OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

| A                        | For the      | 2014 calen   | dar year, or tax yea        | r beginning 7/                        | 01 ,2   | 014, and ending          | 6/30          | )   | , 2015  |  |  |  |  |  |  |
|--------------------------|--------------|--|-----------------------------|---------------------------------------|---|--------------------------|---------------|---|---|--|--|--|--|--|--|
| В                        | Check if a   | ipplicable:  | С                           | ************                          |   | *                        | C             | Employeriden                              | tification number   |  |  |  |  |  |  |
|                          | Addre        | ess change   | The Conflict                | Center                                |   |                          |               | 84-1080                                   | 552   |  |  |  |  |  |  |
|                          | Name         | e change   | 4140 Tejon S                |                                       | 00  |                          | E             | Telephone num                             | iber  |  |  |  |  |  |  |
|                          | $\vdash$     | l return   | Denver, CO 8                |                                       |   |                          |               | 303-433                                   | -1083   |  |  |  |  |  |  |
|                          | $\vdash$     |  | ,                           |                                       |   |                          | -             | 303 433                                   | 1-4303  |  |  |  |  |  |  |
|                          | $\vdash$     | return/terminated  |                             |                                       |   |                          |               |   | ל כבס בבס   |  |  |  |  |  |  |
|                          | $\vdash$     | nded return  | <u> </u>                    |                                       | <del></del>   | Tei.                     |               | Gross receipts<br>oup return for subo     |   |  |  |  |  |  |  |
|                          | Appli        | ication pending  |                             |                                       | •   |                          | • • •         | -   | ⊢ ⊢   |  |  |  |  |  |  |
|                          |              |  | Same As C Ab                |                                       | <del></del> , ,   | '`                       | If 'No,' att  | bordinates include<br>ach a list. (see in | ed? Yes No<br>structions)   |  |  |  |  |  |  |
| <u> </u>                 |              | empt status  |                             | · · · · · · · · · · · · · · · · · · · | insert no.) 4947(a)(  | 1) or 527                |               |   |   |  |  |  |  |  |  |
| l                        | Webs         | ite: ► ww  | w.conflictce                | nter.org                              |   | Н                        | (c) Group exe | emption number                            | <u> </u>  |  |  |  |  |  |  |
| K                        |              | f organization:  |                             | st Association                        | Other ►   | L Year of formation      | 1988          | M State of                                | legal domicile: CO  |  |  |  |  |  |  |
| Pa                       | irtil 🐙      | Summar   | <u></u>                     |                                       | <u> </u>  |                          |               |   | •   |  |  |  |  |  |  |
|                          | 1 Br         | riefly descri  | be the organization'        | s mission or most                     | significant activities:                                       | Many peop                | le hand       | ile anger                                 | and conflict  |  |  |  |  |  |  |
| Æ)                       |              | 1 Briefly describe the organization's mission or most significant activities: Many people handle anger and conflict in ways that keep them from accomplishing productive life goals and having |                             |                                       |   |                          |               |   |   |  |  |  |  |  |  |
| ĕ                        |              |  |                             |                                       | Center teache   |                          |               |   |   |  |  |  |  |  |  |
| T.                       |              |  |                             |                                       | ies to solve p  |                          |               |   |   |  |  |  |  |  |  |
| Governance               |              | heck this bo   |                             |                                       | ued its operations or   |                          |               |   |   |  |  |  |  |  |  |
|                          |              |  |                             |                                       | (Part VI, line 1a)  |                          |               |   | 17  |  |  |  |  |  |  |
| δ                        |              |  |                             |                                       | erning body (Part VI,   |                          |               |   | 16  |  |  |  |  |  |  |
| Activities &             |              |  |                             |                                       | rear 2014 (Part V, line                                       |                          |               |   | 24  |  |  |  |  |  |  |
| ίτίν                     |              |  |                             |                                       |   |                          |               |   | 193   |  |  |  |  |  |  |
| Ac                       |              |  |                             |                                       | olumn (C), line 12  |                          |               |   | 0.  |  |  |  |  |  |  |
|                          | b N∈         | et unrelated   | l business taxable ir       | ncome from Form                       | 990-T, line 34  |                          |               | 7b  | 0.  |  |  |  |  |  |  |
|                          |              |  |                             |                                       |   |                          |               | or Year                                   | Current Year  |  |  |  |  |  |  |
| a i                      |              |  |                             |                                       |   |                          |               | 216,846.                                  | 214,896.  |  |  |  |  |  |  |
| Revenue                  |              |  |                             |                                       |   |                          |               | 280,632.                                  | 332,206.  |  |  |  |  |  |  |
| š                        | 10 lm        | vestment in  | icome (Part VIII, coi       | umn (A), lines 3,                     | 4, and 7d)  |                          |               | 31,140.                                   | 12,097.   |  |  |  |  |  |  |
| œ                        | 11 Ot        | ther revenu  | e (Part VIII, column        | (A), lines 5, 6d, 8                   | c, 9c, 10c, and 11e).   |                          |               | 56,258.                                   | 74,573.   |  |  |  |  |  |  |
|                          | 12 To        | otal revenue   | e – add lines 8 throu       | ugh 11 (must equa                     | il Part VIII, column (A                                       | ), line 12)              |               | 584,876.                                  | 633,772.  |  |  |  |  |  |  |
|                          | 13 Gr        | rants and si   | milar amounts paid          | (Part IX, column                      | (A), lines 1-3)   |                          | ,             |   |   |  |  |  |  |  |  |
|                          | 14 Be        | enefits paid   | to or for members           | (Part IX, column (                    | A), line 4)   |                          |               |   |   |  |  |  |  |  |  |
|                          | <b>15</b> Sa | alaries, othe  | er compensation, en         | nployee benefits (                    | Part IX, column (A), l  | ines 5-10)               |               | 423,197.                                  | 456,362.  |  |  |  |  |  |  |
| Ses                      |              |  |                             |                                       | line 11e)   |                          |               | 4,175.                                    | 10,051.   |  |  |  |  |  |  |
| ë                        |              |  |                             |                                       |   |                          |               | 1,1,3.                                    | THE PARTY NEWS YEAR CHEST STREET AND CONTRACT OF STREET STREET STREET, STREET |  |  |  |  |  |  |
| Expenses                 |              |  | sing expenses (Part         |                                       |   | 66,778.                  |               |   |   |  |  |  |  |  |  |
|                          |              | •  |                             |                                       | d, 11f-24e)   |                          |               | 163,622.                                  | 216,851.  |  |  |  |  |  |  |
|                          |              | -  |                             |                                       | X, column (A), line 2   |                          |               | <u>590,994.</u>                           | 683,264.  |  |  |  |  |  |  |
| _                        | 19 Re        | evenue less  | expenses. Subtrac           | t line 18 from line                   | 12  |                          |               | -6,118.                                   | -49,492.  |  |  |  |  |  |  |
| 9 9                      |              |  |                             |                                       |   |                          | Beginning     | of Current Year                           | End of Year   |  |  |  |  |  |  |
| Net Assets<br>Fund Balan | <b>20</b> To |  | (Part X, line 16)           |                                       |   |                          | 1,            | 467,109.                                  | 1,412,080.  |  |  |  |  |  |  |
| Ž                        | <b>21</b> To | otal liabilitie  | s (Part X, line 26)         |                                       |   |                          |               | 35,637.                                   | 30,100.   |  |  |  |  |  |  |
| žā                       | <b>22</b> Ne | et assets or   | fund balances. Sub          | tract line 21 from                    | line 20   |                          | 1.            | 431,472.                                  | 1,381,980.  |  |  |  |  |  |  |
| Pa                       |              | Signatur   | e Block                     |                                       |   |                          |               |   | 2,001,000   |  |  |  |  |  |  |
|                          |              |  |                             | return, including accom               | nanying schedules and stateme                                 | ents, and to the best of | my knowledge  | and belief, it is the                     | e. correct. and   |  |  |  |  |  |  |
| comp                     | lete. Decla  | aration of prepa   | rer (other than officer) is | ased on all information               | panying schedules and stateme<br>of which preparer has any kr | nowledge.                | ,             | 1 /                                       | o, vottosi, ana   |  |  |  |  |  |  |
|                          |              |  | Laur 1                      | Santra                                |   |                          |               | 1/11/201                                  | 6   |  |  |  |  |  |  |
| Sig                      | ın           | Signatu  | re of officer               | 7                                     |   |                          | Date          | <del>-, -, -=,</del>                      | ~   |  |  |  |  |  |  |
| Hei                      | re           | Pon  | Ludwig                      | (                                     | ) .   |                          | Evecut        | ive Dire                                  | ctor  |  |  |  |  |  |  |
|                          |              |  | print name and title.       |                                       |   |                          | DACCUL        | TAC DITE                                  | <u> </u>  |  |  |  |  |  |  |
|                          |              | Print/Type n   | reparer's name              | Preparer's sig                        | mature 111  | Date                     | C             | neck if                                   | PTIN  |  |  |  |  |  |  |
|                          |              | 1 "  | •                           | /sh                                   | Falli   | ilul                     | الديدية       |   |   |  |  |  |  |  |  |
| Pai                      | a            |  | Lalli                       | John,                                 | - 0 - 1 - 1 - 1 - 1 - 1                                       |                          |               | lf-employed                               | P00345194   |  |  |  |  |  |  |
| rre                      | parer        | Firm's name  |                             |                                       | LC dba Roger N  | <u>vittier % (</u>       |               |   |   |  |  |  |  |  |  |
| US                       | Only         | Firm's addre   |                             | Oneida St.,                           | Suite 102   |                          | Fi            |   | -0685297  |  |  |  |  |  |  |
|                          |              | _l   | Denver,                     | CO 80224                              | <u></u>   | <u> </u>                 | Pi            | none no. (30                              |   |  |  |  |  |  |  |
| Maria                    | the IDS      | علق مرمد دائم  |                             | oparar chown sho                      | ve? (see instructions)  | `                        |               |   | X Yes No  |  |  |  |  |  |  |

