-279-8900

401 N. WASHINGTON STREET, #920, ROCKVILLE, MD 20850

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 ..... [X]

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.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) NUALA O'CONNOR PRESIDENT & CEO	40.00	X		X				314,465.	0.	9,923.
(2) DEIRDRE MULLIGAN CHAIR	0.50	X		X				0.	0.	0.
(3) DOUG LOWENSTEIN TREASURER	0.50	X		X				0.	0.	0.
(4) JERRY BERMAN DIRECTOR	0.50	X						0.	0.	0.
(5) BILL BERNSTEIN DIRECTOR	0.50	X						0.	0.	0.
(6) JILL LESSER DIRECTOR	0.50	X						0.	0.	0.
(7) IRA RUBINSTEIN DIRECTOR	0.50	X						0.	0.	0.
(8) DANIEL WEITZNER DIRECTOR	0.50	X						0.	0.	0.
(9) JAMES DEMPSEY VP FOR PUBLIC POLICY/SECRETARY	40.00			X				234,933.	0.	36,436.
(10) PORTIA WENZE-DANLEY COO	40.00			X				182,619.	0.	27,137.
(11) GREGORY NOJEIM SENIOR COUNSEL & POLICY DIRECTOR	40.00					X		173,216.	0.	23,980.
(12) JUSTIN BROOKMAN POLICY DIRECTOR	40.00					X		168,647.	0.	26,186.
(13) BRIAN WESOLOWSKI COMMUNICATIONS DIRECTOR	40.00					X		157,626.	0.	15,069.
(14) JOSEPH HALL CHIEF TECHNOLOGIST	40.00					X		129,214.	0.	21,340.
(15) EMMA LLANSO POLICY DIRECTOR	40.00					X		116,999.	0.	12,631.

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

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

	D	E	F
1b Sub-total ▶	1,477,719.	0.	172,702.
c Total from continuation sheets to Part VII, Section A ▶	0.	0.	0.
d Total (add lines 1b and 1c) ▶	1,477,719.	0.	172,702.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 11

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PRAETOR PUBLIC POLICY, AVENUE PERE HILAIRE 2 1150, BRUSSELS, BELGIUM	POLICY ANALYSIS	247,726.
COMMPOLI LIMITED, SEE SCHEDULE O, FOR FULL ADDRESS, UNITED KINGDOM	PROGRAM CONSULTANT	214,285.

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

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	704,450.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	4,160,334.				
	g Noncash contributions included in lines 1a-1f $						
	h Total. Add lines 1a-1f ▶			4,864,784.			
Program Service Revenue		Business Code					
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			4,617.			4,617.
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6 a Gross rents	26,421.					
	b Less: rental expenses	0.					
	c Rental income or (loss)	26,421.					
	d Net rental income or (loss) ▶			26,421.			26,421.
	7 a Gross amount from sales of assets other than inventory	(i) Securities 421,000.	(ii) Other				
	b Less: cost or other basis and sales expenses	419,668.	2,332.				
	c Gain or (loss)	1,332.	-2,332.				
	d Net gain or (loss) ▶			-1,000.			-1,000.
	8 a Gross income from fundraising events (not including $ 704,450. of contributions reported on line 1c). See Part IV, line 18	a	132,750.				
	b Less: direct expenses	b	512,294.				
	c Net income or (loss) from fundraising events ▶			-379,544.			-379,544.
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory ▶						
	Miscellaneous Revenue	Business Code					
	11 a ADMIN SUPPORT	900099		68,060.			68,060.
	b MISCELLANEOUS	900099		8,187.			8,187.
	c						
	d All other revenue						
	e Total. Add lines 11a-11d ▶			76,247.			
	12 Total revenue. See instructions. ▶			4,591,525.	0.	0.	-273,259.

432009 11-07-14

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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 individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	805,513.	473,955.	271,982.	59,576.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,117,403.	1,930,527.	77,908.	108,968.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	91,951.	86,045.	709.	5,197.
9 Other employee benefits	137,265.	128,815.	5,508.	2,942.
10 Payroll taxes	191,100.	158,977.	20,201.	11,922.
11 Fees for services (non-employees):				
a Management				
b Legal	81.		81.	
c Accounting	84,533.		84,533.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	48,000.			48,000.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	544,271.	542,982.	1,289.	
12 Advertising and promotion				
13 Office expenses	112,858.	68,878.	39,955.	4,025.
14 Information technology	27,659.	17,816.	8,971.	872.
15 Royalties				
16 Occupancy	367,135.	295,917.	51,740.	19,478.
17 Travel	254,788.	204,999.	35,103.	14,686.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	103,861.	37,640.	80.	66,141.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	53,891.	46,338.	4,325.	3,228.
23 Insurance	15,997.	14,323.	702.	972.
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.)				
a BOOKS/DUES/SUBS.	53,255.	47,397.	4,194.	1,664.
b MISCELLANEOUS	22,151.	9,857.	4,883.	7,411.
c COMPUTER EQUIPMENT	21,177.	16,100.	3,956.	1,121.
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	5,052,889.	4,080,566.	616,120.	356,203.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ [ ] if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	100.	1	100.
	2	Savings and temporary cash investments	2,862,795.	2	1,831,754.
	3	Pledges and grants receivable, net	430,494.	3	692,734.
	4	Accounts receivable, net	130,782.	4	412,979.
	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 employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	122,654.	9	159,872.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 550,516.			
	b	Less: accumulated depreciation — 10b: 417,266.	98,728.	10c	133,250.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	53,754.	15	35,201.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	3,699,307.	16	3,265,890.
Liabilities	17	Accounts payable and accrued expenses	188,821.	17	242,428.
	18	Grants payable		18	
	19	Deferred revenue	61,450.	19	35,000.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third 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	250,271.	26	277,428.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	3,166,131.	27	2,155,600.
	28	Temporarily restricted net assets	282,905.	28	832,862.
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	3,449,036.	33	2,988,462.
	34	Total liabilities and net assets/fund balances	3,699,307.	34	3,265,890.

Form **990** (2014)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,591,525.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,052,889.
3	Revenue less expenses. Subtract line 2 from line 1	3	-461,364.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,449,036.
5	Net unrealized gains (losses) on investments	5	790.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,988,462.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other ____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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
CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number
52-1905358

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.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An 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.)
10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
11 ☐ 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.

