#### . Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is always.irs.gov/form990.

| IIIICI       | TIGHT I YEAR OLD          | ac ocivice        |   |                  |                   |  |                          |                     | <del> </del>                             |                     |                 | Marie R          |
|--------------|---------------------------|-------------------|---|------------------|-------------------|--|--------------------------|---------------------|--|---------------------|-----------------|------------------|
| Α            | For the                   | 2013 calen        | dar year, or tax                              | year begin       | ning 7/0          | 1  | , 20                     | 13, and endin       | g 6/30                                   |                     | , 2014          |                  |
| В            | Check if a                | applicable        | C   |                  |                   |  |                          |                     | D  | Employer Iden       | tification Nur  | mber             |
|              |                           | ess change        | THE INDEP                                     | TMTCMT           | TNSTTTIT          | Έ  |                          |                     |  | 94-3008             | 370             |                  |
|              | $\vdash$                  |                   | 100 SWAN                                      |                  |                   |  |                          |                     | E  | Telephone num       |                 |                  |
|              | $\vdash$                  | e change          | OAKLAND,                                      |                  |                   |  |                          |                     | -  |                     |                 |                  |
|              | Inita                     | al return         | OMILIMD,                                      | CA 7402          | 4                 |  |                          |                     | ļ  | (510) 6             | <u>32-136</u>   | )6               |
|              | Tem                       | nınated           |   |                  |                   |  |                          |                     | i  |                     |                 |                  |
|              | Ame                       | nded retum        |   |                  |                   |  |                          |                     | G  | Gross receipts      | \$ 3,           | 381,972.         |
|              | Appl                      | lication pending  | F Name and add                                | ress of principa | l officer DA      | VID J.   | THEROU                   | X                   | H(a) Is this a grou                      | ip return for subo  | ordinates?      | Yes X No         |
|              |                           |                   | Same As C                                     | : Above          |                   |  |                          |                     | H(b) Are all subc                        | rdinates include    | d?              | Yes No           |
| _            | Tay-av                    | empt status       | X 501(c)(3)                                   | 501(c) (         | ) <b>4</b> (u     | sert no )  | 4947(a)(1                | ) or   527          | If No, attac                             | n a list (see in:   | structions) -   | _                |
| ÷            |                           | <del></del>       |   |                  |                   | 150111107  | 1017(4)(1                | 7 01 1027           | H(c) Group exem                          |                     | <b>-</b>        |                  |
| <del></del>  |                           |                   | W.INDEPEN                                     |                  | $\overline{}$     | 1 -  |                          |                     |  | <del>`,</del>       |                 |                  |
| K            |                           | of organization   | X Corporation                                 | Trust            | Association       | Other►   |                          | L Year of format    | ion 1986                                 | M State of          | legal domicil   | e CA             |
| Pa           | apit IIž                  | Summar            | <b>y</b>                                      |                  |                   |  |                          |                     |  |                     |                 |                  |
|              | 1 B                       | Briefly descri    | be the organiza                               | ation's miss     | ion or most s     | significant a  | activities:              | <u>Independ</u>     | <u>ent Rese</u>                          | <u>arch &amp; I</u> | <u> Educat:</u> | <u>ional</u>     |
| a            |                           | Organiza          | tion  |                  |                   |  | <del>-</del> -           |                     |  |                     |                 |                  |
| Governance   | i -                       |                   |   |                  |                   |  |                          |                     | _ <b>_</b>                               |                     |                 |                  |
| E            | -                         |                   |   |                  |                   |  |                          |                     |  |                     |                 |                  |
| Š            | 2 0                       | heck this bo      | ox ► If the                                   | organizatio      | n discontinu      | ed its opera   | ations or c              | isposed of mo       | ore_than 25%                             | of its net as       | ssets.          |                  |
| Ğ            | 3 1                       | lumber of vo      | oting members                                 | of the gove      | rning body (f     | ⊃art VI, <b>(</b> į <del>ni</del> e  | F(a)                     | 25. 38              | <i>→                    </i>             | 3                   |                 | 12               |
| ~ರ           | 4 N                       |                   | dependent voti                                |                  |                   |  |                          |                     | - ( D)                                   | 4                   |                 | 10               |
| Ę.           | 5 T                       | otal number       | of individuals                                | employed II      | n calendar ye     | ear 2013∬( <u>P</u>  |                          |                     | ?,<br>!ic ` \ .                          | 5                   |                 | 29               |
| Activities & | 6 T                       |                   | of volunteers                                 |                  |                   |  | 12JUN                    | 1.1 6 2015          |  | 6                   |                 | 23               |
| Ac           | 7a ⊺                      | otal unrelate     | ed business re                                | venue from       | Part VIII, col    | lumn (C)∭[i̯   | ne 12                    | 1 7 0 E             | 10                                       | 7 a                 |                 | 0.               |
|              | bΛ                        | let unrelated     | d business taxa                               | able income      | from Form 9       | 990-T, line 3  | 34                       | 78 B B 2770 277     | 12 3 18                                  | 7 b                 |                 | -24,031.         |
|              |                           |                   |   |                  |                   |  |                          | الالمالية           | Prior                                    | Year                | Curr            | rent Year        |
|              | 8 0                       | Contributions     | and grants (P                                 | art VIII, line   | : 1h) .           | !_   |                          | •                   | 2.2                                      | 65,086.             | 2.              | 388,547.         |
| Revenue      | 1                         |                   | vice revenue (F                               |                  |                   |  |                          |                     |  | 83,379.             |                 | 245,680.         |
| ē            | 1                         | -                 | ncome (Part VI                                |                  |                   | and 7d).   |                          |                     |  | 15,382.             | <u> </u>        | 141,642.         |
| æ            | 1                         |                   | ie (Part VIII, co                             | •                | •                 | -  |                          | •                   |  | 15,502.             |                 | 141,042.         |
|              |                           |                   | e – add lines 8                               |                  |                   |  |                          | Line 12\            | 3 0                                      | 63,847.             | 2               | 775,869.         |
| _            |                           |                   | imilar amounts                                |                  |                   |  |                          | 7, 1110 12,         | 3,0                                      | 96,000.             | 2,              | 57,000.          |
|              |                           |                   |   | . ,              | -                 | -  | رد                       |                     | ` <b></b>                                | 96,000.             |                 | 37,000.          |
|              | i i                       | •                 | to or for mem                                 | =                | =                 | -  |                          |                     | ·  | - 100               |                 | 242 500          |
| Ø            | 15 S                      | =                 | er compensation                               |                  | -                 |  |                          | nes 5-10)           | 1,2                                      | 04,499.             | 1,              | ,348,708.        |
| esc.         | 16a F                     | Professional      | fundraising fee                               | es (Part IX,     | column (A),       | line 11e)  |                          | • •                 |  |                     |                 |                  |
| Expenses     | . БТ                      | rotai fundrai     | sing expenses                                 | (Part IX, co     | lumn (D), lin     | ie 25)►  |                          | 207,767.            |  |                     |                 |                  |
| 益            | 17 (                      |                   | ses (Part IX, co                              | -                |                   | _  |                          |                     | 1 0                                      | 86,983.             | 1               | 116,146.         |
|              | 1                         | •                 | •   | • • •            |                   | ·-   | 'A) lina 26              |                     |  |                     |                 |                  |
|              | 1                         |                   | ses. Add lines 1                              | =                |                   |  | A), iiiie za             | 2)                  |  | 87,482.             | <u></u>         | <u>,521,854.</u> |
|              | 19 F                      | Revenue les       | s expenses. Su                                | ibtract line     | 18 from line      | 12   | • •                      |                     | ·  6                                     | <u>76,365.</u>      |                 | <u>254,015.</u>  |
| 25           | <u> </u>                  |                   |   |                  |                   |  |                          |                     |  | Current Year        |                 | of Year          |
| Assets       | 20 ₹                      | Fotal assets      | (Part X, line 16                              | 5)               |                   | •  |                          | •                   | 5,1                                      | 37,460.             | 5,              | <u>,952,282.</u> |
|              | 21 T                      | Fotal liabilitie  | es (Part X, line                              | 26)              |                   |  |                          |                     | 1  | <u>25,617.</u>      |                 | <u>88,367.</u>   |
| Net          | 22 1                      | Vet assets o      | r fund balance:                               | s. Subtract I    | ine 21 from       | line 20 .  |                          |                     | 5.0                                      | 11,843.             | 5.              | ,863,915.        |
| P            | and Harri                 | Signatu           | re Block                                      |                  |                   | <del></del>  |                          |                     |  |                     |                 |                  |
|              |                           |                   |   | //               |                   |  |                          | nto and to the best | of my languaged                          | nd belief it is to  |                 | .d               |
| CON          | ierpenaiue:<br>iplete Dec | claration of prep | lare that I have examinate (other than office | er) is based on  | all information o | of which prepare   | er tras any kn           | owledge.            | of the knowledge a                       | na bener, it is at  | ie, conect, an  | •                |
|              |                           |                   |   | 1 -              |                   | The state of the s | <del></del>              |                     |  | 1-10-               | 201             | 7                |
| C:           |                           | Storiate          | ure of officer                                |                  |                   |  |                          | <del></del>         | Date                                     | <u> </u>            | 701             | <del>7</del>     |
| ان<br>ا      | gn                        |                   | TANK  |                  | nero              |  |                          | Dan                 | CIDO.                                    | 4                   |                 |                  |
| п            | ere                       |                   | INTUIL  | <u> </u>         | IERO              | UX_  |                          | TRE                 | SIDEA                                    | <u> </u>            |                 |                  |
|              |                           |                   | r print name and tit                          | e                | 1:                |  |                          |                     |  |                     | I DTIS          |                  |
|              |                           | P⊓nt∕Type         | preparer's name                               |                  | Preparer's sig    | nature<br>/  | $\overline{\mathcal{L}}$ | Date                | Che                                      | eck X ıf            | PTIN            |                  |
| Pa           | aid                       | J. BA             | RRY MACDO                                     | NALD             | 1/15 -            | zilla  | ulta                     | als 10/24.          | /14 self                                 | -employed           | P00044          | 4656             |
|              | epare                     | Firm's nam        | e ►J.BA                                       | RRY MAQ          | ONALD.            | CPA  |                          |                     |  |                     |                 |                  |
|              | se Onl                    |                   |   | DEERWOOD         |                   | 200  |                          |                     |  | n's EIN ► 94        | 1300354         | 17               |
|              |                           | - I min s audi    |   |                  |                   |  |                          |                     | <del></del>                              |                     |                 | -4770            |
| A 4          | N. 45 - 17                | )C 4 "            |   |                  | A 94583-          |  |                          |                     | IPho                                     | one no. (92         |                 |                  |
|              |                           |                   | nis return with                               |                  |                   |  |                          |                     |  | •                   | . X Ye          | s No             |
| H A          |                           | ra                | 1 a ali . adi a sa 1 ad 1                     |                  | <u></u>           |  |                          | 70                  | E A A 1 1 21 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 2                   | E 0.            | ~~ ann (3013)    |