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Rantive Checklist of Required Schedules No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Yes, complete Х 1 X 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?.... Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I. 3 X 3 Х 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.... X 5 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, X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II...... X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 X complete Schedule D, Part III..... Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV..... X 9 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..... Х 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings and equipment in Part X, line 10% 'Yes,' complete Schedule X 11 a D, Part VI..... 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. Х 11 b X 11 c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX..... 11 d Х e Did the organization report an amount for other liabilities in Part X, line 25?/f 'Yes,' complete Schedule D, Part X...... Х 11 e 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)?/f 'Yes,' complete Schedule D, Part X..... Χ 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII. Х 12a Х 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)?// 'Yes,' complete Schedule E..... 13 X 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV..... X 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV..... X 15 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..... Х 16 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 X 17 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 ..... X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?f 'Yes,' complete Schedule G, Part III. Х 19 X 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H..... 20 b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?..... 20 b

?

| T <sub>i</sub> ai | this checkist of required schedules (continued)   | _    | Yes | No       |
|-------------------|---|------|-----|----------|
| 21                | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? It 'Yes,' complete Schedule i, Parts I and II.  | 21   |     | X        |
| .22               | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III   | 22   |     | X        |
| 23                | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J  | 23_  |     | х        |
| 24 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  |     | Х        |
| Ŀ                 | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?   | 24b  | _   |          |
| c                 | : Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  | 24c  |     |          |
| c                 | Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?   | 24d  |     |          |
| 25 a              | Section 501(c)(3), 501(c)(4), and 501(c)(29) 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        |
| ŧ                 | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ  | 25b  |     | Х        |
| 26                | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If 'Yes', complete Schedule L, Part II                                | 26   |     | Х        |
| 27                | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III | 27   |     | 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):   |      |     |          |
| а                 | A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV   | 28a  |     | X        |
| t                 | 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  | 28c  |     | х        |
| 29                | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes, ' complete Schedule M   | 29   | X   | <u> </u> |
| 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   |     | Х        |
| 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        |
| 34                | Was the organization related to any tax-exempt or taxable entity?!f 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1   | 34   |     | Х        |
| 35 a              | Did the organization have a controlled entity within the meaning of section 512(b)(13)?   | 35a  |     | X        |
| Ŀ                 | olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?If 'Yes,' complete Schedule R, Part V, line 2   | 35b  |     |          |
| 36                | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2  | 36   |     | X        |
| 37                | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI   | 37   |     | Х        |
| 38                | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O   | 38   | Х   |          |
| BAA               |   | Form | 990 | (2014)   |

| Form                                   | 990 (2014) The                            | Conflict                          | Center                     |  |   | 84-1   | <u>080552                                  </u> | Pa   | age .  |
|--|---|-----------------------------------|----------------------------|--|---|--|---|--|--|
| Par                                    | tW Statements                             | Regarding                         | Other IR:                  | S Filings and Tax                                | Compliance  |  |   |  |  |
| *** ** ******************************* |   |                                   |                            |  | in this Part V  |  | <u> </u>  |  | ٠  |
|  |   |                                   |                            |  |   |  |   | Yes  | No   |
| 1 a                                    | Enter the number i                        | reported in Box                   | 3 of Form                  | 1096. Enter -U- if not                           | applicable  | la   | 8   | 10.5   | H.   |
| t                                      | Enter the number of                       | of Forms W-2G                     | included in                | n line 1a. Enter -0- if t                        | not applicable  | 1 b  | 0   |  |  |
|  | Did the organizatio<br>(gambling) winning | on comply with I                  | backup with                | hholding rules for repo                          | ortable payments to vendor                                    | rs and reportable gar                          | ming<br>1c                                      | X  |  |
|  | ments, filed for the                      | e calendar year                   | ending with                | n or within the year o                           | al of Wage and Tax State-<br>overed by this return            |  | 24  |  |  |
| k                                      |   |                                   |                            |  | equired federal employmeг                                     |  | 2b  |  | and the  |
|  | Note. If the sum of                       | flines 1a and 2                   | a is greate                | r than 250, you may b                            | e required tœ- <i>file</i> (see inst                          | tructions)                                     |   |  |  |
|  |   |                                   |                            |  | 000 or more during the yea                                    | ar?  | <u>3a</u>                                       |  | X  |
|  |   |                                   |                            | ine 3b, provide an explanatio                    |   | •        |   |  |  |
| 4 a                                    | At any time during financial account in   | the calendar y<br>n a foreign cou | ear, did the               | e organization have a<br>as a bank account, se   | n interest in, or a signature<br>curities account, or other f | e or other authority ov<br>financial account)? | ver, a 4a                                       |  | X  |
| k                                      | If 'Yes,' enter the r                     | name of the for                   | eign countr                | ry:►   |   |  |   |  |  |
|  | See instructions fo                       | or filing requirer                | nents for F                | inCEN Form 114, Rep                              | ort of Foreign Bank and Fi                                    | inancial Accounts. (F                          | BAR)  |  |  |
| 5 a                                    | Was the organizati                        | ion a party to a                  | prohibited                 | tax shelter transactio                           | n at any time during the ta                                   | ıx year?                                       | <u>5</u> a                                      | 1 +  | X  |
| ł                                      | Did any taxable pa                        | arty notify the o                 | rganization                | that it was or is a pa                           | rty to a prohibited tax shel                                  | ter transaction?                               | 5b  | <del>                                     </del> | X  |
| C                                      | If 'Yes,' to line 5a                      | or 5b, did the c                  | rganization                | n file Form 8886-T?                              |   |  | <u>5 c</u>                                      |  |  |
| 6 a                                    | Does the organizat                        | tion have annua                   | al gross red<br>not tax de | ceipts that are normal<br>ductible as charitable | ly greater than \$100,000, a contributions?                   | and did the organizat                          | ion<br>6 a                                      | 1  | Х  |
| k                                      |   | ganization inclu                  | ide with eve               | ery solicitation an exp                          | ress statement that such c                                    |  |   | )  |  |
| 7                                      | Organizations that                        | t may receive d                   | leductible (               | contributions under s                            | ection 170(c).  |  |   |  |  |
|  | Did the organization                      | on receive a pa                   | yment in ex                |  | artly as a contribution and p                                 | partly for goods and                           | 7 a   |  | X  |
| ŀ                                      | If 'Yes ' did the ord                     | ganization notif                  | v the donor                | r of the value of the g                          | oods or services provided?                                    | ·  | 7 b   | )  |  |
| ,                                      | Did the organization                      | on sell, exchang                  | e. or other                | rwise dispose of tangi                           | ble personal property for w                                   | which it was required                          | to file   |  | - 17   |
|  | Form 8282?                                |                                   |                            |  | ,   |  | <u>/ c</u>                                      |  | X  |
| •                                      | If 'Yes,' indicate th                     | ne number of Fo                   | orms 8282                  | filed during the year.                           |   | 7 d  |   | -  |  |
| •                                      | Did the organization                      | on receive any                    | funds, dired               | ctly or indirectly, to pa                        | ay premiums on a personal                                     | I benefit contract?                            | <u>7 e</u>                                      |  | X  |
|  |   |                                   |                            |  | ndirectly, on a personal ber                                  |  | <u>7f</u>                                       |  | X  |
|  | as required?                              |                                   |                            |  |   |  | 79  | 1  |  |
| ł                                      | Form 1098-C?                              |                                   |                            |  | s, or other vehicles, did the                                 |  | 7h  |  | isin setrii  |
| 8                                      | Sponsoring organ                          | izations maint                    | aining don                 | or advised fundsDid                              | a donor advised fund main                                     | itained by the sponso                          | ring  |  |  |
|  | -   |                                   |                            |  | e year?   |  |   | i describe                                       | 200  |
| 9                                      | Sponsoring organ                          | izations maint                    | aining don                 | or advised funds.                                |   |  |   |  |  |
| á                                      | Did the sponsoring                        | g organization r                  | nake any ta                | axable distributions u                           | nder section 4966?  |  | 9 a   |  | <b></b> -  |
| ŀ                                      | Did the sponsoring                        | g organization r                  | nake a dist                | tribution to a donor, d                          | onor advisor, or related pe                                   | rson?  | 9t  | )<br>  | 01:305   |
|  | Section 501(c)(7)                         |                                   |                            |  |   | laa İ  |   |  |  |
|  |   |                                   |                            |  | 12  |  |   |  |  |
|  |   |                                   |                            | VIII, line 12, for public                        | c use of club facilities                                      | 10b  |   |  |  |
|  | Section 501(c)(12)                        |                                   |                            |  |   | las i  |   | 7  | 1 4  |
|  |   |                                   |                            |  |   | 11 a   |   |  |  |
|  | against amounts d                         | iue or received                   | from them.                 | et amounts due or pa<br>.)                       |   | 116  |   |  |  |
| 12:                                    | Section 4947(a <b>)</b> (1)               | ) non-exempt c                    | haritable tr               | rusts is the organization                        | on filing Form 990 in lieu of                                 | t Form 1041?                                   | 12a   |  | 1  |
|  |   |                                   |                            |  | ued during the year   | 12b  |   |  |  |
| 13                                     | Section 501(c)(29)                        | ) qualified nonp                  | orofit healtl              | h insurance issuers.                             |   |  |   |  |  |
|  | Is the organization                       | n licensed to iss                 | sue qualifie               | ed health plans in mor                           | e than one state?   |  | 13a   | 1  | THE STATE OF THE S |
|  | Note. See the inst                        | ructions for add                  | ditional info              | ormation the organizat                           | tion must report on Schedu                                    | ıle O.   |   |  |  |
|  | which the organiza                        | ation is licensed                 | d to issue o               |  |   |  |   |  |  |
|  | : Enter the amount                        | of reserves on                    | hand                       |  |   | 13c  | - 1. Tag  |  |  |

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

Page 6 84-1080552 Form 990 (2014) The Conflict Center Part Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management 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. b Enter the number of voting members included in line 1a, above, who are independent . . . . 16 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee?..... 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?..... X 3 4 Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed?.... 5 Did the organization become aware during the year of a significant diversion of the organization's assets?..... 6 Did the organization have members or stockholders?.... X 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X members of the governing body?..... b Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body?..... Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8 a a The governing body?..... 8Ь Х b Each committee with authority to act on behalf of the governing body?..... 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 Q ...... 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No Yes X 10 a 10 a Did the organization have local chapters, branches, or affiliates?..... b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?.... 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy?If 'No,' go to line 13..... X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done...See Schedule 0..... X 12c X 13 Did the organization have a written whistleblower policy?..... 13 14 Did the organization have a written document retention and destruction policy?..... Х 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? 15a X b Other officers or key employees of the organization..... 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a taxable entity during the year?..... b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements?..... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain in Schedule O) Upon request Another's website Own website Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to

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the public during the tax year.