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

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

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

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

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

f Enter the number of supported organizations ....

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

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

Section A. Public Support

Calendar year (or fiscal year beginning 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.")	3,745,786.	3,872,992.	4,123,309.	3,304,255.	4,367,118.	19,413,460.
2 Tax revenues levied for the organization'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	3,745,786.	3,872,992.	4,123,309.	3,304,255.	4,367,118.	19,413,460.
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)						7,050,640.
6 **Public support.** Subtract line 5 from line 4						12,362,820.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	3,745,786.	3,872,992.	4,123,309.	3,304,255.	4,367,118.	19,413,460.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	49,477.	41,835.	52,576.	32,120.	31,038.	207,046.
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.)	41,745.	56,465.	53,714.	79,084.	76,247.	307,255.
11 **Total support.** Add lines 7 through 10						19,927,761.

12 Gross receipts from related activities, etc. (see instructions) | 12 |

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) | 14 | 62.04 %

15 Public support percentage from 2013 Schedule A, Part II, line 14 | 15 | 63.04 %

16a **33 1/3% support test - 2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ [X]

b **33 1/3% support test - 2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar 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.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning 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 on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No" describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	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 organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	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, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
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?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
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.**	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**	9c		
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.*	10a		
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.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):*

- a ☐ The organization satisfied the Activities Test. *Complete line 2 below.*
- b ☐ The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. *Answer (a) and (b) below.*			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. *Answer (a) and (b) below.*			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in *Part VI.*	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in *Part VI the role played by the organization in this regard.*	3b		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
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		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section 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		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2014 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
e	From 2013			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	**Excess distributions carryover to 2015.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
c				
d	Excess from 2013			
e	Excess from 2014			

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).

SCHEDULE A, LIST OF UNUSUAL GRANTS RECEIVED:

DESCRIPTION: MANIUNATH GOKARE V. FEDERAL EXPRESS CY PRES AWARD

DATE: 01/28/14 AMOUNT: 5.

DESCRIPTION: NETFLIX CY PRES AWARD

DATE: 10/09/14 AMOUNT: 497661.

Schedule A — Identification of Excess Contributions Included on Part II, Line 5 — 2014

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
AT&T	585,500.	186,945.
CALIFORNIA HEALTHCARE FOUNDATION	586,460.	187,905.
FACEBOOK	555,000.	156,445.
FORD FOUNDATION	400,000.	1,445.
GOOGLE, INC.	2,488,000.	2,089,445.
MACARTHUR FOUNDATION	400,000.	1,445.
MARKLE FOUNDATION	2,316,016.	1,917,461.
MICROSOFT	1,293,484.	894,929.
OPEN SOCIETY INSTITUTE	1,986,230.	1,587,675.
YAHOO	425,500.	26,945.

Total Excess Contributions to Schedule A, Part II, Line 5 .... 7,050,640.

Schedule A Identification of Unusual Grants 2014

** Do Not File **
*** Not Open to Public Inspection ***

Contributor's Name	Description of Grant	Date of Grant	Amount
CY PRES AWARD	MANIUNATH GOKARE V. FEDERAL EXPRESS CY PRES AWARD	01/28/14	5.
CY PRES AWARD	NETFLIX CY PRES AWARD	10/09/14	497,661.

Total Unusual Grants .... 497,666.

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2014

Name of the organization	Employer identification number
CENTER FOR DEMOCRACY AND TECHNOLOGY	52-1905358

Organization type (check one):

Filers of: **Section:**

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

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

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

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

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

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

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

Name of organization	Employer identification number
CENTER FOR DEMOCRACY AND TECHNOLOGY	52-1905358

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AT&T 1120 20TH STREET, NW WASHINGTON, DC 20036	$ 150,500.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	CALIFORNIA HEALTHCARE FOUNDATION 1438 WEBSTER STREET OAKLAND, CA 94612	$ 244,800.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	FACEBOOK, INC. 1155 F STREET, NW WASHINGTON, DC 20005	$ 147,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	GOOGLE, INC. 1101 NEW YORK AVENUE, NW WASHINGTON, DC 20005	$ 500,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5	MACARTHUR FOUNDATION 140 S DEARBORN ST STE 1100 CHICAGO, IL 60603	$ 400,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6	MARKLE FOUNDATION 10 ROCKEFELLER CENTER NEW YORK, NY 10020	$ 285,438.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number: 52-1905358

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MICROSOFT CORPORATION 1401 I STREET, NW WASHINGTON, DC 20005	$ 200,984.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
8	NETFLIX - CY PRES 100 WINCHESTER CIRCLE LOS GATOS, CA 95032	$ 497,661.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
9	OPEN SOCIETY INSTITUTE 224 WEST 57TH STREET NEW YORK, NY 10019	$ 600,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
10	THE FORD FOUNDATION 320 EAST 43RD STREET NEW YORK, NY 10017	$ 150,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number: 52-1905358

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

Name of organization: CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number: 52-1905358

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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

2014

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	Employer identification number
CENTER FOR DEMOCRACY AND TECHNOLOGY	52-1905358

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ $

3 Volunteer hours

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

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

(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-.

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	11,206.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	41,010.	
c Total lobbying expenditures (add lines 1a and 1b)	52,216.	
d Other exempt purpose expenditures	5,000,673.	
e Total exempt purpose expenditures (add lines 1c and 1d)	5,052,889.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	402,644.	

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

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	100,661.	
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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 Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	354,945.	358,802.	392,699.	402,644.	1,509,090.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,263,635.
c Total lobbying expenditures	82,232.	78,544.	71,256.	52,216.	284,248.
d Grassroots nontaxable amount	88,736.	89,701.	98,175.	100,661.	377,273.
e Grassroots ceiling amount (150% of line 2d, column (e))					565,910.
f Grassroots lobbying expenditures	6,807.	15,033.	10,686.	11,206.	43,732.