| Check is Stended to Contains a response on note to any line in this Part III   X   Check is Stended to Contains a response on note to any line in this Part III   X   X   X   X   X   X   X   X   X   |     | 990 (2013) THE INDEPENDENT INSTITUTE   | 94-300                     | 08370             | )               | Ρ                       | age 2         |
|---|-----|--|----------------------------|-------------------|-----------------|-------------------------|---------------|
| Reservice the cogenization's mission:   Independent Research & Educational Organization   | Par | C Production C Pro |                            |                   |                 |                         |               |
| Independent Research & Educational Organization   |     |  |                            |                   |                 |                         | X             |
| 2 Did the organization undertake any significant program services during the year which were not listed on the prior form 900 or 900-227.  If Yes, Gascribe these new services on Schedule O  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If Yes, Yes Conduction cease conducting, or make significant changes in how it conducts, any program services?  If Yes, Yes Conduction or year and section 40%(10) that size equired to report the amount of grants and electron 40%(10) that size equired to report the amount of grants and electron 40%(10) that size equired to report the amount of grants and electron 40%(10) that size equired to report the amount of grants and electrons to others, the total expenses, and revenue, if any, for each program service reported.  4a (Code: ) (Expenses \$ 970,164, including grants of \$ ) (Ravenue \$ )  Books and Publications. The Independent Institute is a non-profit, non-partisan, scholarly research and educational organization that sponsors in-depth studies of critical social and economic issues. The resulting studies are published and widely distributed as books, articles in the Independent Review, Policy Reports, Working Papers, DVD S, audio and video files, and commentaries. These materials are disseminated via high visibility media/communications practices and can be evaluated not only by experts, but also by opinion leaders in the media, business, religion, and other fields, interested non-professionals who want to better understand the issues, and policy makers who seek to make intelligent choices between conflicting policy options.  4b(Code: ) (Expenses \$ 522,397, including grants of \$ ) (Ravenue \$ )  Research, The Institute's research program pursues its scholarly and educational mission through seven centers; Culture and Civil Society, Educational Excellence, Entrepreneurial Innovation, Global Prosperity, Health and the Environment, Law and Justice, and Peace and Liberty. Each center's mission is to evaluate, refine, a  | 1   | •  |                            |                   |                 |                         |               |
| Yes   No   Yes   Yes   No   Yes   No   Yes   No   Yes   Section through comparison of the organization cease conducting, or make significant changes in how it conducts, any program services?   Yes   No   Yes, describe these changes on Schedule O.   Yes   No   Yes, describe these changes on Schedule O.   Yes, describe these changes on the organization of the organization organiz          |     | Independent Research & Educational Organization  |                            |                   |                 |                         |               |
| Yes   No   Yes   Yes   No   Yes   No   Yes   No   Yes   Section through comparison of the organization cease conducting, or make significant changes in how it conducts, any program services?   Yes   No   Yes, describe these changes on Schedule O.   Yes   No   Yes, describe these changes on Schedule O.   Yes, describe these changes on the organization of the organization organiz          |     |  |                            |                   |                 |                         |               |
| Yes   No   Yes   Yes   No   Yes   No   Yes   No   Yes   Section through comparison of the organization cease conducting, or make significant changes in how it conducts, any program services?   Yes   No   Yes, describe these changes on Schedule O.   Yes   No   Yes, describe these changes on Schedule O.   Yes, describe these changes on the organization of the organization organiz          |     |  | •                          |                   |                 |                         |               |
| Yes   No   If Yes, describe these new services on Schedule O   If Yes, describe these new services on Schedule O   If Yes, describe these changes on Schedule O.   Yes   No   Revenue S.   Yes   Yes   No   Revenue S.   Yes             |     | Did the organization undertake any significant program services during the year which were not listed or   | the prior                  |                   |                 |                         |               |
| 13 Did the organization cease conducting, or make significant changes in how it conducts, any program services. 3 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 50(i,6) and 50(i,6) organization and section 4947(a)(i) husts are required to report the amount of grants and stoccations to others, the brial expenses, and revenue, if any, for each program service reported.  4a (Code: ) (Expenses \$ 970,164, including grants of \$ ) (Revenue \$ )  Books and Publications. The Independent Institute is a non-profit, non-partisan, scholarly research and educational organization that sponsors in-depth studies of critical social and economic issues. The resulting studies are published and widely distributed as books, articles in The Independent Review, Policy Reports, Working Papers, DV's, audio and video files, and commentaries. These materials are disseminated via high visibility media/communications practices and can be evaluated not only by experts, but also by opinion leaders in the media, business, religion, and other fields, interested non-professionals who want to better understand the issues, and policy makers who seek to make intelligent choices between conflicting policy options.  4b(Code: ) (Expenses \$ 522,397, including grants of \$ ) (Revenue \$ )  Research. The Institute's research program pursues its scholarly and educational mission through seven centers: Culture and Civil Society, Educational Excellence, Entrepreneurial Innovation, Global Prosperity, Health and the Environment, law and Justice, and Peace and Liberty, Each center's mission is to evaluate, refine, and propose analysis and solutions to major social and economic issues, which are hased on independent scholarly inquiry and adhere to the highest peer-review standards. In so doing, each center seeks to foster rational, objective, fact-based discourse that illuminates the actual nature of major issues and rede  | _   |  | Tato prior                 |                   | /es             | $\overline{\mathbf{y}}$ | No            |
| 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes No If Yes, ideasing the organization's program service accomplications for each of its three largest program services, as measured by expenses. Section 501(6)(6) and 501(6) organizations and section 4407(8)) that 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 \$ 970.164, including grants of \$ ) (Rowenue \$ )  Books and Publications. The Independent Institute is a non-profit, non-partisan, scholarly research and educational organization that sponsors in-depth studies of critical social and economic issues. The resulting studies are published and widely distributed as books, articles in The Independent Review, Policy Reports, Morking Papers, DVD's, audio and video files, and commentaries. These materials are disseminated via high visibility media/communications practices and can be evaluated not only by experts, but also by opinion leaders in the media, business, religion, and other fields, interested non-professionals who want to better understand the issues, and policy makers who seek to make intelligent choices between conflicting policy options.  4b (Code: ) (Expenses \$ 522,397. including grants of \$ ) (Revenue \$ )  Research. The Institute's research program pursues its scholarly and educational mission through seven centers: Culture and Civil Society, Educational Excellence, Entrepreneurial Innovation, Global Prosperity, Health and the Environment, Law and Justice, and Peace and Liberty. Each center's mission is to evaluate, refine, and propose analysis and solutions to major social and economic issues, which are based on independent scholarly inquiry and adhere to the highest peer-review standards. In so doing, each center's seeks to foster rational, objective, fact-based discourse that illuminates the actual nature of major issues and redefines and redirects public debate a  |     | If 'Yes,' describe these new services on Schedule O  |                            | Ш.                |                 | 11                      | •••           |
| H Yes, describe these changes on Schedule O.  A Describe the organization; program services accomplishments for each of its three largest program services, as measured by expenses Section 50(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, it any, for each program service reported.  4a (Code: ) (Expenses \$ 970,164, including grants of \$ ) (Revenue \$ )  Books and Publications. The Independent Institute is a non-profit, non-partisan, scholarly research and educational organization that sponsors in-depth studies of critical social and economic issues. The resulting studies are published and widely distributed as books, articles in The Independent Review, Policy Reports, Working Papers, DVD's, audio and video files, and commentaries. These materials are disseminated via high visibility media/communications practices and can be evaluated not only by experts, but also by opinion leaders in the media, business, religion, and other fields, interested non-professionals who want to better understand the issues, and policy makers who seek to make intelligent choices between conflicting policy options.  4b (Code: ) (Expenses \$ 522,397, including grants of \$ ) (Revenue \$ )  Research. The Institute's research program pursues its scholarly and educational mission through seven centers: Culture and Civil Society, Educational Excellence, Entrepreneurial Innovation, Global Prosperity, Health and the Environment, Law and Justice, and Peace and Liberty. Each center's mission is to evaluate, refine, and propose analysis and solutions to major social and economic issues, which are based on independent scholarly inquiry and adhere to the highest peer-review standards. In so doing, each center seeks to foster rational, objective, fact-based discourse that illuminates the actual nature of major issues and redefines and redirects public debate away from reliance on interest-group politics.  4c (Code: ) (Expenses \$ 422,1 | 3   |  | rvices?                    |                   | Yes             | X                       | No            |
| Section 50(6(3) and 5016(4) organizations and section 4847(a)() frusts 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:  |     |  |                            | اا                |                 | تت                      |               |
| Books and Publications. The Independent Institute is a non-profit, non-partisan, scholarly research and educational organization that sponsors in-depth studies of critical social and economic issues. The resulting studies are published and widely distributed as books, articles in The Independent Review, Policy Reports, Working Papers, DVD's, audio and video files, and commentaries. These materials are disseminated via high visibility media/communications practices and can be evaluated not only by experts, but also by opinion leaders in the media, business, religion, and other fields, interested non-professionals who want to better understand the issues, and policy makers who seek to make intelligent choices between conflicting policy options.  4b(Code )(Expenses \$ 522,397. including grants of \$ )(Revenue \$ )  Research. The Institute's research program pursues its scholarly and educational mission through seven centers: Culture and Civil Society, Educational Excellence, Entrepreneurial Innovation, Global Prosperity, Health and the Environment, Law and Justice, and Peace and Liberty. Each center's mission is to evaluate, refine, and propose analysis and solutions to major social and economic issues, which are based on independent scholarly inquiry and adhere to the highest peer-review standards. In so doing, each center seeks to foster rational, objective, fact-based discourse that illuminates the actual nature of major issues and redefines and redirects public debate away from reliance on interest-group politics.  4c (Code: )(Expenses \$ 422,194. including grants of \$ )(Revenue \$ )  Newsletters and Conferences. To advance individual understanding of its mission, the Institute publishes summaries of its work in the weekly email newsletter, The Lighthouse, and the quarterly newsletter, The Independent; sponsors special events and Independent Policy Forums to bring together scholars and policy experts to debate issues and discours their implications; and maintains an extensive online archive of Institute articles an  | 4   | Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the ar  | ices, as me<br>nount of gr | asured<br>ants an | by ex<br>d allo | kpens<br>catio          | ses<br>ons to |
| scholarly research and educational organization that sponsors in-depth studies of critical social and economic issues. The resulting studies are published and widely distributed as books, articles in The Independent Review, Policy Reports, Working Papers, DVD's, audio and video files, and commentaries. These materials are disseminated via high visibility media/communications practices and can be evaluated not only by experts, but also by opinion leaders in the media, business, religion, and other fields, interested non-professionals who want to better understand the issues, and policy makers who seek to make intelligent choices between conflicting policy options.  4b (Code   | 4 a |  | •                          |                   |                 |                         | )             |
| critical social and economic issues. The resulting studies are published and widely distributed as books, articles in The Independent Review, Policy Reports, Working Papers, DVD's, audio and video files, and commentaries. These materials are disseminated via high visibility media/communications practices and can be evaluated not only by experts, but also by opinion leaders in the media, business, religion, and other fields, interested non-professionals who want to better understand the issues, and policy makers who seek to make intelligent choices between conflicting policy options.  4b (Code:  |     |  |                            |                   |                 |                         |               |
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| Papers, DVD's, audio and video files, and commentaries. These materials are disseminated via high visibility media/communications practices and can be evaluated not only by experts, but also by opinion leaders in the media, business, religion, and other fields, interested non-professionals who want to better understand the issues, and policy makers who seek to make intelligent choices between conflicting policy options.  4b(Code )(Expenses \$ 522,397. including grants of \$ )(Revenue \$ )  Research. The Institute's research program pursues its scholarly and educational mission through seven centers: Culture and Civil Society, Educational Excellence, Entrepreneurial Innovation, Global Prosperity, Health and the Environment, Law and Justice, and Peace and Liberty. Each center's mission is to evaluate, refine, and propose analysis and solutions to major social and economic issues, which are based on independent scholarly inquiry and adhere to the highest peer-review standards. In so doing, each center seeks to foster rational, objective, fact-based discourse that illuminates the actual nature of major issues and redefines and redirects public debate away from reliance on interest-group politics.  4c(Code: )(Expenses \$ 422,194. including grants of \$ )(Revenue \$ )  Newsletters and Conferences. To advance individual understanding of its mission, the Institute publishes summaries of its work in the weekly email newsletter, The Lighthouse, and the quarterly newsletter, The Independent; sonsors special events and Independent Policy Forums to bring together scholars and policy experts to debate issues and discuss their implications, and maintains an extensive online archive of Institute articles and studies on a variety of topics for research and personal education. The Institute continues to enhance the educational website, MyGovCost.org; Government Cost Calculator, which helps visitors learn more about federal government spending and debt and its personal impact on their future.  |     |  |                            |                   |                 |                         | Y             |
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|    |   |      | Yes | No |
|----|---|------|-----|----|
| 1  | 'Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Yes, complete Schedule A   | 1    | _x  |    |
| 2  | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?   | 2    | Х   |    |
| 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    |     | Х  |
| 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    |     | Х  |
| 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    |     | х  |
| 7  | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II  | 7    |     | 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    |     | Х  |
| 9  | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV                            | 9    |     | X  |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part $V$  | 10   | Х   |    |
| 11 | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.   | 1.1  |     |    |
|    | a Did the organization report an amount for land, buildings and equipment in Part X, line 107f 'Yes,' complete Schedule D, Part VI  | 11 a | Х   |    |
|    | <b>b</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  |     | х  |
|    | 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  | 11 c |     | х  |
|    | <b>d</b> 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   | 11 d |     | x  |
|    | e Did the organization report an amount for other liabilities in Part X, line 25?If 'Yes,' complete Schedule D, Part X  | 11 e |     | 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)% 'Yes,' complete Schedule D, Part X   | 11 f |     | X  |
| 12 | a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII   | 12a  | Х   |    |
|    | 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  |     | Х  |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule $E$   | 13   |     | Х  |
| 14 | a Did the organization maintain an office, employees, or agents outside of the United States?   | 14a  |     | X  |
|    | <b>b</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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i> | 14b  |     | Х  |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV  | 15   |     | Х  |
| 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   |     | Х  |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)   | 17   |     | Х  |
| 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   |     | Х  |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a3f 'Yes,' complete Schedule G, Part III  | 19   |     | Х  |
| 20 | a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H   | 20   |     | Х  |
|    | <b>b</b> If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?   | 20 b |     |    |

Form 990 (2013) THE INDEPENDENT INSTITUTE

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 organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II  | 21        |     | Х      |
| 22   | Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2º If 'Yes,' complete Schedule I, Parts I and III   | 22        | Х   |        |
| 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        |     | Х      |
| 24 a | a 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      |
| Ŀ    | b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  | 24b       |     |        |
| C    | 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       |     |        |
| c    | d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  | 24d       |     |        |
| 25 a | a Section 501(c)(3) and 501(c)(4) organizationsDid the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I  | 25a       |     | Х      |
| ŀ    | 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-EZ3f 'Yes,' complete Schedule L, Part I  | 25b       |     | Х      |
| 26   | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?<br>If so, complete Schedule L, Part II  | 26        |     | Х      |
| 27   | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III                          | 27        |     | Х      |
|      | 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):  |           | ,   |        |
| ā    | A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV  | 28a       |     | X      |
| ı    | <b>b</b> A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV  | 28b       |     | х      |
|      | 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  Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | 28c<br>29 | Х   | х      |
| 30   | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M   | 30        |     | Х      |
| 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        |     | х      |
| 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        |     | х      |
|      | Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1  | 34        | Х   |        |
|      | a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a       |     | X      |
| 1    | 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)?/f 'Yes,' complete Schedule R, Part V, line 2   | 35b       |     |        |
| 36   | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2  | 36        |     | х      |
| 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        |     | х      |
| 38   | Note. All Form 990 filers are required to complete Schedule O  | 38        | Х   |        |
| BAA  | A  | Form      | 990 | (2013) |