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

See Schedule 0

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Form 990 (2014) The Conflict Center

Rankvilla 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'scurrent 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 sformer 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'sformer 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.

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

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

| Check this box if ficting the digaritzation from | 1  |                                |                       | (C)     | )                                   |                                       | $\neg$   | , , , , , , , , , , , , , , , , , , ,              |   |  |
|--|--|--------------------------------|-----------------------|---------|-------------------------------------|---------------------------------------|----------|--|---|--|
| (A)<br>Name and Title                            | (B)<br>Average<br>hours<br>per   | than<br>is                     | one<br>both<br>dire   | do no   | ot che<br>unles<br>fficer<br>truste | eck mores<br>s person<br>and a<br>se) | n        | (D)  Reportable compensation from the organization | (E)  Reportable compensation from related organizations | <b>(F)</b> Estimated amount of other compensation        |
|  | per<br>week<br>(list any<br>hours for<br>related<br>organiza-<br>tions<br>below<br>dotted<br>line) | Individual trustee or director | Institutional trustee | Officer | Key emplayee                        | Highest compensated employee          | Former   | (W-2/1099-MISC)                                    | (W-2/1099-MISC)   | from the<br>organization<br>and related<br>organizations |
| (1) Ron Ludwig                                   | 45   |                                |                       |         |                                     |                                       |          |  | _   |  |
| Executive Direc                                  | 0  | X                              |                       | Х       |                                     | 1                                     |          | 86,844.  | 0.  | 0.   |
| (2) Chris Armijo                                 | 0  |                                | ļ                     |         |                                     |                                       |          |  | _   | ^  |
| Director   | 0_   | X                              |                       |         | _                                   | -                                     |          | 0.   | 0.  | 0.   |
| (3) Susan Chambers-Yates                         |  | ļ                              |                       |         | 1                                   |                                       |          |  |   |  |
| <u>Director</u>                                  | 0  | X                              | <u> </u>              |         | ļ                                   | <del> </del>                          |          | 0.   | 0.  | 0.   |
| (4) Larry Botnick                                |  |                                |                       | Ì       |                                     | 1                                     |          |  | _   | _  |
| <u>Director</u>                                  | 0  | X                              | <u> </u>              | _       | <u> </u>                            |                                       |          | 0.   | 0.  | 0.   |
| (5) Alex Gano                                    |  |                                |                       |         |                                     |                                       |          |  |   | _  |
| Director   | 0.   | X                              | _                     |         | ļ. <u></u>                          | 1                                     |          | 0.   | 0.  | 0.   |
| (6) Michael Hoops                                |  |                                |                       |         |                                     |                                       |          |  |   | ,  |
| President  | 0  | X                              | -                     | Х       | -                                   | <del> </del>                          |          | 0.   | 0.  | 0.   |
| (7) Brian Price                                  |  | ļ                              |                       | ١       |                                     | 1                                     |          |  |   | 0  |
| Vice President                                   | 0  | X                              | <u> </u> _            | X       | ┼                                   |                                       |          | 0.   | 0.  | 0.   |
| (8) Robert Boggess                               |  | ļ                              | 1                     |         | 1                                   |                                       |          |  | 0.  | 0.   |
| Director   | 0  | X                              | ┾-                    | -       | ┼                                   |                                       |          | 0.   |   | <u> </u>   |
| _(9) Benny Samuels                               | 0  | ١,,                            |                       |         |                                     |                                       |          | 0.   | 0.  | 0.   |
| Director   | 0  | X                              | -                     | -       | ├-                                  | 1                                     |          | U.   | U.  |  |
| (10) John Wicburg                                | 0  | ,,,                            |                       | ٦,      |                                     |                                       |          | 0.   | 0.  | 0.   |
| Secretary  | 0  | X                              | ┼                     | X       | +                                   |                                       |          | 0.   | <del>                                     </del>        |  |
| (11) Brendalee Connors                           |  | ١,,                            | 1                     | 7,      |                                     |                                       |          |  | 0.  | 0.   |
| Treasurer  | 0  | X                              | ┼                     | X       | ┼                                   | -                                     |          | 0.   |   |  |
| (12) Dennis Kennedy                              |  | ١.,                            |                       |         |                                     |                                       |          |  | 0.  | 0.   |
| Director   | 0  | X                              | +-                    | -       | ╀                                   | +                                     |          | 0.   | <u> </u>  |  |
| (13) Dennis Dougherty                            | 0_   | ,,                             | 1                     |         |                                     |                                       | l        |  | 0.  | 0.   |
| Director   | 0  | X                              | +-                    | -       | +                                   |                                       | <u> </u> | 0.   | <u> </u>  | <u>U.</u>  |
| (14) David Morgan                                |  |                                |                       |         |                                     |                                       |          | 0.   | .l o.   | .l o.  |
| Director   | 0_   | <u> </u>                       |                       |         |                                     |                                       |          | <u> </u>   |   | Form <b>990</b> (2014                                    |

| Rangvill Section A. Officers, Directors, Tru   | ıstees, l                      | Key  | Em                    | plo           | ye.           | es, a                           | anc            | l Highest Com  | pensated Emp  | oyees (continued)             |
|--|--------------------------------|--|-----------------------|---------------|---------------|---------------------------------|----------------|--|---|-------------------------------|
|  | (B)                            |  |                       | (C            | <b>)</b>      |                                 |                |  |   |                               |
| <b>(A)</b><br>Name and title   | Average<br>hours               | l DOX.   | Ulife                 | 55 µe         | 115011        | than                            | 1 444 1        | (D)<br>Reportable  | <b>(E)</b><br>Reportable                                      | (F) Estimated amount of other |
| static and the   | per<br>week<br>(list any       |  |                       |               |               | or/trus<br>및 표                  |                | compensation from<br>the organization<br>(W-2/1099-MISC) | compensation from<br>related organizations<br>(W-2/1099-MISC) | compensation<br>from the      |
| •  | hours                          | Individual trustee<br>or director                | Institutional trustee | ffice         | Key employee  | mples<br>mples                  | me             | (11-211033-11100)  | (11-271033-111100)  | organization<br>and related   |
|  | related<br>organiza            | ctor t   | iona                  | ~             | 夏             | ee con                          | =              |  |   | organizations                 |
|  | - tions<br>below               | nste   | Trus.                 |               | è             | ) per                           |                |  |   |                               |
|  | dotted<br>line)                | ă  | ee                    |               |               | Highest compensated<br>employee |                |  |   |                               |
| (15) Guy Pasquino  | 0                              |  |                       |               |               |                                 |                |  |   |                               |
| Director   | 0                              | X  | Ш                     |               | <u> </u>      |                                 |                | 0.   | 0.  | 0.                            |
| (16) Jenna Schnepel  | 0                              | .,   |                       |               |               |                                 |                |  | 0.  | 0.                            |
| Director (17) Lona Thorson   | 0                              | Х  |                       |               |               |                                 |                | 0.   |   | <u> </u>                      |
| Director   |                                | X  |                       |               |               |                                 |                | 0.   | 0.  | 0.                            |
| (18)   |                                |  |                       |               |               | _                               |                | u u  |   |                               |
|  |                                | -  |                       |               | _             |                                 | <u> </u>       |  |   |                               |
| (19)   | <del> </del>                   | 1  |                       |               |               |                                 | 1              |  |   |                               |
| (20)   |                                | <del>                                     </del> | -                     |               |               |                                 |                |  |   |                               |
| (21)   |                                | -  |                       |               |               |                                 |                |  | <u>-</u>  |                               |
|  |                                |  |                       |               |               |                                 | _              |  |   |                               |
| (22)   |                                |  |                       |               |               |                                 |                |  |   |                               |
| (23)   |                                |  |                       |               |               |                                 |                |  |   |                               |
| (24)   |                                | -  |                       |               | ļ             | -                               | -              | <u>.</u>   |   |                               |
| (24)   | <b>-</b> -                     | 1  |                       |               |               |                                 |                |  |   |                               |
| (25)   |                                |  |                       |               |               |                                 |                |  |   |                               |
| 1 b Sub-total  | <u> </u>                       | <u></u>  |                       | <u> </u>      | L             | l                               | <u> </u>       | 86,844.  | 0.  | 0.                            |
| 1 b Sub-total  | on A                           |  |                       |               |               |                                 | <b>-</b>       | 0.   | 0.  | . 0.                          |
| d Total (add lines 1b and 1c)  |                                |  |                       |               |               |                                 | <b></b>        | 86,844.  | 0.  | 0.                            |
| 2 Total number of individuals (including but not lim   | nited to th                    | ose  | iste                  | d at          | ove           | ) wh                            | o re           | ceived more than   | \$100,000 of report   | able compensation             |
| from the organization   0  |                                |  |                       |               |               |                                 |                |  |   | Yes No                        |
| 3 Did the organization list anyformer officer, direct  | tor, or tru                    | stee.  | key                   | em            | ploy          | ∕ee, ∣                          | or h           | ighest compensat   | ed employee   |                               |
| on line 1a? If 'Yes,' complete Schedule J for suc  | h individu                     | ıaı  |                       | • • •         |               | • • • •                         | • • •          |  |   | . 3 X                         |
| 4 For any individual listed on line 1a, is the sum of<br>the organization and related organizations greate | f reportab<br>er than \$1      | ie co  | mpe<br>00?/           | ensa<br>If 'Y | atior<br>'es' | and                             | i otr<br>olete | ner compensation<br>e Schedule J for                     | from  |                               |
| such individual  | <i></i>                        | • • • •  |                       | • • •         |               | • • • •                         | • • •          | •                  |   | . 4 X                         |
| 5 Did any person listed on line 1a receive or accru<br>for services rendered to the organization? If 'Yes  | ie comper<br>s,' <i>comple</i> | nsatio<br>te So                                  | on tr<br>ched         | om<br>lule    | any<br>J fo   | r unre                          | elate<br>ch p  | ed organization or<br>erson                              | ındıviduai  |                               |
| Section B. Independent Contractors  1 Complete this table for your five highest compen                     | ented inc                      | lanar  | den                   | t co          | ntrs          | ctors                           | th:            | at received more t                                       | han \$100 000 of  |                               |
| compensation from the organization. Report com   | pensatio                       | n for  | the                   | cale          | enda          | ar ye                           | ar e           | naing with or with                                       | in the organization   |                               |
| (A)<br>Name and business add   | iress                          |  |                       |               |               |                                 |                | Description  | )<br>of services  | <b>(C)</b><br>Compensation    |
|  |                                |  |                       |               |               |                                 |                |  |   |                               |
|  |                                |  |                       |               |               |                                 |                |  |   | <del></del>                   |
|  |                                |  |                       |               |               |                                 |                |  |   |                               |
|  |                                |  |                       |               |               |                                 |                |  |   |                               |
| Total number of independent contractors (includ<br>\$100,000 of compensation from the organization         |                                | ot lim   | uted                  | to '          | thos          | e lisi                          | ted            | above) who receiv  | red more than   |                               |
| BAA  | ·U                             | TEEA   | 0108L                 | L 03.         | /09/1         | 5                               |                | <del></del>  |   | Form <b>990</b> (2014)        |