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 each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
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:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e 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?			
i 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)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

		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		

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

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (**do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

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

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047
2014
Open to Public Inspection

Name of the organization: CENTER FOR DEMOCRACY AND TECHNOLOGY
Employer identification number: 52-1905358

Part I 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
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ____

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" 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 ▶ $ ____

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

a Revenue included in Form 990, Part VIII, line 1 ▶ $ ____

b Assets included in Form 990, Part X ▶ $ ____

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other ______

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

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

Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

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

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

Part V **Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance					
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ ______ %
b Permanent endowment ▶ ______ %
c Temporarily restricted endowment ▶ ______ %

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

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

			Yes	No
(i)	unrelated organizations	3a(i)		
(ii)	related organizations	3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI **Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		151,218.	120,289.	30,929.
d Equipment		315,121.	220,650.	94,471.
e Other		84,177.	76,327.	7,850.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				133,250.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

Part X Other Liabilities.

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

1. (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 [X]

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements			1	5,104,609.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	790.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	512,294.		
e	Add lines 2a through 2d			2e	513,084.
3	Subtract line 2e from line 1			3	4,591,525.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	4,591,525.

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

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

1	Total expenses and losses per audited financial statements			1	5,565,183.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	512,294.		
e	Add lines 2a through 2d			2e	512,294.
3	Subtract line 2e from line 1			3	5,052,889.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	5,052,889.

Part XIII Supplemental Information.

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

PART X, LINE 2:

FOR THE YEAR ENDED DECEMBER 31, 2014, CDT HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN 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:

Part XIII Supplemental Information *(continued)*

FUNDRAISING EVENT EXPENSES SHOWN AS EXPENSE ON THE 512,294.
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON
FORM 990, PART VI, LINE 8B.

PART XII, LINE 2D - OTHER ADJUSTMENTS:
FUNDRAISING EVENT EXPENSES SHOWN AS EXPENSE ON THE 512,294.
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON
FORM 990, PART VI, LINE 8B.

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
2014
Open to Public Inspection

Name of the organization: CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number: 52-1905358

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	1	PROGRAM SERVICES	PARTICIPATION IN INTERNATIONAL CONFERENCES	488,832.
SOUTH AMERICA	0	0	PROGRAM SERVICES	PARTICIPATION IN INTERNATIONAL CONFERENCES AND ANALYSIS, COMMENTARY AND	4,628.
3 a Sub-total	0	1			493,460.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	1			493,460.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2014

SEE PART V FOR COLUMN (E) DESCRIPTIONS

432071
09-24-14

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 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 ▶

3 Enter total number of other organizations or entities ▶

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.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV **Foreign Forms**

1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes [X] No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)* ☐ Yes [X] No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes [X] No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes [X] No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes [X] No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* ☐ Yes [X] No

Part V Supplemental Information

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

PART I, LINE 3, COLUMN (E):

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PARTICIPATION IN INTERNATIONAL CONFERENCES AND ANALYSIS, COMMENTARY AND ADVOCACY ON POLICY ISSUES

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization: CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number: 52-1905358

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a [ ] Mail solicitations
- b [ ] Internet and email solicitations
- c [X] Phone solicitations
- d [X] In-person solicitations
- e [X] Solicitation of non-government grants
- f [ ] Solicitation of government grants
- g [X] Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [X] Yes [ ] No

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.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
JENNIFER CURLEY & ASSOCIATES - 919 18TH STREET, NW, SUITE	FUNDRAISING		X	837,200.	48,000.	789,200.
Total ▶				837,200.	48,000.	789,200.

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.

AZ,CA,CT,DC,FL,IL,MD,MA,MS,NH,TX,VA,WA

SEE PART IV FOR CONTINUATIONS

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 2014 TECHPROM (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	837,200.			837,200.
	2 Less: Contributions	704,450.			704,450.
	3 Gross income (line 1 minus line 2)	132,750.			132,750.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	24,002.			24,002.
	7 Food and beverages	150,596.			150,596.
	8 Entertainment	274,408.			274,408.
	9 Other direct expenses	63,288.			63,288.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				512,294.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-379,544.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	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 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

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? ☐ Yes ☐ No

b If "No," explain: ____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: ____

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 records:

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 amount 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 in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: JENNIFER CURLEY & ASSOCIATES

(I) ADDRESS OF FUNDRAISER:

919 18TH STREET, NW, SUITE 925, WASHINGTON, DC 20006

Part IV **Supplemental Information** *(continued)*

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2014
Open to Public Inspection

Name of the organization: CENTER FOR DEMOCRACY AND TECHNOLOGY
Employer identification number: 52-1905358

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☒ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) NUALA O'CONNOR	(i)	314,465.	0.	0.	0.	9,923.	324,388.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JAMES DEMPSEY	(i)	233,433.	1,500.	0.	14,096.	22,340.	271,369.	0.
VP FOR PUBLIC POLICY/SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) PORTIA WENZE-DANLEY	(i)	181,119.	1,500.	0.	10,957.	16,180.	209,756.	0.
COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) GREGORY NOJEIM	(i)	171,716.	1,500.	0.	10,393.	13,587.	197,196.	0.
SENIOR COUNSEL & POLICY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JUSTIN BROOKMAN	(i)	167,147.	1,500.	0.	10,119.	16,067.	194,833.	0.
POLICY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) BRIAN WESOLOWSKI	(i)	156,126.	1,500.	0.	9,458.	5,611.	172,695.	0.
COMMUNICATIONS DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JOSEPH HALL	(i)	127,714.	1,500.	0.	7,753.	13,587.	150,554.	0.
CHIEF TECHNOLOGIST	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 7:

IN ADDITION TO THE BONUSES REPORTED ON SCHEDULE J, PART II, EMMA LLANSO'S COMPENSATION ON PART VII OF THE FORM 990, ALSO INCLUDED A $1,500 BONUS.

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	**Supplemental Information to Form 990 or 990-EZ** Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990	OMB No. 1545-0047 **2014** Open to Public Inspection

Name of the organization	Employer identification number
CENTER FOR DEMOCRACY AND TECHNOLOGY	52-1905358

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

HEALTH PRIVACY POLICY

EXPENSES $ 293,408. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

COMMUNICATIONS

EXPENSES $ 276,734. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

NET NEUTRALITY

EXPENSES $ 240,926. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

1ST AMENDMENT

EXPENSES $ 221,252. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

ARCHITECTURE

EXPENSES $ 210,088. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

COPYRIGHT

EXPENSES $ 193,808. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

MARKLE INITIATIVE/TASK FORCE

EXPENSES $ 109,296. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

EU OFFICE

EXPENSES $ 322,006. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

Name of the organization	Employer identification number
CENTER FOR DEMOCRACY AND TECHNOLOGY	52-1905358

GLOBAL NETWORK INITIATIVE

EXPENSES $ 40,343. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

INTERNET EDUCATION FOUNDATION

EXPENSES $ 32,743. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

DIGITAL FOURTH

EXPENSES $ 7,570. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

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

THE 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE MANAGING DIRECTOR OF FINANCE & OPERATIONS AND THE VP FOR PUBLIC POLICY.