### Form 990 (2013) THE INDEPENDENT INSTITUTE 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

|     | Check if Schedule O contains a response or note to any line in this Part V  |   |      |          |        |
|-----|---|---|------|----------|--------|
|     | \   |   |      | Yes      | No     |
| 1 a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  | 1a 52   |      |          | -      |
| b   | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable   | 1b 0  |      |          |        |
| c   | ں<br>Did the organization comply with backup withholding rules for reportable payments to vendor:   | s and reportable gaming                             |      |          |        |
|     | (gambling) winnings to prize winners?   |   | 1 c  | X        |        |
| 2 a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return   | <b>2a</b> 29  |      |          |        |
| b   | olf at least one is reported on line 2a, did the organization file all required federal employmen   |   | 2 b  | <u>X</u> | 1      |
|     | Note. If the sum of lines 1a and 2a is greater than 250, you may be required toe-file (see inst   |   |      |          |        |
| 3 a | Did the organization have unrelated business gross income of \$1,000 or more during the yea   | ·   | 3 a  |          | X      |
| b   | olf 'Yes' has it filed a Form 990-T for this year'lf 'No' to line 3b, provide an explanation in Schedule O  |   | 3 b  |          |        |
| 4 a | At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other fi                            | or other authority over, a nancial account)?        | 4 a  |          | Х      |
| b   | olf 'Yes,' enter the name of the foreign country.►  |   |      |          |        |
|     | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and F  | inancial Accounts.                                  |      |          |        |
| 5 a | Nas the organization a party to a prohibited tax shelter transaction at any time during the ta  | x year?   | 5 a  |          | Х      |
|     | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelf   | er transaction?                                     | 5 b  |          | Х      |
| c   | : If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?  |   | 5 c  |          |        |
| 6 a | Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?  | nd did the organization                             | 6 a  |          | Х      |
| ŧ   | b If 'Yes,' did the organization include with every solicitation an express statement that such c<br>not tax deductible?  | ontributions or gifts were                          | 6 ь  |          |        |
| 7   | Organizations that may receive deductible contributions under section 170(c).   |   | -    |          |        |
| á   | a Did the organization receive a payment in excess of \$75 made partly as a contribution and p  | artly for goods and                                 |      |          |        |
|     | services provided to the payor?   | <b>,</b> 5  | 7 a  |          | Х      |
|     | olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?  |   | 7 b  |          |        |
| •   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for w<br>Form 8282?   | hich it was required to file                        | 7 c  |          | Х      |
| •   | d If 'Yes,' indicate the number of Forms 8282 filed during the year   | 7 d   |      |          |        |
| •   | e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal   | benefit contract?                                   | 7 e  |          | X      |
|     | Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber  |   | 7 f  |          | Х      |
| 9   | g If the organization received a contribution of qualified intellectual property, did the organizat as required?  | on file Form 8899                                   | 7 g  |          |        |
| ł   | n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?  | e organization file a                               | 7 h  |          |        |
| 8   | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year? | ng organization <b>S</b> id the ave excess business | 8    |          |        |
| 9   | Sponsoring organizations maintaining donor advised funds.   |   |      |          |        |
|     | a Did the organization make any taxable distributions under section 4966?   |   | 9 a  |          |        |
| ١   | b Did the organization make a distribution to a donor, donor advisor, or related person?  |   | 9 b  |          |        |
|     | Section 501(c)(7) organizations Enter:  |   |      |          |        |
|     | a Initiation fees and capital contributions included on Part VIII, line 12  | 10 a  | ]    |          |        |
|     | b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   | 10b   |      |          |        |
|     | Section 501(c)(12) organizations Enter:   |   | -    | '        |        |
|     | a Gross income from members or shareholders   | 11a   |      |          |        |
|     | b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)   | 116   |      | -        |        |
|     | a Section 4947(a)(1) non-exempt charitable trustsIs the organization filing Form 990 in lieu of   | 1   | 12 a |          |        |
|     | b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year   | 12b   |      |          |        |
|     | Section 501(c)(29) qualified nonprofit health insurance issuers.  |   |      |          |        |
|     | a Is the organization licensed to issue qualified health plans in more than one state?  |   | 13a  |          |        |
|     | Note. See the instructions for additional information the organization must report on Schedu  | le 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   |      |          |        |
|     | a 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 S  | Schedule O  | 14b  |          |        |
| BAA | TEEA0105L 07/02/13  |   | Form | 990      | (2013) |

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X

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

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

| Sec  | tion A. Governing Body and Management   |         |       |              |
|------|---|---------|-------|--------------|
|      |   |         | Yes   | No           |
| 1 a  | Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad  |         |       |              |
|      | authority to an executive committee or similar committee, explain in Schedule O.  | 1       |       |              |
|      | Enter the number of voting members included in line 1a, above, who are independent  1b  10  |         |       | - 0          |
| 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? See Schedule 0   | 2       | Χ     |              |
| 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       |       | Х            |
| 4    | Did the organization make any significant changes to its governing documents  |         |       |              |
|      | since the prior Form 990 was filed?   | 4       |       | Х            |
| 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       | Х     |              |
| 7 a  | 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?  | 7 a     | Х     |              |
| t    | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?   | 7 b     | Х     |              |
| 8    | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:   |         |       |              |
| a    | The governing body?   | 8 a     | X     |              |
|      | Each committee with authority to act on behalf of the governing body?   | 8ь      | 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       |       | Х            |
| Sec  | tion B. Policies (This Section B requests information about policies not required by the Internal Rev   | enue    | Code  | <del>)</del> |
|      |   |         | Yes   | No           |
| 10 a | Did the organization have local chapters, branches, or affiliates?  | 10 a    |       | X            |
| t    | o 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?  | 10 b    | -     |              |
| 11 a | a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?   | 11 a    | Х     |              |
| ŀ    | Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O  |         | ·     |              |
|      | Did the organization have a written conflict of interest policy? If 'No,' go to line 13   | 12a     | X     |              |
| ŀ    | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?   | 12b     | Х     |              |
| (    | Schedule 0 how this was done See Schedule 0   | 12 c    | Х     |              |
| 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?  |         |       |              |
| á    | The organization's CEO, Executive Director, or top management official See Schedule O   | 15 a    | Х     |              |
| ŀ    | Other officers of key employees of the organization See Schedule 0  | 15b     | Х     |              |
|      | If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)  |         | -     |              |
| 16   | a 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     |       | Х            |
| I    | o If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its<br>participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the<br>organization's exempt status with respect to such arrangements? | 16 b    |       |              |
| Sec  | tion C. Disclosure  | 1.02    |       | L            |
|      | List the states with which a copy of this Form 990 is required to be filed None   |         |       |              |
| 18   | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply.   | vailab  | e for | public       |
| 19   | Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available.  | able to |       |              |
|      | the public during the tax year.  See Schedule 0  State the name, physical address, and telephone number of the person who possesses the books and records of the organization.  | anızat  | ıon   |              |
|      | MARY L.G. THEROUX 100 SWAN WAY, SUITE 200 OAKLAND CA 94621 (510) 632-1366   |         |       |              |
| BAA  |   | Form    | 990 ( | (2013)       |

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

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

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

- 1 a 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

| C  | Check this box if neither the organization | n nor any   | relate                         | d or                                      | gani     | ızatı  | on cor                       | тре      | nsated any current of        | ficer, director, or trus     | tee.                                    |
|--|--|---|--------------------------------|---|----------|--|------------------------------|----------|------------------------------|------------------------------|---|
| Name and Tute  |  | [   |                                |   | (C       | ;)   |                              |          |                              |                              |   |
| Company   Comp | (A)<br>Name and Title                      | Average   | one bo                         | ne box, unless per<br>officer and a direc |          | ersor  | ııs both                     | an<br>)  | Reportable compensation from | Reportable compensation from | Estimated<br>amount of other            |
| Director   |  | any hours<br>for related<br>organiza-<br>tions<br>below<br>dotted | Individual trustee or director | Institutional trustee                     | Officer  | Key employee                                     | Highest compensated employee | Former   | (W-2/1099-MISC)              |                              | from the<br>organization<br>and related |
| C2   SALLY HARRIS  | (1) JOHN HAGEL III                         | 0   |                                |   | i        |  |                              |          |                              |                              |   |
| Director   |  | +   | X                              |   |          |  |                              |          | 0.                           | 0.                           | 0.                                      |
| (3) PETER HOWLEY   |  |   | 1                              |   |          |  |                              |          |                              |                              |   |
| Director   |  |   | X                              |   |          |  |                              |          | 0.                           | 0.                           | 0.                                      |
| (4) DIETER TEDE       0       0       X       0.  |  |   | ļ                              |   |          |  |                              |          |                              |                              |   |
| Director   |  |   | X                              |   |          |  |                              |          | 0.                           | 0.                           | 0.                                      |
| Column   |  | <b></b>   | ļ                              |   |          |  |                              |          |                              |                              |   |
| Director & Pres   O  |  | <del></del>   | X_                             |   |          |  |                              |          | 0.                           | 0.                           | 0.                                      |
| Column   |  |   | ļ                              |   |          |  |                              |          |                              | _                            |   |
| Director & VP  |  |   | X                              |   | Х        |  |                              |          | 11,600.                      | 0.                           | 0.                                      |
| O  |  |   | ļ                              |   |          |  |                              |          |                              | _                            | _                                       |
| Director   |  |   | X                              |   | Х        |  |                              |          | 0.                           | 0.                           | 0.                                      |
| B   SUSAN SOLINSKY   O   | _ <del>_</del>                             | <del>-</del>  | ١                              |   |          |  |                              |          |                              | _                            | _                                       |
| Director   |  |   | X                              | <u> </u>                                  | _        | _  |                              |          | 0.                           | 0.                           | 0.                                      |
| O  |  |   | ļ ,,                           |   |          |  |                              |          |                              | _                            |   |
| Director   |  |   | X                              | ╂   | -        |  |                              | <b>.</b> | 0.                           | 0.                           | 0.                                      |
| Columbia   Columbia  |  | <del>-</del>  | ·                              |   |          |  |                              |          |                              | •                            | •                                       |
| Director         0 X         0.         0.         0.           (11) GARY SCHLARBAUM         0         X         0.         0.         0.           Director         0 X         0.         0.         0.         0.           Director         0 X         0.         0.         0.         0.           (13) MARTIN BUERGER         36   |  |   | <u>X</u>                       | 1   | _        |  |                              |          | 0.                           | U.                           | 0.                                      |
| Columbia   |  |   | · •                            |   |          |  |                              |          |                              | 0                            | 0                                       |
| Director         0 X         0.         0.         0.           (12) DAVID TEECE         0         X         0.         0.         0.           Director         0 X         0.         0.         0.         0.           (13) MARTIN BUERGER         36<   |  | <del></del>   | <b>├</b> ^                     | 1   |          |  | <u> </u>                     |          | 0.                           | 0.                           | <u> </u>                                |
| (12) DAVID TEECE     0       Director     0 X       (13) MARTIN BUERGER     36       Vice President     0 X       (14) IVAN ELAND     40   103,156. 0. 0.  |  |   | t v                            |   |          |  |                              |          | 0                            | 0                            | 0                                       |
| Director         0         X         0.         0.         0.           (13) MARTIN BUERGER         36         X         103,156.         0.         0.           Vice President         0         X         103,156.         0.         0.           (14) IVAN ELAND         40         40         0.         0.         0.   |  | +   | <b>├</b> ^                     | $\vdash$                                  | ├        |  |                              | -        | 0.                           | U.                           |   |
| (13) MARTIN BUERGER     36       Vice President     0       (14) IVAN ELAND     40   103,156. 0. 0.  |  |   | † x                            |   |          |  |                              |          | n                            |                              | n                                       |
| Vice President         0         X         103,156.         0.         0.           (14) IVAN ELAND         40         40         0.         0.         0.   |  |   | <del>  ^</del>                 | +-  |          | <del>                                     </del> |                              |          | 0.                           | 0.                           |   |
| (14) IVAN ELAND 40   |  |   | †                              |   | x        |  |                              |          | 103,156                      | n                            | n                                       |
|  |  | <del></del>   | 1                              | +-  | <u> </u> |  |                              |          | 100,100.                     | - 0.                         | <del></del>                             |
|  | SENIOR FELLOW                              |   | 1                              |   |          |  | Х                            |          | 120,000.                     | 0.                           | 0.                                      |