| Par  | Statement of Revenue  Check if Schedule O contains a response  | er moto to cm                   | ling in this Part VI | Ш                                      |   |   |
|--|--|---------------------------------|----------------------|--|---|---|
|  | Check if Schedule O contains a response  | or note to any                  | (A) Total revenue    | (B) Related or exempt function revenue | (C)<br>Unrelated<br>business<br>revenue | (D)  Revenue excluded from tax under sections 512-514 |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a Federated campaigns     1 a       b Membership dues     1 b       c Fundraising events     1 c       d Related organizations     1 d       e Government grants (contributions)     1 e | 1,516.                          |                      |  |   |   |
|  | f All other contributions, gifts, grants, and similar amounts not included above  g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f                             |                                 | 214,896.             |  |   |   |
| Program Service Revenue                                | 2a Conflict Resolution b c d   | siness Code                     | 332,206.             | 332,206.                               |   |   |
| Program  | f All other program service revenue g Total. Add lines 2a-2f   |                                 | 332,206.             |  |   |   |
|  | Investment income (including dividends, into other similar amounts)  | d proceeds                      | 11,912.              | 11,912.                                |   |   |
|  | 6 a Gross rents.       58,575.         b Less: rental expenses       58,575.         c Rental income or (loss).       58,575.  |                                 |                      |  |   | FO 575  |
|  | d Net rental income or (loss)  | (ii) Other 125.                 | 58,575.              |  |   | <u>58,575</u> .                                       |
|  | and sales expenses. 16,787.  c Gain or (loss). 60.  d Net gain or (loss)   | 125.                            | 185.                 | 185.                                   |   |   |
| Other Revenue  | 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18  | 7,641.                          |                      |  |   |   |
| Other  | b Less: direct expenses b c Net income or (loss) from fundraising event  | ts►                             | 7,641.               |  |   |   |
|  | 9 a Gross income from gaming activities. See Part IV, line 19  | ·<br>                           |                      |  |   |   |
|  | c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances  | · · · · · · · · · · · · · · · · | 1                    |  |   |   |
|  | ######################################   | Susiness Code                   |                      |  |   |   |
|  | · · · · · · · · · · · · · · · · · · ·  | 0099<br>1600                    | 5,209.<br>3,148.     |  |   |   |
|  | d All other revenue  |                                 | 8,357                |  | 0.                                      | 58,575  |

Form 990 (2014) The Conflict Center

Part IX Statement of Functional Expenses

| Sec      | 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 r   |                                |                              | (0)  | (D)                  |
|          | not include amounts reported on lines<br>7b, 8b, 9b, and 10b of Part VIII.   | ( <b>(\)</b><br>Total expenses | (B) Program service expenses | (C)<br>Management and<br>general expenses    | Fundraising expenses |
| . 1      | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21   |                                |                              |  |                      |
| 2        | Grants and other assistance to domestic individuals. See Part IV, line 22  |                                |                              |  |                      |
| 3        | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16   |                                |                              |  |                      |
| 4        | •  |                                | <u> </u>                     |  |                      |
| 5        | Compensation of current officers, directors, trustees, and key employees   | 86,844.                        | 69,475.                      | 17,369.                                      | 0.                   |
| 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   | 305,025.                       | 235,355.                     | 25,605.                                      | 44,065.              |
| 8        | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   | 7,958.                         | 6,366.                       | 1,592.                                       | <del>-</del>         |
| 9        | Other employee benefits  | 23,731.                        | 19,401.                      | 4,330.                                       |                      |
| 10       | Payroll taxes  | 32,804.                        | 25,260.                      | 3,185.                                       | 4,359.               |
|          | Fees for services (non-employees):   | 32,004.                        |                              |  |                      |
|          | a Management   |                                |                              |  |                      |
|          | b Legal  |                                |                              |  |                      |
|          | c Accounting   | 1,549.                         | 1,271.                       | 278.   |                      |
|          | d Lobbying.  |                                |                              |  | <u>.</u>             |
|          | Professional fundraising services. See Part IV, line 17  | 10,051.                        |                              |  | 10,051.              |
|          | Investment management fees   |                                |                              |  |                      |
|          | Other, (If line 11g amt exceeds 10% of line 25, column   |                                |                              |  |                      |
| 10       | (A) amount, list line 11g expenses on Schedule 0)  | 124.                           | 104.                         | 20.  |                      |
|          | Advertising and promotion  | 16,206.                        | 15,065.                      | 1,141.                                       |                      |
| 13       |  | 10,200.                        | 15,003.                      | 1,111.                                       |                      |
| 14<br>15 | Information technology   |                                |                              | ,  |                      |
| 16       | Occupancy  | 32,791.                        | 33,186.                      | -395.  |                      |
| 17       | Travel   | 3,276.                         | 2,892.                       | 384.   |                      |
|          | Payments of travel or entertainment  | 3,2101                         | 2,038.                       |  | ····                 |
| 10       | expenses for any federal, state, or local public officials   |                                |                              |  |                      |
| 19       | ,  |                                |                              |  |                      |
| 20       | Interest   |                                |                              |  |                      |
| 21       | Payments to affiliates   | 40 004                         | 22 500                       | 7 254  |                      |
| 22       |  | 40,854.                        | 33,500.                      | 7,354.                                       |                      |
| 23<br>24 | InsuranceOther expenses not  |                                |                              |  | <b>美国在沙漠外的</b>       |
| 4-       | 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.)  |                                |                              |  |                      |
|          | · ·  | 75,645.                        | 75,357.                      | 288.   |                      |
|          | a <u>Special projects expense</u><br>b <u>Contract labor</u>   | 25,837.                        | 17, 436.                     | 98.  | _8,303.              |
|          | Audit_fees   | 4,840.                         | 3,969.                       | 871.   |                      |
|          | d Printing and Publications  | 4,775.                         | 4,149.                       |  |                      |
|          | e All other expenses   | 10,954.                        | 9,296.                       |  |                      |
|          | Total functional expenses. Add lines 1 through 24e   | 683,264.                       |                              |  | 66,778.              |
| 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 |                                |                              |  |                      |
|          | SOP 98-2 (ASC 958-720)   | <u> </u>                       | <u> </u>                     | <u>                                     </u> | Form 990 (2014)      |

BAA

Part X 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 23,487. 21,380 1 2 110,042. 139,818. Savings and temporary cash investments..... 2 3 Pledges and grants receivable, net ..... 3 34,450 4 22,560 Accounts receivable, net..... Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L . . 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 7 Notes and loans receivable, net ..... 8 9 2,246 1.901 Prepaid expenses and deferred charges..... 10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10a 401,777 10b 783,812 10 c 810,403 11 Investments - publicly traded securities..... 12 Investments – other securities. See Part IV, line 11..... 12 Investments – program-related. See Part IV, line 11..... 13 13 14 Intangible assets..... 15 431,452 Other assets. See Part IV, line 11..... 497,638 15 467,109. 16 1,412,080. Total assets. Add lines 1 through 15 (must equal line 34)..... 16 25,292 17 Accounts payable and accrued expenses..... 17 18 Grants payable ..... 18 Deferred revenue ..... 19 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D...... Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 22 23 Secured mortgages and notes payable to unrelated third parties..... 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. 7,816. 25 1<u>0,345</u> 26 30,100 35,637. Total liabilities. Add lines 17 through 25..... Organizations that follow SFAS 117 (ASC 958), check here X and complete Bafances lines 27 through 29, and lines 33 and 34. 1,001,769. 27 950,528 Unrestricted net assets..... 28 Temporarily restricted net assets ..... 29 , 452 429,703 Permanently restricted net assets ..... or Fund Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds..... Net Assets 31 Paid-in or capital surplus, or land, building, or equipment fund ..... 31 32 Retained earnings, endowment, accumulated income, or other funds..... 32 33 1,381,980. Total net assets or fund balances..... 1,431,472 33 Total liabilities and net assets/fund balances ..... 1,412,080. 1,467,109. 34 Form 990 (2014)

