Form 990

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

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

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

OMB No. 1545-0047
2014
Open to Public Inspection

For the 2014 calendar year, or tax year beginning , and ending C Name of organization D Employer identification number Check if applicable: COMMITTEE OF SEVENTY X Address change 23-0487205 Doing business as Name change Number and street (or P.O. box if mail is not delivered to street address) 215-557-3600 123 SOUTH BROAD STREET Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/ ferminated Philadelphia 19109 939,649 G Gross receipts \$ X Amended return Name and address of principal officer: X No H(a) Is this a group return for subordinates? Application pending DAVID THORNBURGH Yes H(b) Are all subordinates included? 123 SOUTH BROAD STREET **PHILADELPHIA** PA 19109 If "No," attach a list. (see instructions) X 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or Website: WWW.SEVENTY.ORG H(c) Group exemption number L Year of formation: 2002 Form of organization: X Corporation Trust Part I Summary 1 Briefly describe the organization's mission or most significant activities: Activities & Governance 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 51 4 Number of independent voting members of the governing body (Part VI, line 1b) 50 4 5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 7 5 6 Total number of volunteers (estimate if necessary) 250 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 7a b Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Current Year** 771,457 8 Contributions and grants (Part VIII, line 1h) 939,568 Revenue 9 Program service revenue (Part VIII, line 2g) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 170 81 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 771,627 939,649 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 799,332 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 827,387 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 126,540 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 276,672 351,413 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 1,150,745 1,104,059 -379,118 -164,410 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 459,782 177,571 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 166,964 49,187 292,818 22 Net assets or fund balances. Subtract line 21 from line 20 128,384 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign DAVID THORNBURGH President/CEO Here Type or print name and title Print/Type preparer's name Preparer's signature PTIN Check Paid LaVon Chancy 05/20/16 self-employed P00765200 Preparer Milligan & Company, Firm's EIN ▶ 23-3010968 Firm's name **Use Only** 105 N 22nd St Fl 2 Philadelphia, PA 19103-1302 215-496-9100 Phone no.

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

orm 990 (20	O14) COMMITTEE OF SEVENTY 23-0487205	Page
Part III	Statement of Program Service Accomplishments	Tep.
	Check if Schedule O contains a response or note to any line in this Part III	<u>X</u>
	describe the organization's mission:  Schedule O	
• • • • • • • • • • • • • • • • • • • •		
	organization undertake any significant program services during the year which were not listed on the orm 990 or 990-EZ?	
•	describe these new services on Schedule O.	
	organization cease conducting, or make significant changes in how it conducts, any program	
services	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes X No
	" describe these changes on Schedule O.	t
	be the organization's program service accomplishments for each of its three largest program services, as measured	
-	es. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe al expenses, and revenue, if any, for each program service reported.	ers,
the tota	al expenses, and revenue, if any, for each program service reported.	
4a (Code:		\$
Commi	ttee of Seventy, as a nonpartisan organization, works for	r better
gover	nment by educating citizens on how government works or h	ow it could;
advoc	ating for efficiency, transparency and ethical behavior	trom public
offic	ials and all branches of government; working tirelessly	to ensure fair
and w	vell-run elections in Philadelphia by monitoring the loca	
and w		
and w	vell-run elections in Philadelphia by monitoring the loca	l elections
and w	rell-run elections in Philadelphia by monitoring the loca ess all in accordance with Seventy's tax exempt status.	l elections
and w	rell-run elections in Philadelphia by monitoring the loca ess all in accordance with Seventy's tax exempt status.	l elections
and w	rell-run elections in Philadelphia by monitoring the loca ess all in accordance with Seventy's tax exempt status.	l elections
and w	rell-run elections in Philadelphia by monitoring the loca ess all in accordance with Seventy's tax exempt status.	l elections
and w	rell-run elections in Philadelphia by monitoring the loca ess all in accordance with Seventy's tax exempt status.	l elections
and w	rell-run elections in Philadelphia by monitoring the loca ess all in accordance with Seventy's tax exempt status.	l elections
and w	rell-run elections in Philadelphia by monitoring the loca ess all in accordance with Seventy's tax exempt status.	l elections
and w proce	rell-run elections in Philadelphia by monitoring the localess all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue	l elections
and w proce	rell-run elections in Philadelphia by monitoring the loca ess all in accordance with Seventy's tax exempt status.	l elections
and w proce	rell-run elections in Philadelphia by monitoring the localess all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue	l elections
and w proce	rell-run elections in Philadelphia by monitoring the localess all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue	l elections
and w proce	rell-run elections in Philadelphia by monitoring the localess all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue	l elections
and w proce	rell-run elections in Philadelphia by monitoring the localess all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue	l elections
and w proce	rell-run elections in Philadelphia by monitoring the localess all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue	l elections
and w proce	rell-run elections in Philadelphia by monitoring the localess all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue	l elections
and w proce	rell-run elections in Philadelphia by monitoring the localess all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue	l elections
and w proce  4b (Code:	rell-run elections in Philadelphia by monitoring the localess all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue	l elections
and w proce  4b (Code:	rell-run elections in Philadelphia by monitoring the local ses all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue)	l elections
and w proce  4b (Code:	rell-run elections in Philadelphia by monitoring the local ses all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue)	l elections
and w proce  4b (Code:	rell-run elections in Philadelphia by monitoring the local ses all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue)	l elections
and w proce  4b (Code:	rell-run elections in Philadelphia by monitoring the local ses all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue)	l elections
and w proce	rell-run elections in Philadelphia by monitoring the local ses all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue)	l elections
and w proce	rell-run elections in Philadelphia by monitoring the local ses all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue)	l elections
and w proce  4b (Code:	rell-run elections in Philadelphia by monitoring the local ses all in accordance with Seventy's tax exempt status.  (Expenses \$ including grants of \$ ) (Revenue)	l elections