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

EACH DIRECTOR, PRINCIPAL OFFICER, AND MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS ANNUALLY SIGNS A STATEMENT THAT AFFIRMS THAT SUCH PERSON:

HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY;

HAS READ AND UNDERSTANDS THE POLICY;

HAS AGREED TO COMPLY WITH THE POLICY;

UNDERSTANDS THAT THE CENTER FOR DEMOCRACY AND TECHNOLOGY IS A CHARITABLE ORGANIZATION AND THAT, IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION, IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES; AND AGREES TO DISCLOSE ANY RELATIONSHIPS, POSITIONS OR CIRCUMSTANCES WHICH MAY PRESENT OR CONTRIBUTE TO A CONFLICT OF INTEREST AS DEFINED IN THIS POLICY.

IF THE BOARD OR COMMITTEE HAS A REASONABLE CAUSE TO BELIEVE THAT AN

Name of the organization: CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number: 52-1905358

INTERESTED PERSON HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT TAKES APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

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

COMPENSATION DECISIONS REGARDING THE CEO ARE REVIEWED AND VOTED ON BY THE BOARD OF DIRECTORS. THE BOARD USES COMPARABILITY DATA AND THE DECISION WAS DOCUMENTED. THE MOST RECENT REVIEW WAS COMPLETED IN DECEMBER 2014.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AZ,CA,CT,FL,IL,MD,MA,MS,NH,NY,TX,VA,WA

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST. IT MAKES ITS ANNUAL AUDITS AVAILABLE ON ITS WEBSITE AND UPON REQUEST.

FORM 990, PART VII, SECTION B:

COMMPOLI LIMITED

ADDRESS: WINDEN, MILL LANE, BALCOMBE, HAYWARDS HEATH WEST SUSSEX, RH17 6QU, UNITED KINGDOM

FORM 990, PART IX, LINE 11G, OTHER FEES:

INTERNATIONAL PROGRAM WORK:

PROGRAM SERVICE EXPENSES	474,993.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	474,993.

Name of the organization: CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number: 52-1905358

U.S. PROGRAM WORK:

PROGRAM SERVICE EXPENSES	61,790.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	61,790.

SUPPLIER FEES:

PROGRAM SERVICE EXPENSES	6,199.
MANAGEMENT AND GENERAL EXPENSES	1,289.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	7,488.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	544,271.

● If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

● If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
File by the due date for filing your return. See instructions.	CENTER FOR DEMOCRACY AND TECHNOLOGY	52-1905358
	Number, street, and room or suite no. If a P.O. box, see instructions. 1634 I STREET, N.W., NO. 1100	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20006-4003	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

● The books are in the care of ▶ FRIEDMAN & ASSOCIATES, P.C.
401 N. WASHINGTON STREET, #920 - ROCKVILLE, MD 20850

Telephone No. ▶ 301-279-8900 Fax No. ▶

● If the organization does not have an office or place of business in the United States, check this box ▶ [ ]

● If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ [ ] . If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until NOVEMBER 15, 2015.

5 For calendar year 2014 , or other tax year beginning ______ , and ending ______ .

6 If the tax year entered in line 5 is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS REQUIRED TO FILE A COMPLETE AND ACCURATE RETURN.

8a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	$ 0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$ 0.
c	**Balance due.** Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	$ 0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ Title ▶ CPA Date ▶

TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 199

FOR THE YEAR ENDING

DECEMBER 31, 2014

Prepared for	CENTER FOR DEMOCRACY AND TECHNOLOGY 1634 I STREET, N.W. NO. 1100 WASHINGTON, DC 20006-4003
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930
Amount due or refund	NO PAYMENT REQUIRED
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THE FORM 199 RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE FTB, AND NO FURTHER ACTION IS REQUIRED. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE FTB.

400941
05-01-14

TAXABLE YEAR **2014**

California Exempt Organization Annual Information Return

428941 11-26-14 FORM **199**

Calendar Year 2014 or fiscal year beginning (mm/dd/yyyy) , and ending (mm/dd/yyyy)

Corporation/Organization Name	California corporation number
CENTER FOR DEMOCRACY AND TECHNOLOGY	8814003
Additional information. See instructions.	FEIN 52-1905358
Street address (suite or room) 1634 I STREET, N.W., NO. 1100	PMB no.
City WASHINGTON / State DC	ZIP code 20006-4003
Foreign country name / Foreign province/state/county	Foreign postal code

A First Return: Yes [ ] No [X]
B Amended Return: Yes [ ] No [X]
C IRC Section 4947(a)(1) trust: Yes [ ] No [X]
D Final Information Return? [ ] Dissolved [ ] Surrendered (Withdrawn) [ ] Merged/Reorganized Enter date: (mm/dd/yyyy)
E Check accounting method: (1) [ ] Cash (2) [X] Accrual (3) [ ] Other
F Federal return filed? (1) [ ] 990T (2) [ ] 990-PF (3) [ ] Sch H (990)
G Is this a group filing? See instructions. Yes [ ] No [X]
H Is this organization in a group exemption? Yes [ ] No [X]
If "Yes," what is the parent's name?
I Did the organization have any changes to its guidelines not reported to the FTB? See instructions. Yes [ ] No [X]
J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. Yes [X] No [ ]
K Is the organization exempt under R&TC Section 23701g? Yes [ ] No [X]
If "Yes," enter the gross receipts from nonmember sources $
L If organization is exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required. [X]
M Is the organization a Limited Liability Company? Yes [ ] No [X]
N Did the organization file Form 100 or Form 109 to report taxable income? Yes [ ] No [X]
O Is the organization under audit by the IRS or has the IRS audited in a prior year? Yes [ ] No [X]
P Is an IRS Form 1023/1024 pending? Yes [ ] No [X]
Date filed with IRS