| -<br>-orm | 990 (2014) The Conflict Center   | 84-1080552                            | Pag             | ge 12        |
|-----------|--|---------------------------------------|-----------------|--------------|
|           | Mill Deconciliation of Net Assets  | •                                     |                 |              |
|           | Check if Schedule O contains a response or note to any line in this Part XI  |                                       | 500 7           |              |
| 1         | Total revenue (must equal Part VIII, cotumn (A), line 12)  | ···   _                               | <u> </u>        | 14.          |
| 2         | Total expenses (must equal Part IX, column (A), line 25)   | Z                                     | 683,2           |              |
| 3         | Revenue less expenses. Subtract line 2 from line 1   | 3                                     | -49,4           |              |
| 4         | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  | ····   4                              | 1,431,4         | <u>72.</u>   |
| 5         | Net unrealized gains (losses) on investments   | 5                                     |                 |              |
| 6         | Donated services and use of facilities   |                                       |                 |              |
| 7         | Investment expenses  | · · · · · · · · · · · · · · · · · · · |                 |              |
| 8         | Prior period adjustments   | ····   - <mark></mark>                |                 |              |
| 9         | Other changes in net assets or fund balances (explain in Schedule O)   | 9                                     |                 | 0.           |
| 10        | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))   | 1 1                                   | 1,381,9         | 80.          |
| Par       | 談川製 Financial Statements and Reporting   |                                       |                 |              |
| 4-pas-322 | Check if Schedule O contains a response or note to any line in this Part XII   |                                       |                 |              |
|           |  |                                       | Yes             | No           |
| 1         | Accounting method used to prepare the Form 990: Cash X Accrual Other   |                                       |                 |              |
|           | If the organization changed its method of accounting from a prior year or checked 'Other," explain in Schedule O.  |                                       | 2 a             | X            |
| 2 a       | Were the organization's financial statements compiled or reviewed by an independent accountant?  |                                       |                 |              |
|           | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reseparate basis, consolidated basis, or both:    Separate basis                                  | eviewed on a                          |                 |              |
|           | Ochdigto hagio   104116411411411111111111111111111111111   |                                       | 26 X            |              |
| ŀ         | were the organization's financial statements audited by an independent accountant?   |                                       |                 | 700          |
|           | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a spass, consolidated basis, or both:    V   Separate basis  | seра: аte                             |                 |              |
|           |  | int of the oudit                      | 25-30-50 PERSON | h Williamson |
| (         | If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversic review, or compilation of its financial statements and selection of an independent accountant? |                                       | 2 c X           |              |
|           | If the organization changed either its oversight process or selection process during the tax year, explain   | 1                                     |                 |              |
|           | in Schedule O.  As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?   |                                       | 3 a             | X_           |
| i         | of 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo to or audits, explain why in Schedule O and describe any steps taken to undergo such audits     | he required audit                     | 1               | <u> </u>     |
|           | or desired expression my in a state of   |                                       | Form 990        | (2014)       |

BAA

#### 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.

2014

Openio Public Inspection

Schedule A (Form 990 or 990-EZ) 2014

Name of the organization Employer identification number The Conflict Center 84-1080552 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described insection 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described insection 170(b)(1)(A)(ii). 4 A medical research organization operated in conjunction with a hospital described insection 170(b)(1)(A)(iii) Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 170(b)(1)(A)(iv). (Complete Part II.) 5 6 A federal, state, or local government or governmental unit described insection 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 7 8 A community trust described in section 170(bX1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions— subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 June 30, 1975. See **section 509(a)(2).** (Complete Part III.) An organization organized and operated exclusively to test for public safety. Seeection 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described insection 509(aX1) or section 509(aX2). See section 509(aX3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 11 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization or must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s)You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations..... g Provide the following information about the supported organization(s). (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (v) Amount of monetary (i) Name of supported organization (iv) is the organization listed (vi) Amount of other support (see instructions) support (see instructions) Yes No (A) (B) (C) (D) (E) Total

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

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

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

| Sect           | ion A. Public Support  |  |  |                     |                      |                    |                        |
|----------------|--|--|--|---------------------|----------------------|--------------------|------------------------|
| Caler<br>begir | ndar year (or fiscal year<br>nning in) ►   | <b>(a)</b> 2010                          | <b>(b)</b> 2011                        | (c) 2012            | (d) 2013             | <b>(e)</b> 2014    | (f) Total              |
|                | Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.).  | 279,276.                                 | 365,983.                               | 212,554.            | 216,846.             | 214,896.           | 1,289,555.             |
| 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.                     |
|                | Total. Add lines 1 through 3 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) | 279,276.                                 | 365,983.                               | 212,554.            | 216,846.             | 214,896.           | 1,289,555.<br>453,061. |
|                | Public support. Subtract line 5 from line 4  |  |  |                     |                      |                    | 836,494.               |
|                | tion B. Total Support  | ı  |  | <del></del> -       |                      | <u> </u>           |                        |
| Cale:          | ndar year (or fiscal year<br>nning in) ►   | (a) 2010                                 | <b>(b)</b> 2011                        | <b>(c)</b> 2012     | (d) 2013             | <b>(e)</b> 2014    | (f) Total              |
| _              | Amounts from line 4  | 279,276.                                 | 365,983.                               | 212,554.            | 216,846.             | 214,896.           | 1,289,555.             |
| 8              | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   | 67,384.                                  | 87,615.                                | 50,130.             | 74,510.              | 70,487.            | 350,126.               |
| 9              | Net income from unrelated business activities, whether or not the business is regularly carried on   |  |  |                     | ,                    |                    | 0.                     |
| 10             | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). See Part VI.  | 21,043.                                  | 18,761.                                | 12,329.             | 9,213.               | 7,641.             | 68,987.                |
| 11             | Total support. Add lines 7 through 10  |  |  |                     |                      |                    | 1,708,668.             |
| 12             | Gross receipts from related activ  |  |  |                     | ,                    | 12                 | 0.                     |
| 13             | First five years. If the Form 990 organization, check this box and   | stop here                                |  |                     | r fifth tax year as  | a section 501(c)(  | 3)                     |
| Sec            | tion C. Computation of Pu<br>Public support percentage for 20  | blic Support F                           | Percentage                             | 11 1 (0)            | <del> </del>         | 1 1 4              | 40.00%                 |
| 14             | Public support percentage for 20<br>Public support percentage from   | 014 (line 6, colum                       | n (f) divided by ii Part II line 14    | ne II, column (i),  |                      |                    | 48.96 %<br>50.82 %     |
|                | 33-1/3% support test – 2014. If and stop here. The organization  |  |  |                     |                      | 0.1100/            | I and all the land     |
| ŧ              | 33-1/3% support test – 2013. If t<br>and stop here. The organization   | the erganization d                       | id not check a ho                      | v on line 13 or 16  | ia, and line 15 is 3 | 3-1/3% or more.    | check this box -       |
|                | 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact   | meets the Tacts-<br>s-and-circumstan     | and-circumstance<br>ces' test. The org | anization qualifies | s as a publicly sup  | ported organizati  | on►                    |
|                | o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar   | i meets the 'facts-<br>nd-circumstances' | and-circumstance<br>test. The organiz  | ation qualifies as  | a publicly suppor    | ted organization . | VI 110W die -          |
| 18             | Private foundation.If the organi   | zation did not che                       | eck a pox on line                      | 13, 10a, 10D, 1/a   |                      |                    |                        |
| RAA            |  |  |  |                     | Sc                   | nequie A (COM) S   | 990 or 990-EZ) 2014    |

Partill 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.)

| Sec   | tion A. Public Support   |  |                           |                      |                      |                                       |          |               |
|-------|--|--|---------------------------|----------------------|----------------------|---------------------------------------|----------|---------------|
| Calen | dar year (or fiscal yr beginning in)►                                      | (a) 2010                                     | <b>(b)</b> 2011           | (c) 2012             | (d) 2013             | (e) 2014                              | 4        | (f) Total     |
| 1     | Gifts, grants, contributions and membership fees                           |  | _                         |                      |                      |                                       |          |               |
| -     | received. (Do not include  |  |                           |                      |                      |                                       |          |               |
|       | any 'unusual grants.')   |  |                           | . <u> </u>           | ٠.                   |                                       |          |               |
| 2     | Gross receipts from admis-   |  |                           | İ                    |                      |                                       |          |               |
|       | sions, merchandise sold or<br>services performed, or facilities            |  |                           |                      |                      |                                       |          |               |
|       | furnished in any activity that is  |  |                           |                      |                      |                                       |          |               |
|       | related to the organization's  |  |                           |                      |                      |                                       |          |               |
| 3     | tax-exempt purpose Gross receipts from activities                          |  | ·                         |                      |                      |                                       |          |               |
| ə     | that are not an unrelated trade or business under section 513.             |  |                           |                      |                      |                                       | ļ        |               |
| 4     | Tax revenues levied for the  |  |                           |                      |                      |                                       |          |               |
|       | organization's benefit and either paid to or expended on                   |  |                           |                      |                      |                                       |          |               |
|       | its behalf   |  |                           |                      |                      |                                       | 1        |               |
| 5     | The value of services or   | <u>                                     </u> |                           |                      |                      |                                       |          |               |
|       | facilities furnished by a governmental unit to the                         |  |                           | ·                    | ų                    |                                       |          |               |
|       | organization without charge  |  |                           |                      |                      |                                       |          |               |
| 6     | Total. Add lines 1 through 5   |  |                           |                      |                      |                                       |          |               |
|       | Amounts included on lines 1,   | · · · · · · · · · · · · · · · · · · ·        | ·                         |                      | -                    | 14                                    |          |               |
|       | 2, and 3 received from   |  |                           |                      | •                    | 1                                     |          |               |
|       | disqualified persons   |  |                           |                      |                      | ļ <del></del> .                       | +        |               |
|       | Amounts included on lines 2 and 3 received from other than                 |  | 1                         |                      |                      |                                       |          |               |
|       | disqualified persons that exceed the greater of \$5,000 or                 |  |                           |                      |                      |                                       |          |               |
|       | exceed the greater of \$5,000 or 1% of the amount on line 13               |  |                           |                      |                      |                                       |          |               |
|       | for the year   |  |                           |                      |                      |                                       |          |               |
| c     | Add lines 7a and 7b  |  |                           |                      |                      |                                       |          |               |
| 8     | Public support (Subtract line  |  |                           |                      |                      |                                       |          |               |
|       | 7c from line 6.)   |  |                           |                      |                      |                                       |          |               |
| Sec   | tion B. Total Support  |  | ,                         |                      |                      |                                       |          | ·             |
| Calen | dar year (or fiscal yr beginning in)►                                      | (a) 2010                                     | <b>(b)</b> 2011           | (c) 2012             | (d) 2013             | <b>(e)</b> 201                        | 4        | (f) Total     |
| 9     | Amounts from line 6  |  |                           |                      | 1                    |                                       |          |               |
| 10 a  | Gross income from interest, dividends,                                     |  |                           |                      |                      |                                       |          |               |
|       | payments received on securities loans,<br>rents, royalties and income from |  | ,                         |                      | ,                    | ļ                                     | •        |               |
|       | similar sources  |  |                           |                      |                      | 1                                     |          |               |
| 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  | ı  |                           |                      |                      |                                       |          |               |
|       | capital assets (Explain in Part VI.)                                       |  |                           |                      |                      |                                       | - 1      |               |
| 13    | Total support. (Add lines 9,   |  | · · · ·                   |                      |                      |                                       |          |               |
|       | 10c, 11 and 12.)   |  |                           | ·                    |                      |                                       |          |               |
| 14    | First five years. If the Form 990 organization, check this box and         | is for the organiza                          | ation's first, secor      | nd, third, fourth, o | or fifth tax year as | a section 50                          | )1(c)(3) | )≻□           |
| Sec   | tion C. Computation of Pu  |  |                           |                      |                      |                                       |          | <del></del>   |
| 15    |  | 014 (line 8. colum                           | n (f) divided by li       | ne 13, column (f)    | <u>) </u>            |                                       | 15       | 8             |
| 16    | Public support percentage from   |  |                           |                      |                      |                                       | 16       | જ             |
|       | tion D. Computation of Inv   |  |                           |                      |                      |                                       |          |               |
| 17    | Investment income percentage   | for 2014 (line 10c                           | column (f) divide         | d by line 13, colu   | ımn (fi)             | · · · · · · · · · · · · · · · · · · · | 17       | <del></del>   |
|       | Investment income percentage i   |  |                           |                      |                      |                                       | 18       | <del></del> % |
| 18    | 33-1/3% support tests— 2014. If  |  |                           |                      |                      |                                       |          |               |
|       | is not more than 33-1/3%, check  | k this box and <b>sto</b> p                  | here. The organ           | ization qualifies a  | as a publicly suppo  | orted organiz                         | cation.  | ▶ [           |
|       | 33-1/3% support tests- 2013. If  | the organization                             | did not check a b         | ox on line 14 or I   | ine 19a, and line    | 16 is more tl                         | nan 33-  | -1/3%, and    |
| Ŀ     | line 18 is not more than 33-1/3%   | 6. check this box                            | andstop here. The         | organization ou:     | alifies as a publicl | y supported                           | organi:  | zation ▶ │ │  |
|       | line 18 is not more than 33-1/3%  Private foundation. If the organi        | <ol><li>check this box</li></ol>             | and <b>stop here.</b> The | organization qu      | alifies as a public! | y supported                           | organi:  | zation 🏲 🔲    |