4d Other program services (Describe in Schedule O.) (Expenses \$

4e Total program service expenses ▶

including grants of \$ 853,802

) (Revenue \$

Form **990** (2014)

# Part IV Checklist of Required Schedules

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

# Part IV Checklist of Required Schedules (continued)

******	irt IV Checklist of Required Schedules (continued)		T	
0.4	Did the constant to a second constant to the c		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			₹.
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			٦,
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	ļ
24a	· · · · · · · · · · · · · · · · · · ·			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
~	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	235	·	41
20				
	current or former officers, directors, trustees, key employees, highest compensated employees, or			7.7
	disqualified persons? If "Yes," complete Schedule L, Part II	<u>26</u>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	**********	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
٠.	·	31		X
32	Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	······		
JŁ		32		x
22	complete Schedule N, Part II			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	·	1	- 1	
	Part VI	37	-	X
38	Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		<u> </u>

Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part	: V				, 🔲
			1 -		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	. <u>1a</u>	9			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?		:	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		_			
_	Statements, filed for the calendar year ending with or within the year covered by this return	2a	7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re	• • •		2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ons)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedu			3b	-	+
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		-			
	over, a financial account in a foreign country (such as a bank account, securities account, or other	rinanciai		4.5		x
_	account)?  If "Yes," enter the name of the foreign country: ▶			4a		
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia					
	(FBAR).	ai Accoun	11.5			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	•		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans			5b	+	$\frac{1}{X}$
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	action:		5c	+	+**
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the			<del>                                     </del>	+
u	organization solicit any contributions that were not tax deductible as charitable contributions?	aic		6a	x	
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions or			† <del></del>	1
-	gifts were not tay deductible?			6Ь	x	
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	or goods				
	and convices provided to the power?			7a	X	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	x	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was				
	required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contract	?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cor	ntract?		7f	<u> </u>	X
g	If the organization received a contribution of qualified intellectual property, did the organization file	Form 889	99 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			? 7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintai	ned by th	ne			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а				<u>9a</u>	<u> </u>	<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	[10b]				
11	Section 501(c)(12) organizations. Enter:	المدا				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources	445				
120	against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo					
l2a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1 1	·	12a		<u> </u>
ь 13		. [120]				
a	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?			13a		
a	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which					
~	the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	42-				
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedu	ule O		14h		1