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8		661,035. 00
	2	Gross dues and assessments from members and affiliates		00
	3	Gross contributions, gifts, grants, and similar amounts received	STMT 1	4,864,784. 00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than $50,000, see General Instruction B		5,525,819. 00
	5	Cost of goods sold	00	
	6	Cost or other basis, and sales expenses of assets sold	422,000. 00	
	7	Total costs. Add line 5 and line 6		422,000. 00
	8	Total gross income. Subtract line 7 from line 4		5,103,819. 00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18		5,565,183. 00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8		-461,364. 00
Filing Fee	11	Filing fee $10 or $25. See General Instruction F		N/A 00
	12	Total payments		00
	13	Penalties and Interest. See General Instruction J		00
	14	Use tax. See General Instruction K		00
	15	Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result		00

Sign Here

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

Signature of officer ▶ Title PRESIDENT/CEO Date Telephone

Paid Preparer's Use Only

Preparer's signature ▶ Date Check if self-employed ▶ [ ] PTIN

Firm's name (or yours, if self-employed) and address ▶ GELMAN, ROSENBERG & FREEDMAN
4550 MONTGOMERY AVE SUITE 650N
BETHESDA, MD 20814-2930

FEIN 52-1392008
Telephone (301) 951-9090

May the FTB discuss this return with the preparer shown above? See instructions [X] Yes [ ] No

CENTER FOR DEMOCRACY AND TECHNOLOGY 52-1905358

Part II Organizations with gross receipts of more than $50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

428951 11-26-14

Receipts from Other Sources	1 Gross sales or receipts from all business activities. See instructions	1	132,750. 00
	2 Interest	2	4,617. 00
	3 Dividends	3	00
	4 Gross rents	4	26,421. 00
	5 Gross royalties	5	00
	6 Gross amount received from sale of assets (See Instructions) STATEMENT 2	6	421,000. 00
	7 Other income SEE STATEMENT 3	7	76,247. 00
	8 Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	661,035. 00
Expenses and Disbursements	9 Contributions, gifts, grants, and similar amounts paid	9	00
	10 Disbursements to or for members	10	00
	11 Compensation of officers, directors, and trustees SEE STATEMENT 4	11	805,513. 00
	12 Other salaries and wages	12	2,117,403. 00
	13 Interest	13	00
	14 Taxes	14	191,100. 00
	15 Rents	15	367,135. 00
	16 Depreciation and depletion (See instructions)	16	53,891. 00
	17 Other Expenses and Disbursements SEE STATEMENT 5	17	2,030,141. 00
	18 Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	5,565,183. 00

Schedule L Balance Sheets

Assets	Beginning of taxable year (a)	(b)	End of taxable year (c)	(d)
1 Cash		2,862,895.		1,831,854.
2 Net accounts receivable		130,782.		412,979.
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments				
10 a Depreciable assets	467,815.		550,516.	
b Less accumulated depreciation	(369,087.)	98,728.	(417,266.)	133,250.
11 Land				
12 Other assets STMT 6		606,902.		887,807.
13 Total assets		3,699,307.		3,265,890.
Liabilities and net worth				
14 Accounts payable		188,821.		242,428.
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities STMT 7		61,450.		35,000.
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		3,449,036.		2,988,462.
22 Total liabilities and net worth		3,699,307.		3,265,890.

Schedule M-1 Reconciliation of income per books with income per return
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000.

1 Net income per books	-460,574.	7 Income recorded on books this year not included in this return. STMT 8	790.
2 Federal income tax		8 Deductions in this return not charged against book income this year	
3 Excess of capital losses over capital gains		9 Total. Add line 7 and line 8	790.
4 Income not recorded on books this year		10 Net income per return. Subtract line 9 from line 6	-461,364.
5 Expenses recorded on books this year not deducted in this return			
6 Total. Add line 1 through line 5	-460,574.		

FORM 199 CASH CONTRIBUTIONS INCLUDED ON PART I, LINE 3 STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
ADOBE SYSTEMS	888 16TH STREET, NW WASHINGTON, DC 20006	12/31/14	20,000.
AIRBNB, INC.	888 BRANNAN STREET SAN FRANCISCO, CA 94103	12/31/14	6,000.
AMAZON.COM-C	126 C STREET SE WASHINGTON, DC 20003	12/31/14	42,000.
AOL, INC.	1050 K STREET, NW WASHINGTON, DC 20001	12/31/14	48,500.
APPLE COMPUTER	1200 G STREET, NW WASHINGTON, DC 20005	12/31/14	34,500.
AT&T	1120 20TH STREET, NW WASHINGTON, DC 20036	12/31/14	150,500.
BLUE CROSS BLUE SHIELD ASSOCIATION	1310 G STREET, NW WASHINGTON, DC 20005	12/31/14	17,000.
BRUNSWICK GROUP LLC	1099 NEW YORK AVENUE NORTHWEST #300 WASHINGTON, DC 20001	12/31/14	8,500.
BUSINESS SOFTWARE ALLIANCE	20 F STREET, NW WASHINGTON, DC 20004	12/31/14	20,683.
CALIFORNIA HEALTHCARE FOUNDATION	1438 WEBSTER STREET OAKLAND, CA 94612	12/31/14	244,800.
COMCAST	300 NJ AVENUE, NW WASHINGTON, DC 20001	12/31/14	58,500.
COMSCORE NETWORKS	11950 DEMOCRACY DRIVE, SUITE 600 RESTON, VA 20190	12/31/14	8,500.
CONSUMER ELECTRONICS ASSOCIATION	1919 SOUTH EADS ARLINGTON, VA 22202	12/31/14	8,500.
COVINGTON & BURLING	1201 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20004	12/31/14	8,500.
CABLEVISION	825 SEVENTH AVENUE NEW YORK, NY 10019	12/31/14	19,500.