| ` (A)  | (B)<br>Average  | (do                               | not ch               | Pos<br>eck  | sition         | than c                          | one           | (D)   | (E)  | (F)   |
|--|---|-----------------------------------|----------------------|-------------|----------------|---------------------------------|---------------|---|--|---|
| Name and title   | hours<br>per<br>week  | box,<br>offic                     | unles<br>er and      | s pe<br>dad | rson<br>Irecto | is both<br>or/trust             | an<br>ee)     | Reportable compensation from the organization | Reportable compensation from related organizations | Estimated<br>amount of other<br>compensation    |
|  | (list any<br>hours<br>for<br>related<br>organiza<br>- tions<br>below<br>dotted<br>line) | Individual trustee<br>or director | nstitutional trustee | Officer     | Key employee   | Highest compensated<br>employee | ormer         | (W-2/1099-MISC)                               | (W-2/1099-MISC)                                    | from the organization and related organizations |
| <u>(15)</u>  |   |                                   |                      |             |                |                                 |               |   |  |   |
| (16)   |   |                                   |                      |             |                |                                 |               |   |  |   |
| (17)   |   |                                   |                      |             |                |                                 |               |   |  |   |
| (18)   |   |                                   |                      |             |                |                                 |               |   |  |   |
| (19)   |   |                                   |                      |             |                |                                 |               |   |  |   |
| (20)   |   |                                   |                      |             |                |                                 |               |   |  |   |
| (21)   |   |                                   |                      |             |                |                                 |               |   |  |   |
| (22)   |   |                                   |                      |             |                |                                 |               |   |  |   |
| (23)   |   |                                   |                      | •           |                |                                 | <del>  </del> |   |  |   |
| (24)   |   |                                   |                      |             |                |                                 |               |   |  |   |
| (25)   |   |                                   |                      |             |                |                                 |               |   |  |   |
| 1 b Sub-total<br>c Total from continuation sheets to Part VII, Sectio  | n A   | <u> </u>                          | 1                    |             |                | •                               | <b>&gt;</b>   | 234,756.<br>0.                                | 0.   |   |
| d Total (add lines 1b and 1c)  |   |                                   |                      |             |                |                                 | <b></b>       | 234,756.                                      | 0.   | 0.  |
| <ul> <li>Total number of individuals (including but not limit from the organization ► 2</li> </ul>   | ted to th   | ose                               | listed               | d at        | oove           | ) wh                            | o re          | ceived more than                              | \$100,000 of repor                                 | table compensation                              |
| <ul> <li>Did the organization list anyformer officer, directo on line 1a? If 'Yes,' complete Schedule J for such</li> <li>For any individual listed on line 1a, is the sum of</li> </ul> | <i>ındıvıdı</i><br>reportat   | <i>ial</i><br>ole co              | mpe                  | ensa        | atıor          | n and                           | l oth         | er compensation                               |  | Yes No<br>3 X                                   |
| the organization and related organizations greater<br>such individual  | than \$   | 150,0                             | 00?/                 | lf 'Y       | 'es'           | comp                            | lete          | Schedule J for                                |  | 4 X   |
| 5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,' Section B. Independent Contractors   | compe<br>comple   | nsati<br>ete So                   | on fr                | om<br>lule  | any<br>J fo    | unre<br>r suc                   | elate<br>th p | ed organization of<br>erson                   | r individual                                       | 5 X   |
| Complete this table for your five highest compens compensation from the organization. Report compensation.   | ated inco   | leper<br>n for                    | nden<br>the          | t co        | ontra<br>end   | ctors<br>ar ye                  | tha<br>ar e   | at received more<br>nding with or with        | than \$100,000 of<br>nin the organization          | n's tax year                                    |
| (A)<br>Name and business addre   | ess   |                                   |                      |             |                |                                 |               | (E<br>Description                             | of services  | <b>(C)</b><br>Compensation                      |
|  |   |                                   |                      |             |                |                                 |               |   |  |   |
|  |   |                                   |                      |             |                |                                 |               |   |  |   |
| 2 Total number of independent contractors (includir \$100,000 of compensation from the organization  | -   | ot Iırı                           | nited                | I to        | thos           | se list                         | ted           | above) who recei                              | ved more than                                      |   |

|   | Check if Schedule O contains a response or note to any  | line in this Part VII | I                                      |   |  |
|---|---|-----------------------|--|---|--|
|   |   | (A)<br>Total revenue  | (B) Related or exempt function revenue | (C)<br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections 512-514 |
| PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS | 1 a Federated campaigns. b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above  1 a 1 b 1 c 1 c 1 d 2 c 1 f 2 c |                       |  |   |  |
| A S   | g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f   | 2,388,547.            |  |   |  |
| 끨   | Business Code   | 2,300,347.            |  |   |  |
| VICE REVEN  | 2 a NET BOOK SALES & ROYALTY b CONFERENCES c  | 233,369.<br>12,311.   | 233,369.<br>12,311.                    |   |  |
| S   | d   |                       |  |   |  |
| B   | f All other program service revenue   |                       |  |   |  |
| စ္တ   | g Total. Add lines 2a-2f  | 245,680.              |  |   |  |
| -   | <ul> <li>Investment income (including dividends, interest and other similar amounts)</li> <li>Income from investment of tax-exempt bond proceeds.</li> </ul>  | 153,606.              |  |   | 153,606.   |
|   | 5 Royalties   |                       |  |   |  |
|   | (i) Real (ii) Personal  6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)   |                       |  |   |  |
|   | 7 a Gross amount from sales of assets other than inventory.  (i) Securities  (ii) Other  594,139.   |                       |  |   |  |
|   | b Less cost or other basis and sales expenses  c Gain or (loss)  d Net gain or (loss)   |                       |  |   |  |
|   | a rect gam or (1000)  | -11,964.              |  |   | -11,964.   |
| OTHER REVENUE                                     | 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events   |                       |  |   |  |
|   | 9 a Gross income from gaming activities See Part IV, line 19 a  |                       |  |   |  |
|   | b Less direct expenses c Net income or (loss) from gaming activities  |                       |  |   | - <del></del>  |
|   | 10 a Gross sales of inventory, less returns and allowances  |                       |  |   |  |
|   | <b>b</b> Less: cost of goods sold <b>b</b>  |                       |  |   |  |
|   | c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  |                       |  |   | <del></del>  |
|   | 11 a b c  |                       |  |   |  |
|   | d All other revenue e Total. Add lines 11a-11d  |                       |  |   | +  |
|   | 12 Total revenue. See instructions  | 2,775,869.            | 245,680.                               |   | . 141,642.   |
| BA  |   | A0109L 07/08/13       | 230,000.1                              |   | Form <b>990</b> (2013)                               |

### Form 990 (2013) THE INDEPENDENT INSTITUTE Partix Statement of Functional Expenses

| Sect     | tion 501(c)(3) and 501(c)(4) organizations must  | complete all columns  | All other organizations                   | must complete column (                           | <u>A)</u>                             |
|----------|--|-----------------------|---|--|---------------------------------------|
|          | Check if Schedule O contains a   |                       |   |  | X X                                   |
|          | not include amounts reported on lines<br>7b, 8b, 9b, and 10b of Part VIII.   | (A)<br>Total expenses | <b>(B)</b><br>Program service<br>expenses | <b>(C)</b><br>Management and<br>general expenses | <b>(D)</b><br>Fundraising<br>expenses |
| 1        | Grants and other assistance to governments and organizations in the United States See Part IV, line 21   |                       |   |  |                                       |
| 2        | Grants and other assistance to individuals in the United States. See Part IV, line 22  | 57,000.               | 57,000.                                   |  |                                       |
| 3        | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16   |                       |   |  |                                       |
| 4        | Benefits paid to or for members  |                       |   |  |                                       |
| 5        | Compensation of current officers, directors, trustees, and key employees   | 114,756.              | 96,969.                                   | 8,331.   | 9,456.                                |
| 6        | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)  | 0.                    | 0.  | 0.   | 0.                                    |
| 7        | Other salaries and wages   | 1,054,396.            | 832,507.                                  | 87,539.  | 134,350.                              |
| 8        | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   |                       |   |  |                                       |
| 9        | Other employee benefits  | 94,719.               | 75,302.                                   | 7,767.   | 11,650.                               |
| 10       | Payroll taxes  | 84,837.               | 67,445.                                   | 6,957.   | 10,435.                               |
| 11       | Fees for services (non-employees):   |                       |   |  |                                       |
| ā        | Management   | 33,425.               | 1,828.                                    | 31,314.  | 283.                                  |
| ı        | <b>)</b> Legal   |                       |   |  |                                       |
| •        | Accounting   | 15,074.               |   | 15,074.  |                                       |
|          | Lobbying   |                       |   |  |                                       |
|          | Professional fundraising services See Part IV, line 17   |                       |   |  |                                       |
|          | Investment management fees   |                       |   |  |                                       |
| ç        | J Other. (If line 11g amt exceeds 10% of line 25, column<br>(A) amount, list line 11g expenses on Schedule 0) S.C.h.   | 517,330.              | 507,367.                                  | 1,512.   | 8,451.                                |
| 12       | Advertising and promotion  | 93,121.               | 92,751.                                   | 148.   | 222.                                  |
| 13       | Office expenses  | 33,514.               | 24,007.                                   | 5,760.   | 3,747.                                |
| 14       | Information technology   | 9,144.                | 9,144.                                    |  |                                       |
| 15       | Royalties  |                       |   |  |                                       |
| 16       | Occupancy  |                       |   |  |                                       |
| 17       | Travel   | 33,976.               | 33,475.                                   | 253.   | 248.                                  |
| 18       | Payments of travel or entertainment expenses for any federal, state, or local public officials   |                       |   |  |                                       |
| 19       | ,  | 50,309.               | 49,511.                                   | 161.   | 637.                                  |
| 20       | Interest   |                       |   |  | <u> </u>                              |
| 21       | •  | 10 405                | 0.000                                     |  |                                       |
| 22       | Depreciation, depletion, and amortization  | 10,425.               | 8,288.                                    | 855.   | 1,282.                                |
| 23<br>24 |  | 11,202.               | 3,574.                                    | 7,075.   | 553.                                  |
|          | 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)  |                       |   |  | . was war in accounted                |
|          | a Postage and Shipping   | 100,971.              | 85,248.                                   | 1,845.   | 13,878.                               |
|          | b Printing and Publications  | 86,091.               | 82,910.                                   | 1,080.   | 2,101.                                |
|          | C RENTS  | 47,768.               | 42,198.                                   | _2,228.  | 3,342.                                |
|          | d DUES & SUBSCRIPTIONS   | 27,834.               | 24,090.                                   | 738.   | 3,006.                                |
|          | e All other expenses   | 45,962.               | 37,329.                                   | 4,507.   | 4,126.                                |
| 25       | Total functional expenses. Add lines 1 through 24e   | 2,521,854.            | 2,130,943.                                | 183,144.   | 207,767.                              |
| 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 ► X if following SOP 98-2 (ASC 958-720) |                       |   |  | •                                     |
| BA       | 1  | TEEA01101 1           | 1/09/13                                   | <del></del>                                      | Form <b>990</b> (2013)                |

**Balance Sheet** 

Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 87,177 1 49,284. Savings and temporary cash investments. 2 586,882. 778,937. Pledges and grants receivable, net 3 700,230. 3 633,020. 4 Accounts receivable, net 12,680. 12,684. Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 8 Inventories for sale or use 174,405 184,473. Prepaid expenses and deferred charges 9 42,716. 25,635. 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 157,257 10b **b** Less: accumulated depreciation 66,178 10 c 95,863 61,394. Investments - publicly traded securities 11 3,534,401 4,139,644. Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 Intangible assets 14 14 Other assets, See Part IV, line 11 15 15 1. Total assets. Add lines 1 through 15 (must equal line 34) 16 5,137,460. 16 5. 952,282. 17 Accounts payable and accrued expenses 17 125,617 88,367. 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 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 ES Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 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 26 Total liabilities. Add lines 17 through 25 125,617. 88,367. Organizations that follow SFAS 117 (ASC 958), check here | X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 2,848,442. 27 3,284,649. Temporarily restricted net assets 28 28 1,564,601. 1,173,857. Permanently restricted net assets. 989,544. 29 1,014,665. R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. FUND Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 33 Total net assets or fund balances 33 5,011,843 5,863,915. 34 Total liabilities and net assets/fund balances. 34 5,137,460. 5,952,282. Form 990 (2013) BAA

| 20  | Reconciliation of Net Assets   |             |           |         |  |
|-----|--|-------------|-----------|---------|--|
|     | Check if Schedule O contains a response or note to any line in this Part XI  |             |           |         | X  |
| 1   | Total revenue (must equal Part VIII, column (A), line 12)  | 1           | 2,7       | 75,8    | 69.  |
| 2   | Total expenses (must equal Part IX, column (A), line 25)   | 2           | 2,5       | 21,8    | 54.  |
| 3   | Revenue less expenses. Subtract line 2 from line 1   | 3           |           | 54,0    |  |
| 4   | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  | 4           |           | 11,8    |  |
| 5   | Net unrealized gains (losses) on investments   | 5           | 2:        | 26,5    | 83.  |
| 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) See Schedule O  | 9           | . 3'      | 71,4    | 74.  |
| 10  | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))  | 10          | 5,8       | 63,9    | 15.  |
| Pa  | Financial Statements and Reporting   | •           |           |         |  |
|     | Check if Schedule O contains a response or note to any line in this Part XII   |             |           |         |  |
| 1   | Accounting method used to prepare the Form 990: Cash X Accrual Other   |             |           | Yes     | No   |
|     | If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O   |             | 10 x<br>2 |         |  |
| 2 8 | a 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 reviewe separate basis, consolidated basis, or both:  | d on a      |           |         | 大学   |
|     | Separate basis Consolidated basis Both consolidated and separate basis   |             |           | A STAGE | <del>*************************************</del> |
| ı   | <b>b</b> Were the organization's financial statements audited by an independent accountant?  |             | 2 b       | Х       |  |
|     | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:    X   Separate basis   | ite         |           |         |  |
| •   | c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t review, or compilation of its financial statements and selection of an independent accountant?    | he audit,   | 2 c       | X       | Michigan   |
|     | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O   |             |           |         |  |
| 3   | a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the<br>Audit Act and OMB Circular A-133?   | Single      | 3 a       |         | Х  |
|     | <b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits | uired audit | 3 b       |         |  |
| BAA | 1  |             | Form      | 990 (   | 2013)  |