Part V Supporting Organizations

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

| ec  | tion A. All Supporting Organizations  |          | 1   |                 |
|-----|---|----------|-----|-----------------|
|     |   | everter. | Yes | No<br>Februária |
| 1   | Are all of the organization's supported organizations listed by name in the organization's governing documents?  If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.   | 1        |     |                 |
| 2   | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)  | 2        |     |                 |
| 3 a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.   | 3a       |     |                 |
| ŀ   | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination   | 3b       |     |                 |
| (   | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use   | 3c       |     |                 |
| 4:  | a Was any supported organization not organized in the United States ('foreign supported organization')∄f 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below  | 4a       |     |                 |
| 1   | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.  | 4b       |     |                 |
| •   | c Did the organization support any foreign supported organization that does not have an IRS determination under sections.501(c)(3) and 509(a)(1) or (2)?If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes   | 4c       |     |                 |
| 5   | a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document). | 5a       |     |                 |
| I   | b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?   | 5 b      |     |                 |
|     | c Substitutions only. Was the substitution the result of an event beyond the organization's control?  | 5c       |     |                 |
| 6   | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.  | 6        |     |                 |
| 7   | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990).   | 7        |     |                 |
| 8   | 1050) not described in line 77f 'Ves'   | 8        |     |                 |
| 9   | a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in Part VI  | . 9a     | -   |                 |
|     | b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI.   | . 91     | _   |                 |
|     | c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest?/f 'Yes,' provide detail in Part VI  | . 90     |     |                 |
| 10  | a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations) If 'Yes,' answer (b) below  | . 10:    |     |                 |
|     | b Did the organization, have any excess business holdings in the tax year?(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)  | . 101    | 1   |                 |

| Pa  | Supporting Organizations (continued)  |             |             |             |
|-----|---|-------------|-------------|-------------|
| 71  | Has the organization accepted a gift or contribution from any of the following persons?   | Y           | ∕es N       | Vo          |
|     | A person who directly or indirectly controls, either alone or logether with persons described in (b) and (c) below, the governing body of a supported organization?   | 11a         |             |             |
|     | b A family member of a person described in (a) above?   | 11b         |             | _           |
|     | c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI  | 11c         |             |             |
| Sec | ction B. Type I Supporting Organizations  |             |             |             |
| 1   | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1           | es N        | Vo<br>Vo    |
| 2   | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.   | 2           |             |             |
| Sec | ction C. Type II Supporting Organizations   |             |             |             |
|     |   | Y           | res N       | Vo          |
| 1   | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)  | T           |             |             |
| Sec | ction D. All Type III Supporting Organizations  |             |             |             |
|     |   | Y           | es h        | Vo<br>≅oosa |
| 1   | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?   | 1           |             |             |
| 2   | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)   | 2           |             |             |
| 3   | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.   | 3           |             |             |
| Sec | ction E. Type III Functionally-Integrated Supporting Organizations  |             |             |             |
| 1   | Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeafsee instruct   | ions):      |             |             |
| ;   | The organization satisfied the Activities Test. Complete line 2 below.  | •           |             |             |
| ,   | b The organization is the parent of each of its supported organizations. Complete line 3 below.   |             |             |             |
| ,   | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in   | nstructio.  | ns).        |             |
|     |   | <u></u>     | <del></del> |             |
| 2   | Activities Test. Answer (a) and (b) below.  | Y<br>Series | es h        | Vo<br>Vo    |
| •   | a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explainhow these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.  | 2a          |             |             |
| 1   | b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain inPart VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.   | 2b          |             |             |
| 3   | Parent of Supported Organizations. Answer (a) and (b) below.  |             |             |             |
| i   | a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i>  | 3a          |             |             |
| I   | b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard  | 3b          |             |             |

| Pa         | Type III Non-Functionally Integrated 509(a)(3) Supporting Organization   |              |  |                                |
|------------|--|--------------|--|--------------------------------|
| 7          | Check here if the organization satisfied the Integral Part Test as a qualifying trust other Type III non-functionally integrated supporting organizations must complete                                  | on N<br>Sect | lovember 20, 1970 <b>See in</b><br>ions A through E. | structions.All                 |
| Sec        | tion A — Adjusted Net Income   |              | (A) Prior Year                                       | (B) Current Year<br>(optional) |
| . 1        | Net short-term capital gain  | 1            |  |                                |
| 2          | Recoveries of prior-year distributions   | 2            |  |                                |
| 3          | Other gross income (see instructions)  | 3            |  |                                |
| 4          | Add lines 1 through 3  | 4            |  |                                |
| - 5        | Depreciation and depletion   | 5            | -  |                                |
| 6          | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6            |  | •                              |
| 7          | Other expenses (see instructions)  | 7            | -  |                                |
| 8          | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)  | 8            |  |                                |
| Sec        | tion B — Minimum Asset Amount  |              | (A) Prior Year                                       | (B) Current Year<br>(optional) |
| 1          | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):  |              |  | e e                            |
| í          | Average monthly value of securities  | 1a           | <u></u>  |                                |
|            | Average monthly cash balances  | 1b           |  |                                |
| (          | Fair market value of other non-exempt-use assets   | 1c           |  |                                |
|            | d Total (add lines 1a, 1b, and 1c)   | 1d           |  |                                |
| •          | Discount claimed for blockage or other factors (explain in detail in Part VI):   |              |  |                                |
| 2          | Acquisition indebtedness applicable to non-exempt-use assets   | 2            |  |                                |
| 3          |  | 3            |  |                                |
| 4          | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)   | 4            |  |                                |
| 5          | Net value of non-exempt-use assets (subtract line 4 from line 3)   | - 5          |  |                                |
| 6          | Multiply line 5 by .035  | 6            |  |                                |
| <u>, 7</u> | Recoveries of prior-year distributions   | 7            |  |                                |
| 8_         | Minimum Asset Amount (add line 7 to line 6)  | 8            |  |                                |
| Sec        | tion C — Distributable Amount  | <b></b>      |  | Current Year                   |
| 1          | Adjusted net income for prior year (from Section A, line 8, Column A)  | 1            |  |                                |
| 2          | Enter 85% of line 1  | 2            |  |                                |
| 3          | Minimum asset amount for prior year (from Section B, line 8, Column A)   | 3            |  |                                |
| 4          | Enter greater of line 2 or line 3  | 4            |  |                                |
| 5          |  | 5            |  |                                |
| 6          | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)  | 6            |  |                                |
| 7          | Check here if the current year is the organization's first as a non-functionally-integrated (see instructions).  | grate        |  |                                |
| BAA        |  |              | Schedule A (Fo                                       | orm 990 or 990-EZ) 201         |