DAVIS WRIGHT, LLP	1919 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20006	12/31/14	8,500.
DEMOCRACY ENGINE	2125 14TH ST NW, WASHINGTON, DC 20009	12/31/14	81,715.
DISCONNECT, INC	25 DIVISION STREET, SUITE 205 SAN FRANCISCO, CA 94103	12/31/14	21,889.
DROPBOX, INC.	185 BERRY STREET SAN FRANCISCO, CA 94107	12/31/14	8,500.
EBAY	1250 I STREET, NW WASHINGTON, DC 20004	12/31/14	17,000.
ENTERTAINMENT SOFTWARE ASSN	575 7TH STREET, NW WASHINGTON, DC 20004	12/31/14	24,250.
FACEBOOK, INC.	1155 F STREET, NW WASHINGTON, DC 20005	12/31/14	147,000.
GOOGLE, INC.	1101 NEW YORK AVENUE, NW WASHINGTON, DC 20005	12/31/14	500,000.
HEWLETT PACKARD	1331 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20004	12/31/14	60,000.
HOGAN LOVELLS US LLP	555 13TH STREET, NW WASHINGTON, DC 20004	12/31/14	8,500.
ICANN	801 17TH STREET, NW, SUITE 400 WASHINGTON, DC 20006	12/31/14	8,500.
IMS	ONE IMS WAY PLYMOUTH MEETING, PA 19462	12/31/14	8,500.
INTEL	1155 F STREET, NW WASHINGTON, DC 20004	12/31/14	33,500.
INTUIT	601 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20004	12/31/14	33,500.
IRA RUBINSTEIN	5157 NE LATIMER PLACE SEATTLE, WA 98105	12/31/14	6,000.
JENNER & BLOCK LLP	1099 NY AVENUE, NW; SUITE 900 WASHINGTON, DC 20001	12/31/14	8,500.
KELLEY, DRYE & WARREN, LLP	3050 K STREET, NW WASHINGTON, DC 20007	12/31/14	8,500.
LINKED IN	209 STIERLIN COURT MOUNTAIN VIEW, CA 94043	12/31/14	33,500.

MACARTHUR FOUNDATION	140 S DEARBORN ST STE 1100 CHICAGO, IL 60603	12/31/14	400,000.
MADRONA FOUNDATION	1000 SECOND AVENUE, 34TH FLOOR SEATTLE, WA 98104-1022	12/31/14	50,000.
MANATT, PHELPS & PHILLIPS, LLP	7 TIMES SQUARE NEW YORK, NY 10036	12/31/14	21,900.
MARKLE FOUNDATION	10 ROCKEFELLER CENTER NEW YORK, NY 10020	12/31/14	285,438.
WILL & EMERY MCDERMOTT	THE MCDERMOTT BUILDING - 500 NORTH CAPITOL STREET, N.W. WASHINGTON, DC 20001	12/31/14	8,500.
MICROSOFT CORPORATION	1401 I STREET, NW WASHINGTON, DC 20005	12/31/14	200,984.
MOZILLA CORP	1981 LANDINGS DRIVE MOUNTAIN VIEW, CA 94043	12/31/14	8,500.
ALLEGRO GROUP	ECOMMERCE EUROPE, RUE DE TREVES 59-61 BRUSSELS BELGIUM 1040	12/31/14	12,327.
NATIONAL PHILANTHROPIC TRUST	165 TOWNSHIP LINE ROAD, SUITE 150 JENKINTOWN, PA 19046	12/31/14	20,000.
NCTA	25 MASSACHUSETTS AVENUE, NW WASHINGTON, DC 20001	12/31/14	33,500.
NETFLIX - CY PRES	100 WINCHESTER CIRCLE LOS GATOS, CA 95032	12/31/14	497,661.
NIELSON COMPANY	770 BROADWAY NEW YORK, NY 10003	12/31/14	8,500.
OMDUSA, LLC	555 MARKET STREET, SUITE 750 SAN FRANCISCO, CA 94105	12/31/14	9,500.
OPEN SOCIETY INSTITUTE	224 WEST 57TH STREET NEW YORK, NY 10019	12/31/14	600,000.
PALANTIR TECHNOLOGIES, INC.	100 HAMILTON AVENUE PALO ALTO, CA 94301	12/31/14	78,500.
PERKINS COIE LLP	1201 THIRD AVENUE SEATTLE, WA 98105	12/31/14	17,000.
PITNEY BOWES	409 12TH STREET, NW WASHINGTON, DC 20024	12/31/14	27,000.

QUALCOMM	2001 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20006	12/31/14	75,000.
REED ELSEVIER	230 PARK AVENUE NEW YORK, NY 10169	12/31/14	17,000.
SALESFORCE.COM	THE LANDMARK ONE MARKET, SUITE 300 SAN FRANCISCO, CA 94105	12/31/14	50,000.
SIDLEY, AUSTIN, BROWN	1501 K STREET, NW WASHINGTON, DC 20005	12/31/14	8,500.
SURESCRIPTS	2800 CRYSTAL DRIVE ARLINGTON, VA 22202	12/31/14	8,500.
THE FORD FOUNDATION	320 EAST 43RD STREET NEW YORK, NY 10017	12/31/14	150,000.
THE HERB BLOCK FOUNDATION	1730 M ST NW #901 WASHINGTON, DC 20036	12/31/14	15,000.
THE PRIVACY PROJECTS	2351 VIRGINIA STREET BERKELEY, CA 94709	12/31/14	32,500.
TIME WARNER CABLE	901 F STREET, NW WASHINGTON, DC 20004	12/31/14	8,500.
TRUE ULTIMATE STANDARDS EVERYWHERE	835 MARKET STREET, SUITE 800, BOX 137 SAN FRANCISCO, CA 94103	12/31/14	8,500.
TWITTER	1101 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20004	12/31/14	28,500.
VERISIGN-C	12061 BLUEMONT WAY RESTON, VA 20190	12/31/14	38,500.
VERIZON	1300 I STREET, NW WASHINGTON, DC 20005	12/31/14	78,500.
VISA USA INC	1300 CONNECTICUT AVENUE, NW WASHINGTON, DC 20036	12/31/14	73,500.
NOKIA	1401 K STREET, NW, SUITE 450 WASHINGTON, DC 20005	12/31/14	33,500.
VRADENBURG	2901 WOODLAND DRIVE, NW WASHINGTON, DC 20008	12/31/14	8,500.
WALT DISNEY	500 SOUTH BUENA VISTA STREET BURBANK, CA 91521	12/31/14	8,500.
WILMER CUTLER PICKERING HALE & DORR LLP	1875 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20006	12/31/14	8,500.