#### 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 **2013** 

Open to Public Inspection

Employer identification number

| THE            |  | NDEPENDENT  |                                   |   |   |                                     |                                |                            |                          |  | 08370                           |  |
|----------------|--|---|-----------------------------------|---|---|-------------------------------------|--------------------------------|----------------------------|--------------------------|--|---------------------------------|--|
|                |  |   |                                   |   | All organizations mu  |                                     |                                |                            |                          | ee inst  | ruction                         | s  |
| The c          | rgai   | nization is not a   | prıvat                            | e foundation because  | e it is: (For lines 1 throu   | ıgh 11, d                           | heck o                         | nly one l                  | oox)                     |  |                                 |  |
| 1              |  | A church, conve   | ntıon                             | of churches or assoc  | iation of churches desc   | ribed ins                           | ection                         | 170(b)(1                   | χΑχi).                   |  |                                 |  |
| 2              |  | A school describ  | ed in                             | section 170(b)(1)(A)(   | ii). (Attach Schedule E.  | )                                   |                                |                            |                          |  |                                 |  |
| 3              |  | A hospital or a c   | coope                             | rative hospital service   | e organization describe   | d ın <b>secti</b>                   | on 170(                        | <b>ЬХ1ХА</b> Х             | (iii).                   |  |                                 |  |
| 4              |  | A medical resea   | rch o                             | rganızatıon operated  | in conjunction with a ho  | ospital d                           | escribe                        | d ır <b>secti</b>          | on 170(                  | <b>b)(1)(A)</b>                                  | (iii) Ente                      | r the hospital's                           |
|                |  | name, city, and   |                                   |   |   |                                     |                                |                            | _ <b>_</b>               |  |                                 |  |
| 5              |  | An organization 170(b)(1)(A)(iv).                         | opera<br>(Con                     | ated for the benefit of<br>oplete Part II.)   | a college or university   | owned                               | or opera                       | ated by a                  | a goveri                 | nmental  | unit des                        | cribed i <b>section</b>                    |
| 6              | Ш  |   |                                   |   | vernmental unit describ   |                                     |                                |                            |                          | _  |                                 |  |
| 7              | X  | ın section 170(b  | χ1χΑ                              | <b>(Xvi).</b> (Complete Part  |   |                                     |                                | vernmer                    | ntal unit                | or from  | the gen                         | eral public described                      |
| 8              | 닏  |   |                                   |   | <b>)(b)(1)(A)(vi).</b> (Complete  |                                     |                                |                            |                          |  |                                 |  |
| 9              |  | from activities re<br>investment inco<br>June 30, 1975. S | elated<br>me ar<br>See <b>s</b> e | I to its exempt function<br>and unrelated business<br>ection <b>509(a)(2).</b> (Com |   | exception<br>section 5              | ns, and<br>11 tax)             | I (2) no i<br>from bu      | more th                  | an 33-1.<br>es acquii                            | /3% of it                       | s support from gross                       |
| 10             | Ш  | •   | _                                 | ·   | xclusively to test for pu   |                                     | -                              |                            |                          | -  |                                 |  |
| 11             |  | An organization<br>more publicly su<br>describes the ty   | orgai<br>upport<br>pe of          | nized and operated e<br>ted organizations des<br>supporting organizat               | xclusively for the benef<br>cribed in section 509(a)<br>ion and complete lines                      | it of, to p<br>(1) or s<br>11e thro | perform<br>ection 5<br>ough 11 | the fun<br>609(a)(2)<br>h. | ctions o<br>Se <b>se</b> | f, or car<br>ction 50                            | ry out th<br><b>9(a)(3).</b> C  | e purposes of one or<br>Check the box that |
|                |  | a Type I  | b                                 | Type II c   | Type III - Function   | ally inte                           | grated                         | c                          | 1 🗍 1                    | ype III -  | - Non-fu                        | inctionally integrated                     |
| е              | By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). |   |                                   |   |   |                                     |                                |                            |                          |  |                                 |  |
| f              |  |   |                                   | ceived a written detei  | mination from the IRS   | that is a                           | Type I                         | , Type II                  | or Type                  | e III sup  | porting o                       | organization,                              |
| g              |  | Since August 17   | 7, 200                            | 06, has the organization  | on accepted any gift oi   | r contrib                           | ution fro                      | om any o                   | of the fo                | llowing  | persons                         | ?  |
| _              |  | -   |                                   |   |   |                                     |                                |                            |                          | _  | •                               | Yes No                                     |
|                |  |   |                                   |   | ontrols, either alone or oported organization?  | together                            | with pe                        | ersons d                   | escribe                  | d in (ii)  | and (III)                       | 11 g (i)                                   |
|                |  | ·   | •                                 | er of a person describ  |   |                                     |                                |                            |                          |  |                                 | 11 g (ii)                                  |
|                |  | • •   |                                   | •   | described in (i) or (ii) a  | hovo?                               |                                |                            |                          |  |                                 | <del></del>                                |
| ۲              |  | ` '   |                                   |   | e supported organization  |                                     |                                |                            |                          |  |                                 | 11 g (iii)                                 |
|                |  | (i) Name of supporte                                      | <u> </u>                          | (ii) EIN  |   | (iv) I                              |                                | (v) Did yo                 | u nohfu                  | (vi) I   | s the                           | (VII) Amount of monetary                   |
|                |  | organization  | su .                              | (II) ZIIV   | (iii) Type of organization<br>(described on lines 1-9<br>above or IRC section<br>(see instructions) | organiz<br>column (i<br>your go     | ation in<br>) listed in        | the organi<br>column (i    | zation in                | organız<br>colur                                 | ation in<br>nn (i)<br>ed in the | support                                    |
|                |  |   |                                   |   | (000 1110 1110 1110 1110 1110 1110 1110   | docur                               | nent?                          |                            | Г                        | Ū  | S ?                             |  |
|                |  |   |                                   |   |   | Yes                                 | No                             | Yes                        | No                       | Yes  | No                              |  |
| /A\            |  |   |                                   |   |   |                                     |                                |                            |                          |  |                                 |  |
| (A)            |  |   |                                   |   |   | -                                   |                                | <del> </del>               |                          |  |                                 |  |
| (B)            |  |   |                                   |   |   |                                     |                                |                            |                          |  |                                 |  |
| (5)            |  | <del></del>   |                                   |   |   | <del> </del>                        |                                | <del> </del>               |                          |  |                                 |  |
| (C)            |  |   |                                   |   |   |                                     |                                |                            |                          |  |                                 |  |
| <del>(-)</del> |  |   |                                   |   |   | 1                                   |                                |                            |                          | <del>                                     </del> | ļ ———                           |  |
| (D)            |  |   |                                   |   |   | 1                                   |                                |                            |                          |  |                                 |  |
| <u></u>        |  |   |                                   |   |   | 1                                   | _                              |                            | <del> </del>             |  |                                 | · · · · · · · · · · · · · · · · · · ·      |
| (E)            |  |   |                                   |   |   |                                     |                                |                            |                          |  |                                 |  |
|                |  |   |                                   |   |   |                                     |                                |                            |                          |  |                                 |  |
| Tota           |  |   |                                   |   |   |                                     |                                |                            |                          |  |                                 |  |
| DAA            | Fo   | r Paperwork Red   | ductio                            | on Act Notice, see the  | Instructions for Form   | 990 or 9                            | 90-EZ.                         |                            |                          | Schedul  | e A (For                        | m 990 or 990-EZ) 2013                      |

Schedule A (Form 990 or 990-EZ) 2013 THE INDEPENDENT INSTITUTE 94-3008370

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

|              |   |                          | ( - ) ( - ) ( - ) ( - ) |                                  |
|--------------|---|--------------------------|-------------------------|----------------------------------|
| (Complete or | nly if you checked the box on line 5, 7, a  | or 8 of Part I or if the | e organization failed t | o qualify under Part III. If the |
|              | fails to qualify under the tests listed bel |                          |                         | •                                |

| Sect         | tion A. Public Support  |   |   |  |  |  |                     |
|--------------|---|---|---|--|--|--|---------------------|
| begır        | ndar year (or fiscal year<br>nning ɪn) ►  | (a) 2009                                  | <b>(b)</b> 2010                           | <b>(c)</b> 2011                            | <b>(d)</b> 2012                                | <b>(e)</b> 2013                        | <b>(f)</b> Total    |
| 1            | Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')   | 2,043,329.                                | 2,466,167.                                | 2,631,885.                                 | 2,511,250.                                     | 2,692,813.                             | 12,345,444.         |
| 2            | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf   |   |   |  |  |  | 0.                  |
| 3            | The value of services or facilities furnished by a governmental unit to the organization without charge   |   |   |  | ···  |  | 0.                  |
| 4            | Total. Add lines 1 through 3  | 2,043,329.                                | 2,466,167.                                | 2,631,885.                                 | 2,511,250.                                     | 2,692,813.                             | 12,345,444.         |
| 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) |   |   |  |  |  | 4,509,257.          |
| 6            | <b>Public support.</b> Subtract line 5 from line 4  |   |   |  |  |  | 7,836,187.          |
| Sec          | tion B. Total Support   |   |   |  | · · · · · · · · · · · · · · · · · · ·          | 1                                      |                     |
| Cale<br>begi | ndar year (or fiscal year<br>nning in) ►  | (a) 2009                                  | <b>(b)</b> 2010                           | (c) 2011                                   | (d) 2012                                       | <b>(e)</b> 2013                        | (f) Total           |
| 7            | Amounts from line 4   | 2,043,329.                                | 2,466,167.                                | 2,631,885.                                 | 2,511,250.                                     | 2,692,813.                             | 12,345,444.         |
| 8            | Gross income from interest,<br>dividends, payments received<br>on securities loans, rents,<br>royalties and income from<br>similar sources  | 76,208.                                   | 79,950.                                   | 79,382.                                    | 73,326.  | 153,606.                               | 462,472.            |
| 9            | Net income from unrelated<br>business activities, whether or<br>not the business is regularly<br>carried on   |   |   |  |  |  | 0.                  |
| 10           | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  |   |   |  |  |  | 0.                  |
| 11           | Total support. Add lines 7 through 10   |   |   |  |  |  | 12,807,916.         |
| 12           | Gross receipts from related activ   | vities, etc (see ins                      | structions)                               |  |  | 12                                     | 249,217.            |
| 13           | First five years. If the Form 990 organization, check this box and  | ıs for the organız<br>d <b>stop here</b>  | ation's first, secor                      | nd, third, fourth, o                       | r fifth tax year as                            | a section 501(c)                       | (3)                 |
| Sec          | tion C. Computation of Pu   | blic Support F                            | Percentage                                |  | ······································         |  |                     |
|              | Public support percentage for 2   |   |   | ne 11, column (f)                          | )  | 14                                     | 61.18%              |
| 15           | Public support percentage from  | 2012 Schedule A                           | , Part II, line 14                        |  |  | 15                                     | 62.08%              |
| 16 a         | 33-1/3% support test – 2013. If and stop here. The organization   | the organization of qualifies as a pu     | did not check the<br>blicly supported o   | box on line 13, ar<br>rganization          | nd the line 14 is 3                            | 3-1/3% or more                         | check this box      |
| Ŀ            | 33-1/3% support test— 2012. If t<br>and stop here. The organization   | the organization d<br>n qualifies as a pu | lid not check a bo<br>iblicly supported o | x on line 13 or 16<br>organization         | a, and line 15 is 3                            | 33-1/3% or more,                       |                     |
| 17 a         | a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact  | meets the facts-                          | and-circumstance                          | s' test, check this                        | thoy andston here                              | Fynlain in Part                        | IV how              |
|              | o 10%-facts-and-circumstances to<br>or more, and if the organization<br>organization meets the 'facts-ar  | i meets the 'facts-<br>nd-circumstances'  | and-circumstance<br>test. The organiz     | es' test, check this<br>ation qualifies as | s box and <b>stop her</b><br>a publicly suppor | e. Explain in Part<br>ted organization | IV how the ►        |
| 18           | Private foundation.If the organi  | zation did not che                        | eck a box on line                         | 13, 16a, 16b, 17a                          | , or 17b, check th                             | is box and see in                      | structions -        |
| BAA          |   |   |   |  | Sc   | hedule <b>A</b> (Form 9                | 990 or 990-EZ) 2013 |

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.)