| Par  | Type III Non-Functionally Integrated 509(a)(3) Support  | orting Organizations           | (continued)                            |  |
|------|---|--------------------------------|--|--|
| Sect | ion D — Distributions   |                                |  | Current Year   |
| 1    | Amounts paid to supported organizations to accomplish exempt pur  | poses                          |  | <u> </u>   |
|      | Amounts paid to perform activity that directly furthers exempt purpo in excess of income from activity  |                                |  |  |
| · 3  | Administrative expenses paid to accomplish exempt purposes of sur   | pported organizations          |  |  |
| 4    | Amounts paid to acquire exempt-use assets   |                                |  |  |
| 5    | Qualified set-aside amounts (prior IRS approval required)   |                                |  |  |
| 6    | Other distributions (describe in Part VI). See instructions   |                                |  |  |
| 7    | Total annual distributions. Add lines 1 through 6   |                                |  |  |
| 8    | Distributions to attentive supported organizations to which the organin Part VI). See instructions.   |                                |  |  |
| 9    | Distributable amount for 2014 from Section C, line 6  |                                |  |  |
| 10   | Line 8 amount divided by Line 9 amount  |                                |  | 41515  |
| Sect | ion E — Distribution Allocations (see instructions)   | (i)<br>Excess<br>Distributions | (ii)<br>Underdistributions<br>Pre-2014 | (iii)<br>Distributable<br>Amount for 2014  |
| 1    | Distributable amount for 2014 from Section C, line 6  |                                |  | ALTERNATURE THE PROPERTY OF TH |
| 2    | Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)  |                                |  | 4  |
|      | Excess distributions carryover, if any, to 2014:  | 334 9938 890 22                |  |  |
| а    |   |                                |  |  |
| b    |   |                                |  |  |
| C    |   |                                |  |  |
|      |   |                                |  |  |
|      | From 2013   |                                |  |  |
|      | Total of lines 3a through e   |                                |  |  |
|      | Applied to underdistributions of prior years  |                                |  |  |
| ł    | Applied to 2014 distributable amount  |                                |  |  |
|      | Carryover from 2009 not applied (see instructions)  |                                |  |  |
|      | Remainder. Subtract lines 3g, 3h, and 3i from 3f  |                                |  |  |
|      | Distributions for 2014 from Section D, line 7: \$   |                                |  |  |
|      | Applied to underdistributions of prior years  |                                |  |  |
|      | Applied to 2014 distributable amount  |                                |  |  |
| •    | Remainder. Subtract lines 4a and 4b from 4  |                                |  |  |
| 5    | Remaining underdistributions for years prior to 2014, if any.  Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) |                                |  |  |
| 6    | Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)                         |                                |  |  |
| 7    | Excess distributions carryover to 2015 Add lines 3j and 4c  |                                |  |  |
| 8    | Breakdown of line 7:  |                                |  |  |
| ē    |   |                                |  |  |
| ŀ    |   |                                |  |  |
|      |   |                                |  |  |
|      | Excess from 2013  |                                |  |  |
|      | Excess from 2014  |                                |  |  |

BAA

Schedule A (Form 990 or 990-EZ) 2014

**Partitle Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

#### Part II, Line 10 - Other Income

| Nature and Source |          | 2014   | 2013              | 2012       | 2011       | 2010       |
|-------------------|----------|--------|-------------------|------------|------------|------------|
| Special events    | \$       | 7,641. | \$ 9,2 <u>13.</u> | \$ 12,329. | \$ 18,761. | \$ 21,043. |
|                   | Total \$ | 7,641. | \$ 9,213.         | \$ 12,329. | \$ 18,761. | \$ 21,043. |

# 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.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

|          | The Conflict Center  | 84-1080552  |
|----------|--|---|
| Rai      | Organizations Maintaining Donor Advised Funds or Other Similar Fund<br>Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.   | s or Accounts.  |
|          | (a) Donor advised funds  | (b) Funds and other accounts  |
| 1        | Total number at end of year  |   |
| 2        | Aggregate value of contributions to (during year)  |   |
| 3        | Aggregate value of grants from (during year)   |   |
| 4        | Aggregate value at end of year   |   |
| 5        | Did the organization inform all donors and donor advisors in writing that the assets held in donor are the organization's property, subject to the organization's exclusive legal control?   | or advised funds  |
| <b>.</b> | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purposes impermissible private benefit?   | can be used only urpose conferring Yes No   |
| Pai      | Conservation Easements.  Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.   |   |
| 1        | Purpose(s) of conservation easements held by the organization (check all that apply).  |   |
| •        |  | a historically important land area  |
|          |  | a certified historic structure  |
|          | Preservation of open space   |   |
| 2        | Complete lines 2a through 2d if the organization held a qualified conservation contribution in the   | e form of a conservation easement on the  |
|          | last day of the tax year.  | Held at the End of the Tax Year   |
|          |  | 559.6504  |
| i        | 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)   |   |
| 1        | 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  | 1 11 1  |
| 3        | tax year   | ·   |
| 4        | Number of states where property subject to conservation easement is located  |   |
| 5        | Does the organization have a written policy regarding the periodic monitoring, inspection, hand  | ling of violations,   |
| •        | and enforcement of the conservation easements it holds?  | Yes     NO  |
| 6        | Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easem  | ents during the year  |
| _        | Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements  | during the year   |
| /        | Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements  •\$   | during the year   |
| 8        | Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii)?  | I tes I No  |
| 9        | In Part XIII, describe how the organization reports conservation easements in its revenue and e include, if applicable, the text of the footnote to the organization's financial statements that desconservation easements.  | expense statement, and balance sheet, and scribes the organization's accounting for |
| Ŗã       | Organizations Maintaining Collections of Art, Historical Treasures, or Othe Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.  | r Similar Assets.   |
| 1        | a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenu<br>art, historical treasures, or other similar assets held for public exhibition, education, or research<br>in Part XIII, the text of the footnote to its financial statements that describes these items. | e statement and balance sheet works of n in furtherance of public service, provide, |
|          | b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue st<br>historical treasures, or other similar assets held for public exhibition, education, or research in<br>following amounts relating to these items:   | furtherance of public service, provide the  |
|          | (i) Revenue included in Form 990, Part VIII, line 1  |   |
|          | (ii) Assets included in Form 990, Part X   |   |
|          | If the organization received or held works of art, historical treasures, or other similar assets for amounts required to be reported under SFAS 116 (ASC 958) relating to these items:   | financial gain, provide the following   |
|          | a Revenue included in Form 990, Part VIII, line 1  |   |
|          | h Assets included in Form 990. Part X  | • Þ   |

| Partilla Organizations Maintair  | ning Collectio     | ns of Art, Hist    | orical Tr     | easures, or Oth            | er Similar Assets (      | contin      | ued)      |                           |  |
|--|--------------------|--------------------|---------------|----------------------------|--------------------------|-------------|-----------|---------------------------|--|
| 3 Using the organization's acquisiti items (check all that apply):   | ion, accession, a  | nd other records   | s, check ar   | ny of the following        | that are a significant u | se of its   | collect   | îon                       |  |
| a 🔲 Public exhibition  |                    | d 🔙 L              | uaii ui exc   | liange programs            |                          |             |           |                           |  |
| b Scholarly research   |                    | e 🗌 C              | ther          |                            |                          |             |           | <del></del>               |  |
| · c Preservation for future gener  |                    |                    |               |                            |                          |             |           |                           |  |
| 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.   |                    |                    |               |                            |                          |             |           |                           |  |
| 5 During the year, did the organizato be sold to raise funds rather to be sold to raise funds rather to be sold to raise funds rather to be sold to be sol | han to be mainta   | ined as part of    | the organiz   | zation's collection?       |                          | Yes         | Parl      | No<br>H IV                |  |
| line 9, or reported an   | amount on Fo       | orm 990, Parl      | X, line       | 21.                        | Sweled les tolo          |             |           |                           |  |
| 1 a Is the organization an agent, trus   | stee, custodian,   | or other interme   | diary for co  | ontributions or oth        | er assets not included   | Yes         | Г         | No                        |  |
| on Form 990, Part X?<br>b If 'Yes,' explain the arrangement  |                    |                    |               |                            |                          | _ ՝ ՝ ՝ ՝ ՝ | L         | ٦.,٠                      |  |
| bili les, explain the arrangement  | ili Fait Aili ailu | complete the ro    | nowing tac    | Jie,                       |                          | Amoun       |           |                           |  |
| c Beginning balance  |                    |                    |               |                            | <u></u>                  |             | <u> </u>  |                           |  |
| d Additions during the year  |                    |                    |               |                            |                          |             |           |                           |  |
| e Distributions during the year  |                    |                    |               |                            | ····                     |             |           |                           |  |
| f Ending balance   |                    |                    |               |                            |                          |             |           |                           |  |
| 2 a Did the organization include an a  |                    |                    |               |                            |                          | Yes         |           | No                        |  |
| b If 'Yes,' explain the arrangement  |                    |                    |               |                            |                          |             |           | 1                         |  |
| 2 ( to ) oxplain all diraingement  |                    | 2011110101111110   | 4-1-11-11     | p                          |                          |             | L         |                           |  |
| Part V& Endowment Funds. Co  | mplete if the      | organization       | answere       | d 'Yes' to Form            | 990, Part IV, line       | 10.         |           |                           |  |
|  | (a) Current yea    |                    |               | (c) Two years back         |                          |             | our years | back                      |  |
| 1 a Beginning of year balance  | 246,9              | 89. 21             | 6,076.        | 191,128                    | 180,613                  |             | 182,      | 956.                      |  |
| <b>b</b> Contributions   | 251,4              |                    | 240.          | 290                        | 245                      |             | 1,        | 555.                      |  |
| c Net investment earnings, gains,  |                    |                    |               |                            |                          |             | _         |                           |  |
| and losses   | 14,2               | 44. 3              | 3,243.        | 26,99                      | 7. 11,463                | ,           |           | 489.                      |  |
| d Grants or scholarships   |                    |                    |               |                            |                          |             |           |                           |  |
| e Other expenditures for facilities  | 70.0               | 0.5                | 240           | 200                        | 245                      |             | 1         | ccc                       |  |
| and programs   | 78,8               |                    | 240.          | 290                        |                          | +           |           | 555.                      |  |
| f Administrative expenses  | 2,4                |                    | 2,330.        | 2,049                      |                          | -1          |           | 854.                      |  |
| g End of year balance  | 431,4              |                    | 6,989.        | 216,070                    |                          | · L         | 100,      | <u>613.</u>               |  |
| 2 Provide the estimated percentag  |                    |                    | e (iiile ig,  | column (a)) neiu           | as.                      |             |           |                           |  |
| a Board designated or quasi-endov  |                    | 59.00 %            |               |                            |                          |             |           |                           |  |
| b Permanent endowment ►  | 41.00%             | 0,                 |               |                            |                          |             |           |                           |  |
| c Temporarily restricted endowmer  |                    | 6                  |               |                            |                          |             |           |                           |  |
| The percentages in lines 2a, 2b,   | and 2c should e    | quai 100%.         |               |                            |                          |             |           |                           |  |
| 3a Are there endowment funds not   | in the possessio   | n of the organiza  | ation that a  | are held and admi          | nistered for the         | ſ           | Yes       | No                        |  |
| organization by:  (i) unrelated organizations  |                    |                    |               |                            |                          | . 3a(i)     | X         |                           |  |
| (ii) related organizations   |                    |                    |               |                            |                          | 3a(ii)      | Λ         | X                         |  |
| b If 'Yes' to 3a(ii), are the related  |                    |                    |               |                            |                          | 3b          |           |                           |  |
| 4 Describe in Part XIII the intended   |                    |                    |               |                            |                          |             |           | ·                         |  |
| Part VIS Land, Buildings, and  |                    | jarnzanori s cridi | JWIIIOFIC IGI | nos. Dee Far               | L ALLI                   |             |           | <del></del> •             |  |
| Complete if the organi   | ization answe      | red 'Yes' to F     | orm 990       | , Part IV, line            | l1a. See Form 990        | , Part      | X, line   | 10.                       |  |
| Description of property  |                    | Cost or other b    | asis (b       | ) Cost or other            | (c) Accumulated          |             | Book va   |                           |  |
| 1 a Land   |                    | (investment)       |               | basis (other)              | depreciation             |             | 0         | ,000.                     |  |
|  | <b>⊢</b>           | 9,00               |               | ļ                          | ,                        |             |           | ,000.<br>,510.            |  |
| b Buildings  | ļ <del></del>      | 1,281,85           |               |                            | 501,340.                 |             | /00       | 953.                      |  |
| c Leasehold improvements   | _                  | 19,85              |               | • · ·                      | 18,900.                  |             | 10        |                           |  |
| d Equipment  |                    | 82,6               |               |                            | 63,691.                  |             | TR.       | <u>, 982.</u>             |  |
| e Other  |                    | 8,40               |               | n /R\ line 10+\            | 7,443.                   |             | 010       | 958.                      |  |
| Total. Add lines 1a through 1e. (Columbia)   | ıı (u) must equa   | rronn 990, ran     | A, COIUITII   | τ ( <i>υ), πιτ</i> ο 100.) | Sched                    | lule D (f   |           | , <b>403.</b><br>90) 2014 |  |