YAHOO	101 CONSTITUTION AVENUE, NW WASHINGTON, DC 20001	12/31/14	62,000.
TOTAL INCLUDED ON LINE 3			4,706,647.

FORM 199 GROSS AMOUNT FROM SALE OF ASSETS STATEMENT 2

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
SALE OF SECURITIES			PURCHASED

COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
419,668.	0.	0.	421,000.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
LOSS ON SALE DISPOSAL OF ASSETS			PURCHASED

COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
2,332.	0.	0.	0.

	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
TOTAL TO FORM 199, PAGE 2, LN 6	422,000.	0.	0.	421,000.

FORM 199 OTHER INCOME STATEMENT 3

DESCRIPTION	AMOUNT
MISCELLANEOUS	8,187.
ADMIN SUPPORT	68,060.
TOTAL TO FORM 199, PART II, LINE 7	76,247.

FORM 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 4

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
NUALA O'CONNOR 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	PRESIDENT & CEO 40.00	324,388.
DEIRDRE MULLIGAN 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	CHAIR 0.50	0.
DOUG LOWENSTEIN 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	TREASURER 0.50	0.
JERRY BERMAN 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	DIRECTOR 0.50	0.
BILL BERNSTEIN 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	DIRECTOR 0.50	0.
JILL LESSER 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	DIRECTOR 0.50	0.
IRA RUBINSTEIN 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	DIRECTOR 0.50	0.
DANIEL WEITZNER 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	DIRECTOR 0.50	0.
JAMES DEMPSEY 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	VP FOR PUBLIC POLICY/SECRE 40.00	271,369.
PORTIA WENZE-DANLEY 1634 I STREET, N.W., NO. 1100 WASHINGTON, DC 20006-4003	COO 40.00	209,756.
TOTAL TO FORM 199, PART II, LINE 11		805,513.

FORM 199	OTHER EXPENSES	STATEMENT 5

DESCRIPTION	AMOUNT
BOOKS/DUES/SUBS.	53,255.
MISCELLANEOUS	22,151.
COMPUTER EQUIPMENT	21,177.
DIRECT EXPENSES OF FUNDRAISING EVENTS	512,294.
PENSION PLAN CONTRIBUTIONS	91,951.
OTHER EMPLOYEE BENEFITS	137,265.
LEGAL FEES	81.
ACCOUNTING FEES	84,533.
PROFESSIONAL FUNDRAISING FEES	48,000.
OTHER PROFESSIONAL FEES	544,271.
OFFICE EXPENSES	112,858.
INFORMATION TECHNOLOGY	27,659.
TRAVEL	254,788.
CONFERENCES AND CONVENTIONS	103,861.
INSURANCE	15,997.
TOTAL TO FORM 199, PART II, LINE 17	2,030,141.

FORM 199	OTHER ASSETS	STATEMENT 6

DESCRIPTION	BEG. OF YEAR	END OF YEAR
PLEDGES AND GRANTS RECEIVABLE	430,494.	692,734.
PREPAID EXPENSES AND DEFERRED CHARGES	122,654.	159,872.
SECURITY DEPOSITS	53,754.	15,749.
DUE FROM RELATED PARTIES	0.	19,452.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	606,902.	887,807.

FORM 199	OTHER LIABILITIES	STATEMENT 7

DESCRIPTION	BEG. OF YEAR	END OF YEAR
DEFERRED REVENUE	61,450.	35,000.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	61,450.	35,000.

FORM 199 — INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED IN THIS RETURN — STATEMENT 8

DESCRIPTION	AMOUNT
UNREALIZED GAIN	790.
TOTAL TO FORM 199, SCHEDULE M-1, LINE 7	790.

TAXABLE YEAR

2014 Political or Legislative Activities by Section 23701d Organizations

429181 12-18-14

CALIFORNIA FORM

3509

For calendar year 2014 or fiscal year beginning (mm/dd/yyyy) ______________, and ending (mm/dd/yyyy) ______________.

Attach to Form 199. FTB 199N filers see instructions.

Corporation/Organization name			California corporation number
CENTER FOR DEMOCRACY AND TECHNOLOGY			8814003
Street address (suite, room, or PMB no.) 1634 I STREET, N.W., NO. 1100			FEIN 52-1905358
City WASHINGTON	State DC	ZIP Code 20006-4003	

Part I - Political Activities

Complete if the organization supported or opposed a candidate for public office. See instructions.

1 Has the organization participated or intervened in any political campaign on behalf of any elective public office candidate? 1 ☐ Yes ☒ No

If "Yes," describe the activities. Provide a summary of any published material relating to the activities.

2 Has the organization contributed funds to support or oppose any individual public office candidate, or any organizations formed to support or oppose a public office candidate? 2 ☐ Yes ☒ No

If "Yes," describe the activities. Include the name of the individual or organization the organization contributed to, the amount paid, and date of contribution.

Part II - Legislative Activities

Complete if the organization attempted to influence legislation.

3 Has the organization attempted to influence any national, state or local legislation, or ballot measure and not filed a federal Form 5768, Election/Revocation of Election by an Eligible Section 501(c)(3) Organization to Make Expenditures to Influence Legislation? 3 ☒ Yes ☐ No

If "Yes," See instructions.

SEE STATEMENT 9

4a Has the organization, during the 2014 taxable year, filed a federal election Form 5768? See instructions 4a ☐ Yes ☒ No

If "Yes," attach a copy of federal Form 5768 filed with the Internal Revenue Service and skip question 4b. This fulfills the organization's need to file an election for state purpose. If "No", go to question 4b.

4b Has the organization filed a federal election Form 5768 in a prior year that has not been revoked? 4b ☐ Yes ☒ No

Note: The organization **cannot** make this election if it is a church, an integrated auxiliary of a church, a private foundation, or an affiliated organization.