| Sect   | ion A. Public Support   |                           |                          |                    |                      |                                       |                         |
|--------|---|---------------------------|--------------------------|--------------------|----------------------|---------------------------------------|-------------------------|
| Calend | lar year (or fiscal yr beginning in)►   | (a) 2009                  | <b>(b)</b> 2010          | (c) 2011           | (d) 2012             | <b>(e)</b> 2013                       | (f) Total               |
|        | Gifts, grants, contributions<br>and membership fees<br>received (Do not include<br>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  |                           |                          |                    |                      |                                       | ·                       |
| ·      | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the   |                           |                          |                    |                      |                                       |                         |
|        | organization without charge   |                           |                          |                    |                      |                                       |                         |
|        | Total. Add lines 1 through 5<br>Amounts included on lines 1,<br>2, and 3 received from<br>disqualified persons  |                           |                          |                    |                      |                                       |                         |
| b      | Amounts included on lines 2<br>and 3 received from other than<br>disqualified persons that<br>exceed the greater of \$5,000 or<br>1% of the amount on line 13<br>for the year |                           |                          |                    |                      |                                       |                         |
| c      | : Add lines 7a and 7b   | _                         |                          |                    |                      |                                       |                         |
| 8      | Public support (Subtract line 7c from line 6)   |                           |                          |                    |                      |                                       |                         |
| Sec    | tion B. Total Support   |                           |                          |                    |                      | · · · · · · · · · · · · · · · · · · · |                         |
| Calen  | idar year (or fiscal yr beginning in)►  | (a) 2009                  | <b>(b)</b> 2010          | (c) 2011           | (d) 2012             | <b>(e)</b> 2013                       | (f) Total               |
| -      | Amounts from line 6   |                           |                          |                    |                      |                                       |                         |
| 10 a   | a Gross income from interest,<br>dividends, payments received<br>on securities loans, rents,<br>royalties and income from<br>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 IV.)  |                           |                          |                    |                      |                                       |                         |
| 13     | Total Support. (Add Ins 9,10c, 11 and 12)   |                           |                          |                    |                      |                                       |                         |
| 14     | First five years. If the Form 990 organization, check this box an   | is for the organiz        | ation's first, seco      | nd, third, fourth, | or fifth tax year as | a section 501(c)(3                    | 3) ▶ □                  |
|        | ction C. Computation of Pu  |                           |                          |                    |                      |                                       |                         |
| 15     | Public support percentage for 2   |                           |                          | ne 13, column (f   | ())                  | 15                                    | %                       |
| 16     |   |                           |                          |                    |                      | 16                                    | olo                     |
| Se     | ction D. Computation of In  |                           |                          |                    |                      | <del></del> , .                       |                         |
| 17     |   | •                         |                          | -                  | umn (f))             | 17                                    | %                       |
| 18     | , ,   |                           |                          |                    |                      | 18                                    | %                       |
|        | a 33-1/3% support tests— 2013. I is not more than 33-1/3%, chec   | k this box and <b>sto</b> | <b>p here.</b> The organ | nization qualifies | as a publicly supp   | orted organization                    | <b>-</b>                |
|        | b 33-1/3% support tests – 2012.1 line 18 is not more than 33-1/3  | %, check this box         | and <b>stop here.</b> Th | e organızatıon qı  | ualifies as a public | ly supported organ                    | 3-1/3%, and<br>Dization |
|        | Private foundation. If the organ  | nization did not ch       |                          |                    |                      |                                       |                         |
| BA     | Δ   |                           | TEEA04031                | L 06/28/13         | 9                    | chedule A (Form !                     | 990 or 990-EZ) 2013     |

| Schedule A | (Form 990 or 9                           | 990-EZ) 2013                                | THE I               | NDEPENDENT                     | INSTITUT                     | E  | 94-3008370                             | Page 4 |
|------------|--|---|---------------------|--------------------------------|------------------------------|--|--|--------|
| Partil     | Supplement<br>or 17b; and<br>(See instru | ital Informat<br>Part III, line<br>ctions). | ion. Pro<br>12. Als | ovide the exp<br>o complete th | lanations re<br>nis part for | equired by Part II,<br>any additional info | line 10; Part II, line 17a<br>rmation. | -      |
|            |  |   |                     | _ <b></b> _                    |                              |  |  |        |
|            |  |   |                     |                                |                              |  |  |        |
|            |  |   |                     |                                | <b>_</b> _                   |  |  |        |
|            | <b></b>                                  |   |                     |                                |                              |  |  |        |
|            |  |   | - <b>-</b>          |                                |                              |  |  |        |
|            |  |   | <b>_</b>            |                                | <del>_</del> _               |  |  |        |
|            |  |   | <b>-</b>            |                                | . – – – – <del>–</del>       |  |  |        |
|            | ~ <b>-</b>                               | <del>-</del>                                |                     |                                |                              |  |  |        |
|            | <b>~</b>                                 |   |                     |                                |                              |  |  |        |
|            |  |   |                     |                                |                              |  |  |        |
|            | <del>-</del>                             |   |                     |                                |                              |  | <del>-</del>                           |        |
|            |  |   |                     |                                |                              |  |  | ~-~    |
|            |  |   |                     |                                | - <b>-</b>                   |  |  |        |
|            |  |   |                     |                                |                              |  |  | . ~    |
|            |  |   |                     |                                |                              |  |  |        |
|            |  |   |                     |                                | <del>_</del> _               |  |  |        |
|            |  |   |                     |                                |                              |  |  |        |
|            |  |   |                     |                                |                              |  |  |        |
|            |  |   |                     |                                |                              |  |  |        |
| <b>_</b>   |  |   |                     |                                | <del>-</del> <del></del> -   | . <b></b> -                                |  |        |
|            |  |   |                     |                                |                              | - <b></b>                                  |  |        |
|            |  |   | <del>-</del>        |                                | <del>-</del> <del>-</del>    |  |  |        |

#### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. 2013

Open to Public

Internal Revenue Service

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

| Open to Public 🗇 | 14 |
|------------------|----|
| Inspection       | I  |
| <br>             | =  |

Name of the organization Employer identification numbe 94-3008370 THE INDEPENDENT INSTITUTE 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 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No Yes are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No Partill Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2 a a Total number of conservation easements. 2 b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic 2 d structure listed in the National Register 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 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, Yes No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ 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)? 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 Partill Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

➤\$

►Ś

|   |   |   |  |                                       | 252                |              |
|---|---|---|--|---------------------------------------|--------------------|--------------|
| Schedule D (Form 990) 2013 THE I  | NDEPENDENT IN                                 | STITUTE Art Historical Tr                         | easures or Othe                                | 94-3008<br>r Similar Assets <i>(c</i> |                    | Page 2       |
| Using the organization's acquisition items (check all that apply)           |   |   |  |                                       |                    | ion          |
| a Public exhibition   |   | <u> </u>  | hange programs                                 |                                       |                    |              |
| <b>b</b> Scholarly research   |   | e Other   |  |                                       |                    |              |
| c Preservation for future genera  |   |   |  |                                       |                    |              |
| 4 Provide a description of the organ Part XIII.                             |   |   | _  |                                       | ) IN               |              |
| 5 During the year, did the organizat<br>to be sold to raise funds rather th | ion solicit or receive<br>an to be maintained | donations of art, histo<br>as part of the organiz | orical treasures, or o<br>tation's collection? | other similar assets                  | Yes                | No           |
| Part IV Escrow and Custodial line 9, or reported an a                       | Arrangements.                                 | Complete if the o                                 | rganization ansv                               | vered 'Yes' to For                    | m 990, Part        | ĪV,          |
| 1 a Is the organization an agent, trus on Form 990, Part X?                 |   |   |  | assets not included                   | Yes                | No           |
| <b>b</b> If 'Yes,' explain the arrangement                                  | in Part XIII and comp                         | lete the following tab                            | ole:   |                                       |                    |              |
| <b>c</b> Beginning balance  |   |   |  | 1 c                                   | Amount             |              |
| <b>d</b> Additions during the year  |   |   |  | 1 d                                   |                    |              |
| e Distributions during the year   |   |   |  | 1 e                                   |                    |              |
| f Ending balance  |   |   |  | 1 f                                   | -                  |              |
| 2 a Did the organization include an a                                       | mount on Form 990                             | Part X line 21?                                   |  | _ · · · ]                             | Yes                | No           |
| <b>b</b> If 'Yes,' explain the arrangement                                  | ın Part XIII. Check he                        | ere if the explantion b                           |  |                                       |                    | ]<br>        |
| Part V Endowment Funds. Co  |   | _   |  |                                       |                    | h l:         |
| 1 - Paginning of year balance   | (a) Current year                              | (b) Prior year                                    | (c) Two years back                             | (d) Three years back                  | (e) Four years     |              |
| 1 a Beginning of year balance b Contributions                               | 989,543.                                      | 993,035.  | 1,009,544                                      | 987,730.                              | 980,               | 200.         |
| <b>b</b> Cortainadoris  |   |   |  |                                       | ·                  |              |
| <ul> <li>c Net investment earnings, gains,<br/>and losses</li> </ul>        | 44,388.                                       | 16,085.   | 2,065  | 29,508.                               | 12,                | 071.         |
| <b>d</b> Grants or scholarships   |   |   |  |                                       |                    |              |
| Other expenditures for facilities and programs                              | 19,268.                                       | 19,576.   | 18,574   | 7,694.                                | 4,                 | 627.         |
| f Administrative expenses   | 1 014 662                                     | 000 544   | 000 005  | 1 000 544                             |                    | 720          |
| g End of year balance   | 1,014,663.                                    | 989,544.  | 993,035  |                                       | 987,               | <i>130</i> . |
| 2 Provide the estimated percentage  | <del>-</del>                                  |   | column (a)) neld as                            | <b>,</b>                              |                    |              |
| a Board designated or quasi-endov   |   | %   |  |                                       |                    |              |
| <b>b</b> Permanent endowment ►  | <del></del> %                                 | •   |  |                                       |                    |              |
| c Temporarily restricted endowmer<br>The percentages in lines 2a, 2b,       |   | %<br>100%.  |  |                                       |                    |              |
| <b>3a</b> Are there endowment funds not organization by:                    | n the possession of t                         | he organization that a                            | are held and admını                            | stered for the                        | Yes                | No           |
| (i) unrelated organizations   |   |   |  |                                       | 3a(i)              | Х            |
| (ii) related organizations  |   |   |  |                                       | 3a(ii)             | Х            |
| b If 'Yes' to 3a(II), are the related                                       | organizations listed a                        | s required on Schedu                              | le R²  |                                       | 3b                 |              |
| 4 Describe in Part XIII the intended  | d uses of the organiza                        | ation's endowment fu                              | nds. See Part                                  | XIII                                  | <u> </u>           |              |
| Part-VI- Land, Buildings, and   | Equipment.                                    |   |  |                                       |                    |              |
| Complete if the organi  | • •   | 'Yes' to Form 990                                 | , Part IV, line 1                              | a. See Form 990,                      | Part X, line       | 10.          |
| Description of property   |   |   | Cost or other basis (other)                    | (c) Accumulated depreciation          | <b>(d)</b> Book va | lue          |

| Description of property                       | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1 a Land                                      |                                      |                                 |                              |                |
| <b>b</b> Buildings                            |                                      |                                 |                              |                |
| c Leasehold improvements                      |                                      | 44,357.                         | 22,982.                      | 21,375.        |
| <b>d</b> Equipment                            |                                      | 66,497.                         | 55,574.                      | 10,923.        |
| e Other                                       |                                      | 46,403.                         | 17,307.                      | 29,096.        |
| Total. Add lines 1a through 1e. (Column (d) i | must equal Form 990, Part X, c       | olumn (B), line 10(c) )         | •                            | 61,394.        |

BAA

Schedule **D** (Form 990) 2013

| (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)  |   |   |
| (1)  |   |   |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 12)  | <u> </u>                                      | NI / D  |
| Part VIII Investments — Program Related. Complete if the organization answered   | 'Yes' to Form 990                             | N/A<br>), Part IV, line 11c. See Form 990, Part X, line 13          |
| (a) Description of investment type   | (b) Book value                                | (c) Method of valuation Cost or end-of-year market value            |
| (1)  |   |   |
| (2)  |   |   |
| (3)  |   |   |
| (4)  |   |   |
| (5)  |   |   |
| (6)  |   |   |
| (7)  |   |   |
| (8)  |   |   |
|  |   | · · · · · · · · · · · · · · · · · · ·                               |
| (9)  |   |   |
| (9)<br>(10)  |   |   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  | <del></del>                                   |   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part XX Other Assets.   | N/  | A<br>Part IV June 11d See Form 990 Part Y June 15                   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X Other Assets.  Complete if the organization answered   | N/.<br>Yes' to Form 990, P                    | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Complete if the organization answered (a) De  | N/  | A Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Other Assets.  Complete if the organization answered (a) De (1)   | N/.<br>Yes' to Form 990, P                    | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Complete if the organization answered (a) De  | N/.<br>Yes' to Form 990, P                    | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X Other Assets. Complete if the organization answered (a) De (1) (2) (3) (4)  | N/.<br>Yes' to Form 990, P                    | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Other Assets.  Complete if the organization answered '(a) De (1) (2) (3) (4) (5)  | N/.<br>Yes' to Form 990, P                    | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6)   | N/.<br>Yes' to Form 990, P                    | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Other Assets.  Complete if the organization answered '(a) De (1) (2) (3) (4) (5) (6) (7)  | N/.<br>Yes' to Form 990, P                    | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Other Assets. Complete if the organization answered '(a) De (1) (2) (3) (4) (5) (6) (7) (8)  | N/.<br>Yes' to Form 990, P                    | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9)   | N/.<br>Yes' to Form 990, P                    | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  | Yes' to Form 990, Pescription                 | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (c)  | Yes' to Form 990, Pescription                 | Part IV, line 11d. See Form 990, Part X, line 15.                   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (a) Part X Other Liabilities.   | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Other Assets.  Complete if the organization answered (a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (c)  | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Other Assets.  Complete if the organization answered '(a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (Part X)  Complete if the organization answered 'Yes' to Form   | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part Complete if the organization answered 'Yes' to Form  (a) Description of liability  (1) Federal income taxes  (2)   | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part Complete if the organization answered '(a) De (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (Part X)  Complete if the organization answered 'Yes' to Form (a) Description of liability (1) Federal income taxes (2) (3)   | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X Other Assets.  Complete if the organization answered 'Yes' to Form (a) Description of liability  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (Column (b) Federal income taxes (2)  (3)  (4)  | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X Other Assets.  Complete if the organization answered 'Yes' to Form (a) Description of liability  (1) Federal income taxes (2) (3) (4) (5)  | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Other Assets.  Complete if the organization answered '(a) De (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (Part X)  Complete if the organization answered 'Yes' to Form (a) Description of liability  (1) Federal income taxes (2)  (3)  (4)  (5)  (6)   | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Complete if the organization answered 'Yes' to Form (a) Description of liability  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (b) Part X  Complete if the organization answered 'Yes' to Form (a) Description of liability  (1) Federal income taxes (2)  (3)  (4)  (5)  (6)  (7)   | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part No.  Complete if the organization answered (a) December (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c   | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Other Assets.  Complete if the organization answered (a) December (b) Complete (c) C | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| (10)  Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Complete if the organization answered (a) December (b) Complete if the organization answered (b) Complete if the organization answered (c) Column (c) Column (c) Must equal Form 990, Part X, column (c) Column (c) Must equal Form 990, Part X, column (c) Complete if the organization answered (c) Complete if the organization an | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13)  Part X  Other Assets.  Complete if the organization answered (a) December (b) Complete (c) C | Yes' to Form 990, Pescription  (B), line 15.) | Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value   |

| Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered 'Yes' to Form 9   |                           |  |                   |
|--|---------------------------|--|-------------------|
| 1 Total revenue, gains, and other support per audited financial statements   | <del></del>               | 1  | 2,775,869.        |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:  |                           |  |                   |
| a Net unrealized gains on investments.   | 2a                        |  |                   |
| <b>b</b> Donated services and use of facilities  | 2 b                       |  |                   |
| c Recoveries of prior year grants  | 2 c                       |  |                   |
| d Other (Describe in Part XIII.)   | 2 d                       |  |                   |
| e Add lines 2a through 2d  |                           | 2 e  |                   |
| 3 Subtract line 2e from line 1   |                           | 3  | 2,775,869.        |
| 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   | 4 a                       |  |                   |
| <b>b</b> Other (Describe in Part XIII.)  | 4 b                       |  |                   |
| c Add lines 4a and 4b  |                           | 4 c  |                   |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line   |                           | 5  | <u>2,775,869.</u> |
| Part XIII Reconciliation of Expenses per Audited Financial Stater  |                           |  |                   |
| Complete if the organization answered 'Yes' to Form 9  | 190, Part IV, line 12a    | ),<br>———————————————————————————————————— |                   |
| 1 Total expenses and losses per audited financial statements.  |                           | 1  | 2,521,854.        |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25.  |                           |  |                   |
| a Donated services and use of facilities   | 2 a                       |  |                   |
| <b>b</b> Prior year adjustments  | 2 b                       |  |                   |
| c Other losses   | 2 c                       |  |                   |
| d Other (Describe in Part XIII.)   | 2 d                       |  |                   |
| e Add lines 2a through 2d  |                           | 2 e  |                   |
| 3 Subtract line 2e from line 1   |                           | 3  | 2,521,854.        |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:   |                           | ļ  |                   |
| a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.)  | 4 a 4 b                   |  |                   |
| c Add lines 4a and 4b  | 46                        | 4 c  |                   |
| 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, lir  | ne 18)                    | 5  | 2,521,854.        |
| Part XIII Supplemental Information.  |                           | <del> </del>                               | 2,321,031.        |
|  | and 4 Part IV lines 1h:   | and 2h: Part V                             |                   |
| Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a<br>line 4; Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b_Al | Iso complete this part to | provide any addition                       | al information    |
|  |                           |  |                   |
| Part V, Line 4 - Intended Uses Of Endowment Fund   |                           |  |                   |
|  |                           |  |                   |
| The Fund shall be used for support of the char   | itable or educa           | tional purpos                              | es of the         |
| THE LANG SHOTT DE ASEA TOT SADDOTE OF THE CHAT   |                           |  |                   |

BAA Schedule **D** (Form 990) 2013

## SCHEDULE I (Form 990)

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

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

OMB No 1545 0047

2013

Department of the Treasury Internal Revenue Service Name of the organization THE INDEPENDENT INSTITUTE

Rate General Information on Grants and Assistance

► Information about Schedule I (Form 990) and its instructions is atww.irs.gov/form990.

Employer identification number

94-3008370

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| Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? | nts or assistance, and |
|---|------------------------|
| Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.   | ספם נמדר דג            |
| William Country and Other Accietance to Covernments and Organizations in the United States. Complete if the organization answered   | roanization answered   |

'Yes' to 

| (h) Purpose of grant or assistance                          |     |     |     |     |            |       |     | 0   | 0  | ule I (Form 990) (2013)  |
|---|-----|-----|-----|-----|------------|-------|-----|---|--|--|
| (g) Description of non cash assistance                      |     |     |     |     |            |       |     | <b>^</b>  | •  | Schedu   |
| (f) Method of valuation<br>(book, FMV, appraisal,<br>other) |     |     |     |     |            |       |     |   |  | 07/12/13   |
| (e) Amount of non cash assistance                           |     |     |     |     |            |       |     |   |  | TEEA3901L 07/12/13   |
| (d) Amount of cash grant                                    |     |     |     |     |            |       |     | n the line 1 table  |  |  |
| (c) IRC section if applicable                               |     |     |     |     |            |       |     | organizations listed i  | 1 table  | is for Form 990.   |
| (b) EIN   |     |     |     |     |            |       |     | 3) and government c   | ons listed in the line   | , see the Instruction  |
| (a) Name and address of organization or government          | (1) | (2) | (3) | (4) | <u>(5)</u> | <br>ω | (8) | 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table | 3 Enter total number of other organizations listed in the line 1 table | BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. |

1

Page 2

**Parill Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance   | (b) Number of recipients | (c) Amount of cash grant                  | (d) Amount of non cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance   |
|---|--------------------------|---|-----------------------------------|---|--|
| 1 Tuition assistance.   | 38                       |   |                                   |   |  |
|   |                          |   |                                   |   |  |
| · ·   |                          |   |                                   |   | •  |
| 4   |                          |   |                                   |   | •  |
| ·   |                          |   |                                   |   |  |
| 9   |                          |   |                                   |   |  |
|   |                          |   |                                   |   |  |
| Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. | vide the information     | n required in Part I                      | , line 2, Part III, co            | lumn (b), and any othe                                | er additional information.   |
| Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.  | ring Use of Grants       | Funds in U.S.                             |                                   |   |  |
| <u>Tuition_assistance_applicants_complete_a_s</u>   | _complete_a_sta          | tandard application which is reviewed and | <u>ion which is r</u>             | eviewed_and   |  |
| approved by the Institute   | !<br>!<br>!<br>!         | <br>                                      |                                   |   |  |
|   | 1 1                      | <br> <br> <br> <br> <br> <br>             | <br> <br> <br> <br> <br> <br>     |   |  |
|   |                          |   | <br>                              |   |  |
|   |                          |   | <br>                              | <br> <br> <br> <br> <br> <br> <br> <br>               |  |
|   |                          |   | <br>                              |   |  |
|   |                          | <br>                                      | <br>                              | 1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1             |  |
|   |                          | <br> <br> <br> <br> <br> <br> <br> <br>   | <br>                              | 1               | !  |
|   |                          | <br>                                      | <br>                              | 1               | 9<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1 |

BAA

Schedule I (Form 990) (2013)

#### SCHEDULE M (Form 990)

**Noncash Contributions** 

► Complete if the organizations answered 'Yeson Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE INDEPENDENT INSTITUTE

► Information about Schedule M (Form 990) and its instructions is awww.irs.gov/form990.

Employer identification number

94-3008370

| Par | Types of Property   |                               |  |   |        |   |                  |
|-----|---|-------------------------------|--|---|--------|---|------------------|
|     |   | (a)<br>Check if<br>applicable | (b)  Number of contributions or items contributed    | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g |        | (d)<br>od of determir<br>contribution a |                  |
| 1   | Art — Works of art  |                               |  |   |        |   |                  |
| 2   | Art - Historical treasures  |                               |  |   |        |   |                  |
| 3   | Art — Fractional interests  |                               |  |   |        |   |                  |
| 4   | Books and publications  |                               |  |   |        |   |                  |
| 5   | Clothing and household goods  |                               |  |   |        |   | _                |
| 6   | Cars and other vehicles   |                               | ka mara arawan ang kang kang bana ang arawan na araw |   |        |   |                  |
| 7   | Boats and planes  |                               |  |   |        | · · ·                                   |                  |
| 8   | Intellectual property   |                               |  |   |        |   | <del></del>      |
| 9   | Securities - Publicly traded  | Х                             | 2  | 207,980.  | Fair M | Market Va                               | lue              |
| 10  | Securities - Closely held stock   |                               |  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                                      |        |   |                  |
| 11  | Securities - Partnership, LLC, or trust interests   |                               |  |   | 1      |   |                  |
| 12  | Securities - Miscellaneous  |                               |  |   |        |   |                  |
| 13  | Qualified conservation contribution – Historic structures   |                               |  |   |        | · ·                                     |                  |
| 14  | Qualified conservation contribution - Other   |                               |  |   |        |   |                  |
| 15  | Real estate - Residential   |                               |  |   | 1      |   |                  |
| 16  | Real estate - Commercial  |                               |  |   |        | -                                       |                  |
| 17  | Real estate - Other   |                               |  |   |        |   |                  |
| 18  | Collectibles  |                               |  |   |        |   |                  |
| 19  | Food inventory  |                               |  |   |        |   |                  |
| 20  | Drugs and medical supplies  |                               |  |   |        |   |                  |
| 21  | Taxidermy   |                               |  |   |        |   | <del></del>      |
| 22  | Historical artifacts.   |                               |  | 1   |        |   |                  |
| 23  | Scientific specimens  |                               |  |   |        |   |                  |
| 24  | Archeological artifacts   |                               | ·  |   |        |   |                  |
| 25  | Other► (  |                               |  |   |        |   |                  |
| 26  | Other (   |                               |  |   |        |   |                  |
| 27  |   |                               |  |   | 1      |   |                  |
| 28  | Other ( )   |                               | -  |   |        |   |                  |
| 29  |   |                               | -  | tions for which the   | 29     |   |                  |
|     |   |                               |  |   |        | Yes                                     | No               |
| 30  | During the year, did the organization receive by a hold for at least three years from the date of the purposes for the entire holding period? |                               |  |   |        | 30 a                                    | X                |
| ı   | o If 'Yes,' describe the arrangement in Part II.  |                               |  |   |        | 300                                     |                  |
|     | Does the organization have a gift acceptance po   | licy that regi                | lires the review of any                              | non-standard contribute   | ions?  | 31                                      | Х                |
|     | Does the organization hire or use third parties or  | •                             | •  |   |        | <del></del>                             | <del>  ^</del> - |

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

noncash contributions?

describe in Part II.

b If 'Yes,' describe in Part II

Schedule M (Form 990) 2013

32 a

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

| Schedule M (Form 990) 2013 · THE INDEPENDENT INSTITUTE   | 94-3008370                                   | Page <b>2</b>       |
|--|--|---------------------|
| Supplemental Information. Provide the information required by Part I, lines 30b, the organization is reporting in Part I, column (b), the number of contributions, the received, or a combination of both. Also complete this part for any additional info | 32b, and 33, a<br>e number of it<br>rmation. | and whether<br>tems |
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#### **SCHEDULE O** (Form 990 or 990-EZ)

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

2013

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number

| THE INDEPENDENT INSTITUTE   | 94-3008370             |
|---|------------------------|
| Form 990, Part III, Line 4d - Other Program Services Description                  |                        |
| Student Programs. The Institute educates and develops young peo                   | ople through three     |
| programs: The Challenge of Liberty Summer Seminars for high sch                   | nool_and_college       |
| students seeking to better understand real-world issues that the                  | ney encounter; a       |
| multi-dimensional internship program that provides university                     | students with a        |
| hands-on learning experience in public policy research and the                    | related publication    |
| and dissemination of materials; and the Independent Scholarship                   | p Fund, which provides |
| tuition assistance to low- and moderate-income families in Con-                   | tra Costa and Alameda  |
| counties helping K-12 students to achieve a better education by                   | y enabling greater     |
| choice among competing schools.   |                        |
|   |                        |
| Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Director | rs, Etc.               |
| DIRECTORS DAVID THEROUX AND MARY THEROUX ARE RELATED BY MARRIA                    | GE                     |
| Form 990, Part VI, Line 11b - Form 990 Review Process                             |                        |
| FORM 990 IS REVIEWED BY THE ORGANIZATION'S MANAGEMENT PRIOR TO                    | FILING AND IS OPEN TO  |
| DISCUSSION AT THE NEXT BOARD MEETING.   |                        |
| Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Co     | nflicts                |
| Directors and key employees annually sign a statement that aff                    | irms that they have    |
| read the Organization's policy, they understand it and agree t                    | o comply with it.      |
| Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top   | Management             |
| Using current survey data for regional non-profits and national                   | 1 Think Tanks, the     |
| Compensation Committee, made up of independent members of the                     | Board, review and      |
| approve the compensation for the Organization's CEO and provide                   | le_contemporaneous     |
| substantiation of their discussion.   |                        |
|   |                        |

| Name of the organization  | Employer identification number |
|---|--------------------------------|
| THE INDEPENDENT INSTITUTE   | 94-3008370                     |
| Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & | Key Employees                  |
| Using current survey data for regional non-profits and national                   | <u>Think Tanks, the</u>        |
| Compensation Committee, made up of independent members of the I                   | Board, review and              |
| approve the compensation for the Organization's COO and provide                   | e_contemporaneous              |
| substantiation of their discussion.   |                                |
| Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available      |                                |
| Audited financial statements and IRS Form 990 are available to                    | the public on the              |
| Institute's website.  |                                |
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

THE INDEPENDENT INSTITUTE

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 ► Attach to Form 990. ► See separate instructions.
 ► Information about Schedule R (Form 990) and its instructions is abww.irs.gov/form990.