| Part VIII Investments — Other Securities. Complete if the organization answered   |                               | N/A Part IV line 11b, See Form 990.  | Part X, line 12.                      |
|---|-------------------------------|--|---------------------------------------|
| (a) Description of security or category (including name of security)              | (b) Book value                | (c) Method of valuation: Cost or end-of-   | year market value                     |
| (1) Financial derivatives   | (2) 25011 14140               |  |                                       |
| (2) Closely-held equity interests   |                               |  |                                       |
| (2) Other   |                               |  |                                       |
| (A)   |                               |  |                                       |
| (B)   | ··                            |  |                                       |
| (C)   |                               |  |                                       |
| <u>`</u><br>(D)   |                               |  |                                       |
| <u>· · · · · · · · · · · · · · · · · · · </u>                                     |                               |  |                                       |
| (F)   |                               | ` ` `  |                                       |
| (G)   |                               |  |                                       |
| (H)   |                               |  |                                       |
| (l)   |                               | The second secon |                                       |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)              |                               |  |                                       |
| Part VIII Investments — Program Related.<br>Complete if the organization answered | 'Vas' to Earm 990             | N/A 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-o   | of-year market value                  |
|   | (b) Book value                | (c) mountained of resident of the second of  |                                       |
| (1)   |                               | <u> </u>   |                                       |
| (2)   | <u> </u>                      |  |                                       |
| (4)   |                               |  |                                       |
| (5)   |                               |  |                                       |
| (6)   |                               |  | <u> </u>                              |
| (7)   |                               |  |                                       |
| (8)   |                               |  |                                       |
| (9)   |                               |  |                                       |
| (10)  |                               |  |                                       |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)              |                               |  |                                       |
| Complete if the organization answered '   | /osi to Earm 000 Pr           | art IV line 11d See Form 990 Par   | t X line 15                           |
| Complete if the organization answered   | escription                    | art IV, line Tru. See I offit 550, I ar  | (b) Book value                        |
| (1) Endowment Fund  | 336(1)010(1)                  |  | 177,418.                              |
| (2) Endowment Fund- Board designated  |                               | ,  | 254,034.                              |
| (3)   |                               |  |                                       |
| (4)   |                               |  |                                       |
| (5) .   |                               |  | <u></u>                               |
| (6)   |                               |  |                                       |
| (7) .   | ··                            |  |                                       |
| (8)   |                               |  |                                       |
| (10)  |                               |  |                                       |
| Total. (Column (b) must equal Form 990, Part X, column (                          | B). line 15.)                 | ,  | 431,452.                              |
| Dart Vie Other Liabilities  |                               |  | · · · · · · · · · · · · · · · · · · · |
| Complete if the organization answered 'Yes' to Form                               | 990, Part IV, line 11e or     | 11f. See Form 990, Part X, line 25   |                                       |
| (a) Description of liability  | (b) Book value                |  |                                       |
| (1) Federal income taxes  |                               | 3 7 4  |                                       |
| (2) Payroll w/h taxes and other withh   | 01 2,0                        |  |                                       |
| (3) Security deposits   | 1,5                           |  |                                       |
| (4) Unearned revenue  | 1,0                           |  |                                       |
| (5)   |                               |  |                                       |
| (7)   |                               |  |                                       |
| (8)   |                               |  |                                       |
| (9)   |                               |  |                                       |
| (10)  |                               |  | <b>基本的基础的</b>                         |
| (11)  |                               |  |                                       |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)              | ► 7,8                         | 16.  |                                       |
| 2 Linkility for uncertain toy positions in Part XIII provide the text of the f    | ontonte to the organization's | tinancial statements that reports the organization's l   | liability for uncertain               |
| tax positions under FIN 48 (ASC 740). Check here if the text of the footnote      | e has been provided in Part X | Ш  |                                       |

| Rant XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu   | rn.    |          |
|--|--------|----------|
| Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.                |        |          |
| 1 Total revenue, gains, and other support per audited financial statements                 | 1      | 633,772. |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:                      |        |          |
| a Net unrealized gains (losses) on investments   |        |          |
| b Donated services and use of facilities   |        |          |
| c Recoveries of prior year grants  |        |          |
| d Other (Describe in Part XIII.)   |        |          |
| e Add lines 2a through 2d  |        |          |
| 3 Subtract line 2e from line 1   | 3      | 633,772. |
| 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                         |        |          |
| b Other (Describe in Part XIII.)   |        |          |
| c Add lines 4a and 4b  |        |          |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)          | 5      | 633,772. |
| PartixIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re | eturn. |          |
| Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.                |        |          |
| 1 Total expenses and losses per audited financial statements                               | 1      | 683,264. |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:                        |        |          |
| a Donated services and use of facilities   |        |          |
| b Prior year adjustments   |        |          |
| c Other losses   |        |          |
| d Other (Describe in Part XIII.)   |        |          |
| e Add lines 2a through 2d  | 2e     |          |
| 3 Subtract line 2e from line 1   |        | 683,264. |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:                       |        |          |
| a Investment expenses not included on Form 990, Part VIII, line 7b                         |        |          |
| b Other (Describe in Part XIII.)   |        |          |
| c Add lines 4a and 4b.   | 4c     | 602 264  |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)         | 5      | 683,264. |
| PartXIII Supplemental Information.   |        |          |

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

## Part V, Line 4 - Intended Uses Of Endowment Fund

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The Conflict Center's endowment includes both donor-restricted endowment funds and funds designated by the Board of Trustess to function as endowments. The Center is entitled to the unrestricted use of an annual withdrawal amounts equal up to 5 percent of the prior three year rolling average of the December 31st endowment fund balance and does not have access to the funds principal balance.

#### SCHEDULE M (Form 990)

**Noncash Contributions** 

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

OMB No. 1545-0047 2014

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is alwww.irs.gov/form990. Employer identification number

84-1080552 The Conflict Center **Parti**屬 Types of Property (d) Method of determining (c) (b) (a) Noncash contribution Number of Chèck if amounts reported noncash contribution amounts contributions or applicable on Form 990, items contributed Part VIII, line 1g Art - Works of art..... 2 Art - Historical treasures..... 3 Art - Fractional interests..... Books and publications..... 5 Cars and other vehicles ..... Boats and planes..... 7 Intellectual property..... 8 28,698, NYSE Quote . 9 Securities - Closely held stock ..... Securities - Partnership, LLC, or trust interests . Qualified conservation contribution-Qualified conservation contribution - Other..... Real estate - Residential..... 15 Real estate - Commercial..... Real estate - Other.... 17 18 Food inventory..... 19 Taxidermy..... 21 Historical artifacts..... 22 Scientific specimens..... 23 Archeological artifacts..... 24 25 26 Other ► 27 Other ► 28 Other > Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement..... Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?..... 30 a Х b If 'Yes,' describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?.... 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell 32 a noncash contributions?.... b If 'Yes,' describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) (2014)

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Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

#### 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.

2014

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/iorm990.

Employer identification number

The Conflict Center

84-1080552

#### Form 990, Part VI, Line 11b - Form 990 Review Process

The Board of Directors has given the Finance Committee (chaired by the corporation's Treasurer) the authority to review and approve Form 990 before it is signed and submitted to the IRS.

# Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Each year board members sign a conflict of interest policy in which they disclose potential conflicts that might arise. The Executive Director and Board President review these to insure that any such director abstains from voting on such matters and that all other directors are aware of the conflict.

# Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

15a. The board of directors reviews a salary survey conducted by the Colorado Nonprofit Association to determine that compensation for the Executive Director is comparable to other similarly situated nonprofit organizations (looking at items such as budget size, geographic location, etc).

15b. The executive director uses the same salary survey to determine pay ranges for employees within the organization.

# Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The organization posts IRS Form 990 and the Annual Report on its website. Both of these reports contain financial statements. Governing documents and conflict of interest policy are available upon written request.