Furnish the following financial information for the taxable year:

5 **Exempt Purpose Expenditures**
The total amount paid or incurred to accomplish the charitable, educational, religious, etc. purpose 5 $ 5,000,673.00

6 **Lobbying Expenditures**
The total amount expended for the purpose of influencing legislation through communication with any member or employee of a legislative body or any government official or employee who may participate in the formation of legislation 6 $ 41,010.00

7 **Grass Roots Expenditures**
The amount expended to influence any legislation through attempts to affect the opinions of the general public or any segment of it 7 $ 11,206.00

IN 2014, CDT'S ATTEMPTS TO INFLUENCE LEGISLATION FOCUSED MAINLY ON MEASURES BEFORE THE U.S. CONGRESS. THE MAIN TOPICS THAT WE ADDRESSED WERE CYBERSECURITY; GOVERNMENT SURVEILLANCE (PARTICULARLY PROPOSALS TO REFORM THE ELECTRONIC COMMUNICATIONS PRIVACY ACT (ECPA) AND THE USA PATRIOT ACT); COPYRIGHT; INTERNET GOVERNANCE; AND CONSUMER PRIVACY (INCLUDING NATIONAL CONSUMER PRIVACY LEGISLATION, STUDENT PRIVACY, AND HEALTH PRIVACY). SPECIFIC ACTIVITIES THAT MIGHT HAVE CONSTITUTED LOBBYING UNDER THE FEDERAL DEFINITIONS OF LOBBYING INCLUDED DRAFTING ADVOCACY DOCUMENTS TAKING A POSITION ON LEGISLATION; COMMUNICATING WITH MEMBERS OF CONGRESS AND THEIR STAFF ABOUT SPECIFIC BILLS; AND WORKING WITH OTHER GROUPS TO JOINTLY ADVOCATE SHARED POSITIONS ON SPECIFIC BILLS. PUBLISHED MATERIALS ON LEGISLATION CONSISTED OF MEMOS AND BLOG POSTS INTENDED FOR A GENERAL AUDIENCE AND ARE AVAILABLE ON OUR WEBSITE, WWW.CDT.ORG. IN CALIFORNIA, WE HAVE ADVOCATED FOR LEGISLATION AROUND ECPA REFORM IN THE STATE.

022
Date Accepted ______________________ **DO NOT MAIL THIS FORM TO THE FTB**

TAXABLE YEAR **2014**

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organization name	Identifying number
CENTER FOR DEMOCRACY AND TECHNOLOGY	52-1905358

Part I Electronic Return Information (whole dollars only)

1	Total gross receipts (Form 199, line 4)	1	5,525,819. 00
2	Total gross income (Form 199, line 8)	2	5,103,819. 00
3	Total expenses and disbursements (Form 199, line 9)	3	5,565,183. 00

Part II Settle Your Account Electronically for Taxable Year 2014

4 ☐ Electronic funds withdrawal 4a Amount 4b Withdrawal date (mm/dd/yyyy)

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number

6 Account number 7 Type of account: ☐ Checking ☐ Savings

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2014 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider, the reason(s) for the delay.**

Sign Here ▶ Signature of Officer | Date | ▶ PRESIDENT & CEO Title

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2014 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for four years from the due date of the return or four years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign

ERO's signature ▶	Date	Check if also paid preparer ☐ / Check if self-employed ☐	ERO's PTIN
Firm's name (or yours if self-employed) and address ▶	GELMAN, ROSENBERG & FREEDMAN		FEIN 52-1392008
	4550 MONTGOMERY AVE SUITE 650N		
	BETHESDA, MD		ZIP Code 20814-2930

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign

Paid preparer's signature ▶	Date	Check if self-employed ☐	Paid preparer's PTIN
Firm's name (or yours if self-employed) and address ▶	GELMAN, ROSENBERG & FREEDMAN		FEIN 52-1392008
	4550 MONTGOMERY AVE SUITE 650N		
	BETHESDA, MD		ZIP Code 20814-2930

TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM RRF-1

FOR THE YEAR ENDING

DECEMBER 31, 2014

Prepared for	CENTER FOR DEMOCRACY AND TECHNOLOGY 1634 I STREET, N.W. NO. 1100 WASHINGTON, DC 20006-4003
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930
Mail tax return to	REGISTRY OF CHARITABLE TRUSTS P.O. BOX 903447 SACRAMENTO, CA 94203-4470
Return must be mailed on or before	NOVEMBER 16, 2015
Special Instructions	THE RETURN SHOULD BE SIGNED AND DATED BY AN AUTHORIZED INDIVIDUAL. ENCLOSE A CHECK FOR $150 MADE PAYABLE TO ATTORNEY GENERAL'S REGISTRY OF CHARITABLE TRUSTS. INCLUDE "FORM RRF-1," THE REPORT YEAR AND THE ORGANIZATION'S STATE CHARITY REGISTRATION NUMBER AND/OR ORGANIZATION NUMBER ON THE REMITTANCE.

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
Telephone: (916) 445-2021

WEB SITE ADDRESS:

http://ag.ca.gov/charities/

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of $800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number: CT 122974

Check if:
☐ Change of address
☐ Amended report

CENTER FOR DEMOCRACY AND TECHNOLOGY
Name of Organization

1634 I STREET, N.W., NO. 1100
Address (Number and Street)

WASHINGTON, DC 20006-4003
City or Town, State and ZIP Code

Corporate or Organization No. 8814003

Federal Employer I.D. No. 52-1905358

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)
Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than $25,000	0	Between $100,001 and $250,000	$50	Between $1,000,001 and $10 million	$150
Between $25,000 and $100,000	$25	Between $250,001 and $1 million	$75	Between $10,000,001 and $50 million	$225
				Greater than $50 million	$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning 01/01/2014 ending 12/31/2014) list:
Gross annual revenue $ 4,591,525. Total assets $ 3,265,890.

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

		Yes	No
1.	During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2.	During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3.	During this reporting period, did non-program expenditures exceed 50% of gross revenues?		X
4.	During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X
5.	During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider. STMT 10	X	
6.	During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.		X
7.	During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.		X
8.	Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.		X
9.	Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	X	

Organization's area code and telephone number 202-637-9800

Organization's e-mail address

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of authorized officer	Printed Name	Title	Date
	NUALA O'CONNOR	PRESIDENT & CEO	

FORM RRF-1 INFORMATION REGARDING PROFESSIONAL FUND-RAISING SERVICES PART B, LINE 5 STATEMENT 10

JENNIFER CURLEY & ASSOCIATES
919 18TH ST NW, STE 925,
WASHINGTON, DC 20006

202-263-2574