2013

OMB No 1545 0047

Employer identification number 94-3008370

| Partil Identification of Disregarded Entities Complete If the  | of the organiza                   | ne organization answered 'Yes' on Form 990, Part IV, line 33. | s' on Form 990,                               | Part IV, line 33.      |                               |   | [           |
|--|-----------------------------------|---|---|------------------------|-------------------------------|---|-------------|
| (a) Name, address, and EIN (if applicable) of disregarded entity   | (b)<br>Primary activity           |   | (c) Legal domicile (state or foreign country) | (d) Total income       | (e)<br>End-of-year assets     | (f) Direct controlling entity               |             |
| (1)  |                                   |   |   |                        |                               |   | •           |
| (2)  |                                   |   |   |                        |                               |   |             |
| (3)  |                                   |   |   |                        |                               |   |             |
| <b>Rantill Identification of Related Tax-Exempt Organizations</b> Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. | Complete of the curing the tax ye | organization answer<br>ar.                                    | ed 'Yes' on Forn                              | 1 990, Part IV, lin    | e 34 because it ha            | pe  |             |
| Name, address, and EIN of related organization Prin  | (b)<br>Primary activity           | (c)<br>Legal domicile (state<br>or foreign country)           | (d)<br>Exempt Code<br>section                 | ((f section 501(c)(3)) | (f) Direct controlling entity | (g)<br>Sec 512(b)(13)<br>controlled entity? | 33)<br>ity? |
|  |                                   |   |   |                        |                               | Yes   | ٩<br>ا      |
| (1) DAVID J & MARY LG THEROUX FOUNDATI<br>1 00 SWAN WAY<br>- OAKLAND, CA 94621 Grau<br>94-3180069 Grau   | Grant-Making                      | CA  | 510(c)3                                       | Exempt<br>Private FD   | N/A                           | ×   | ×           |
|  |                                   |   |   |                        |                               |   |             |
| (3)  |                                   |   |   |                        |                               |   |             |
| (4)  |                                   |   |   |                        |                               |   |             |
| BAA For Paperwork Reduction Act Notice, see the Instructions for Form  | Form 990.                         |   | TEEA5001L 06/26/13                            |                        | Sched                         | Schedule <b>R</b> (Form 990) 2013           | 2013        |

Schedule R (Form 990) 2013 THE INDEPENDENT INSTITUTE

P4-30083

Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34

Decause it had one or more related organizations treated as a partnership during the tax year.

| Asble as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, ated organizations treated as a corporation or trust during the tax year.  (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c  | related organization          | rilliary activity             | Legal<br>domicile<br>(state or<br>foreign | controlling<br>entity       | rredominant income<br>(related, unrelated,<br>excluded from tax<br>under sections |                              | Share of total Share on the come end- | end-of-year<br>assets al     | tionate<br>tionate<br>allocations? | amount in box<br>20 of Schedule<br>K-1 (Form | managing<br>partner? |                       | ownership                    |
|--|-------------------------------|-------------------------------|---|-----------------------------|---|------------------------------|---------------------------------------|------------------------------|------------------------------------|--|----------------------|-----------------------|------------------------------|
| Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Ves" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or frust curing the tax year.  Address, and EN of related organization Primary activity (state of more precision of trust) (state of confro) (state of |                               |                               | country)                                  |                             | 512-514)  |                              |                                       | >                            | $\vdash \vdash$                    | 1065)  | Yes                  | 9                     |                              |
| Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  (a) address, and EN of related organization Primary activity (c)  | (1)                           |                               |   |                             |   |                              |                                       |                              |                                    |  |                      | _                     | •                            |
| Identification of Related Organizations Taxable as a Corporation of Trust Complete if the organization answered "Ves" on Form 990, Part IV, lime 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  In 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c   |                               |                               |   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
| Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  Intel 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  Intel 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  Intel 34 because it had one or more related organization organization or more related organization orga |                               |                               |   |                             |   |                              |                                       |                              |                                    |  |                      |                       | •                            |
| Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust cluring the tax year.    An address, and E/N or related organizations as a corporation or trust cluring the tax year.   An address, and E/N or related organizations around the tax year.   An address, and E/N or related organization or trust cluring the tax year.  | (2)                           |                               |   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
| Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  Iline 34 because it had one or more related organizations because it had one or more related organizations address, and ElN of related organization Primary activity Legal domicile Complete if the organization answered "Yes' on Form 990, Part IV, address, and ElN of related organization Primary activity Legal domicile (Scopp, Scopp, total income year assets) orientation or trust during the tax year.   |                               |                               |   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
| Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or frust during the tax year.  Identification of Related Organization Forms as a corporation or frust during the tax year.  (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c   |                               |                               |   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
| Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  (a) Address, and EIN of related organization  (b) Address, and EIN of related organization  (c) Address, and EIN of related organization  (d) Address, and EIN of related organization  (e) Address, and EIN of related organization  (d) Address, and EIN of related organization  (e) Address, and EIN of related organization  (e) Address, and EIN of related organization  (e) Address organization  (f) Address organizatio | (3)                           |                               |   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
| Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c  |                               |                               |   |                             | _   |                              |                                       |                              |                                    |  |                      |                       |                              |
| Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  (a)  (b)  (c)  (d)  (d)  (d)  (d)  (d)  (d)  (d   |                               |                               |   |                             |   |                              |                                       | _                            |                                    |  |                      |                       |                              |
| Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization streated as a corporation or trust during the tax year.  Ince 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  Ince 34 because it had one or more related organizations treated as a corporation or trust during the tax year.  (b) Address, and ElN of related organization Primary activity (state or fronging controlling antity)  (c) Corp. Sorp., total income year assets of trust)  (c) Corp. Sorp., total income year assets of trust)  (d) Part IV, Perentage organization or trust during the tax year.  (d) Organization or trust during the tax year.  (e) Organization or trust during the tax year.  (d) Organization or trust during the tax year.  (d) Organization or trust during the tax year.  (e) Organization or trust during the tax year.  (d) Organization or trust during the tax year.  (e) Organization or trust during the tax year.  (h) Organization or trust during the tax  |                               |                               |   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
| Name, address, and ElN of related organization  Name, address, and ElN of related organization  Name, address, and ElN of related organization  Share of corp. S corp.  Country)  Country)  Corp. S corp.  Country)  Corp. S corp.  Corp. S corp.  Appea of entity  Corp. S corp.  Appea of entity  Corp. S corp.  Appea of entity  Appea of entity  Corp. S corp.  Appea of entity  Appea o |                               | Related Organiza              | tions Taxa                                | able as a Corped or gangard | oration or Tru  | ust Complete<br>as a corpora | if the organizatation or trust di     | ion answere<br>uring the tax | d 'Yes' or<br>x year.              | n Form 990, P                                | art IV,              |                       |                              |
|  | (a)<br>Name, address, and EIN | of related organizati         |   |                             | egal domicile<br>tate or foreign  | (d)<br>Direct<br>controlling | Type of entity (C corp, S corp        |                              |                                    |  |                      | Sec 512<br>controller | 0)<br>2(b)(13)<br>of entity? |
|  |                               |                               |   |                             | country)  | ennny                        | (Jenil 10                             |                              |                                    |  |                      | Yes                   | ٩                            |
|  | (1)                           |                               | -   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
|  | <br>                          | <br> <br> <br> <br> <br> <br> | 1   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
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|  | (2)                           |                               |   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
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| (E)  |                               | <br> <br> <br> <br> <br> <br> | 1   |                             |   |                              |                                       |                              |                                    |  |                      |                       |                              |
|  | (3)                           |                               | 1   |                             |   |                              |                                       |                              | :                                  |  |                      |                       |                              |
|  | <br>                          | <br> <br> <br> <br> <br> <br> | <del> </del>                              |                             |   |                              |                                       |                              | _                                  |  |                      |                       |                              |
|  |                               |                               | 1   |                             |   |                              |                                       |                              |                                    |  | •                    |                       |                              |

# Schedule R (Form 990) 2013 THE INDEPENDENT INSTITUTE

| Schedule R (Form 990) 2013                | Schedu                    |                            | <b>BAA</b> TEEA5003L 06/27/13  | à        |
|---|---------------------------|----------------------------|--|----------|
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|   |                           |                            |  | 3        |
| (d) Method of determining amount involved | (c)<br>Amount involved    | (b) Transaction type (a-s) | (a) Name of related organization   | 1        |
| holds.                                    | ips and transaction thres | ding covered relationsh    | 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.   | 1        |
| 1r X X                                    |                           |                            | r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s)  |          |
| ×   |                           |                            | <b>q</b> Reimbursement paid by related organization(s) for expenses  |          |
| 1p<br>X                                   |                           |                            | <b>p</b> Reimbursement paid to related organization(s) for expenses  |          |
| 10 X                                      |                           |                            | o Sharing of paid employees with related organization(s)   |          |
| 1n X                                      |                           |                            | n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  |          |
| 1 m X                                     |                           |                            | Performance of services of membership or fundraising solicitations   |          |
|   |                           |                            | K Lease of Jacillites, equipment, of other assets from telated organization(s)   |          |
| 1, X                                      |                           |                            | to 1 and at familities assumment or other secate from raisted organization(s)  |          |
| 1j X                                      |                           |                            |  |          |
| 1i X                                      | -                         |                            |  |          |
|   |                           |                            | g Sale of assets to related organization(s)  L. Direchase of assets from related organization(s)   |          |
| 1g X.                                     |                           |                            | 1 Dividends from felated organization(s)   |          |
| 1f  |                           |                            |  |          |
| 1e X:                                     |                           |                            | e Loans or loan guarantees by related organization(s)  |          |
| X PI                                      |                           |                            | d Loans or loan guarantees to or for related organization(s)   |          |
| 1c X                                      |                           |                            | c. Gift, grant, or capital contribution from related organization(s)   |          |
| 1 b X                                     |                           |                            | b Gift, grant, or capital contribution to related organization(s)  |          |
| 1a X                                      |                           |                            | 1 During the tax year, did the organization engage in ally of the following transactions with one of more related organizations move in the most of the paper of the property of the paper of the property of the paper of the pap |          |
| Yes No                                    | 11-11/2                   | Parte listed in Darts      |  | 1        |
| •   | , line 34, 33b, or 3o.    | Form 990, Fart IV          | Part Vorm প্ৰথ, Part IV, line 34, ১১০, or somplete if the organization answered Yes on Form প্ৰথ, Part IV, line 34, ১১০, or ১০.  | نظ       |

# Schedule R (Form 990) 2013 THE INDEPENDENT INSTITUTE

Pariwin Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

| (a) Name, address, and EIN of entity Name, address, and EIN of entity (b) (c) (state of entity) | (b)<br>Primary activity | omicile<br>foreign | Predominant income                | (e) Are all partners section 501(c)(3) | 1        | Share of total income | (g)<br>Share of<br>end-of-year<br>assets | (h) Disproportionate allocations? | Code V-UBI<br>amount in box<br>20 of Schedule | General or<br>managing<br>partner? | (K)<br>Percentage<br>ownership |
|---|-------------------------|--------------------|-----------------------------------|--|----------|-----------------------|--|-----------------------------------|---|------------------------------------|--------------------------------|
|   |                         | Country            | lated, excluded<br>from tax under | organizati                             | ons,     |                       |  |                                   |   |                                    |                                |
|   |                         |                    | section 512-514)                  | Yes                                    | S<br>S   |                       |  | Yes No                            |   | Yes No                             | •                              |
| (1)   |                         |                    | j                                 |  |          |                       |  |                                   |   | _                                  | •                              |
|   |                         |                    |                                   |  |          |                       |  |                                   |   |                                    | •                              |
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| (Z)   |                         |                    |                                   |  |          |                       |  |                                   |   |                                    |                                |
| 1   | ·                       |                    |                                   |  |          |                       |  |                                   |   | _                                  |                                |
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| (3)   |                         |                    |                                   |  |          |                       |  |                                   |   |                                    |                                |
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| (4)   |                         |                    |                                   |  |          |                       |  |                                   |   |                                    |                                |
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| ( <u>5</u> )  |                         |                    |                                   |  |          |                       |  |                                   |   |                                    |                                |
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| (9)   |                         |                    |                                   |  |          |                       |  |                                   |   | <u> </u>                           |                                |
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| (8)   |                         |                    |                                   |  |          |                       |  |                                   |   |                                    |                                |
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| ВАА   |                         |                    | TEE                               | TEEA5004L 06/27/13                     | 06/27/13 |                       |  |                                   | Schedu  | Schedule <b>R</b> (Form 990) 2013  | 990) 2013                      |

| Scheaule R | (Form 990) 2013 THE INDEPENDENT INSTITUTE   | 94-3008370     | rage 5      |
|------------|---|----------------|-------------|
| Pati WU_   | Supplemental Information Provide additional information for responses to questions on Schedule R (see | instructions). |             |
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Schedule R (Form 990) 2013

| 2013 .  | Sche                 | dule O -   | Suppleme             | ental Inform                        | ation                          | Page 1                  |
|---|----------------------|------------|----------------------|-------------------------------------|--------------------------------|-------------------------|
|   |                      | THE IN     | DEPENDENT I          | NSTITUTE                            |                                | 94-300837               |
| Form 990, Part IX, Li<br>Other Fees For Servi | ne 11g<br>ices       |            |                      |                                     |                                |                         |
|   |                      |            | (A)<br>Total         | (B)<br>Program<br>Services          | (C)<br>Management<br>& General | (D)<br>Fund-<br>raising |
| AUTHOR AND BOOK OUTSIDE SERVICES              |                      | Total §    | 338,156.<br>179,174. | 338,156.<br>169,211.<br>\$ 507,367. | 1,512.                         | 8,451.                  |
| Form 990, Part XI, Li<br>Other Changes In Ne  | ne 9<br>et Assets Or | Fund Balan | ces                  |                                     |                                |                         |
| INCREASE IN TEMP Rounding                     | ORARILY RE           | STRICTED   |                      |                                     | \$                             | 390,744.<br>-2.         |
| Transfer from Pe                              | rmanently            | Restricte  | d                    |                                     | Total \$                       | -19,268.<br>371,474.    |