Part VI

Form 990 (2014) COMMITTEE OF SEVENTY

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

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	51	_		
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	50	_		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed'	• • • • • • • • • • • • • • • • • • • •		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		<u> </u>
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		_X_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	er by th	e following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter	nal R	evenue Co	de.)	1	
					Yes	No_
10a	Did the organization have local chapters, branches, or affiliates?			10a		<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the fo	rm?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to co	nflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				<b></b>	
4.0	describe in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approval by					
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				37	*****
a h	The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization			15a	X	
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	• • • • • • •	• • • • • • • • • • • • • • • • • • • •	15b	Λ	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
ıva	with a tayable entitle during the year?			40-		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	• • • • • •		16a		<u>~</u>
D	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b	******	******
Sec	tion C. Disclosure	•••••		IODI		
17	List the states with which a copy of this Form 900 is required to be filed PA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 50					
	available for public inspection. Indicate how you made these available. Check all that apply.	(-)(-)				
	X Own website Another's website X Upon request Other (explain in Schedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of intere	st polic	v. and			
	financial statements available to the public during the tax year.		· , ,			
20	State the name, address, and telephone number of the person who possesses the organization's books and recon	ds: ▶				
	emmittee of Seventy 123 SOUTH BROAD STREET					
	iladelphia PA 1910	9	215	-55	7-36	600

PA 19109

215-557-3600

#### Form 990 (2014) COMMITTEE OF SEVENTY

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the org	anization nor an	y rela	ated	orga	niza	tion o	com	pensated any current office	er, director, or trustee.	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	bo	x, unli ficer a	Pos check ess pe	rson i	th so Highest compensated	an	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) See Attachment	for Comp	le¹	te	Lі	st	in	a.			
BOD	1.00	x						0	0	0
(2) David Thornburgh										
Pres/CEO	65.00 0.00	x		x				17,917	_	2 710
(3) Zachary Stalberg		┢		^	-			11,911	0	2,719
Pres/CEO	65.00 0.00	X		x				153,841	0	969
(4) Loretta Depka										
VP for Dev. & Oper.	60.00 0.00			x				114,978	o	11,999
(5) Ellen Mattleman	Kaplan									
VP/Pol Dir/Int. Pres	60.00 0.00			x				186,420	0	26,815
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	I Employees (continued)	
	(A) Name and title	(B) Average hours per week (list any hours for	bo	x, unl	Pos check ess pe nd a c	erson	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W21000 IIIIOO)	organization and related organizations
(12)											, , , , , , , , , , , , , , , , , , ,
(13)											
(14)											
(15)											
(16)											
(17)											
(18)											
(19) 											
1b c	Sub-total	ets to Part VII, S	Secti					<b>&gt;</b>	473,156		42,502
d 2	Total (add lines 1b and 1c) .  Total number of individuals (in reportable compensation from	cluding but not li	imite	d to	thos	e lis	ted a	bov	473,156 e) who received more than	\$100,000 of	42,502
3 4 5	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization and related organization line 1 Did any person listed on line 1 for services rendered to the organization.	ormer officer, direction complete Schee 1a, is the sum sizations greater	ector dule of re than 	r, or J for porta \$15	suclable 60,00 ensi	om com 0? I	lividu pens f "Ye i fron	al _ atio s," c 	n and other compensation complete Schedule J for suc y unrelated organization or	from the ch	3 X 4 X 5 X
Secti 1	ion B. Independent Contracto Complete this table for your five compensation from the organization	e highest compe	ensa	ted i	nder	end for th	ent c	ontr	ractors that received more t dar year ending with or with	han \$100,000 of in the organization's tax ye	ar.
	Name and	(A) business address							Descript	(B) ion of services	(C) Compensation
	111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 11										
2	Total number of independent or received more than \$100,000	contractors (inclu of compensation	ding fron	but n the	not l	imite aniza	ed to ation	thos	se listed above) who	0	

8#88 <del>9</del>		Check	if Schedule (		tains a	response	or note to any line	in this Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
동원	1a	Federated can	npaigns	1a						
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership d		1b						
A,	С	Fundraising ev		1c						
ä	d	Related organ		1d						
n, Ei	е	Government grants	• • • • • •	1e						
Si2	f	All other contribution								
돌림		and similar amounts	not included above	1f		939,568				
ĔÖ	g	Noncach contribution	ı -as included in lines 1a							
S E	. b		es 1a–1f	11. 4	• • • • • • • • • • • • • • • • • • • •		939,568			
		rotal. / tod line	20 Tu 11,			Busn, Code				
e	22					busii, Code				
Š	2a		• • • • • • • • • • • • • • • • • • • •							
8	b		• • • • • • • • • • • • • • • • • • • •							
ا کِرَ	C	•	• • • • • • • • • • • • • • • • • • • •							
ဖွံ့	d	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •							
Tal	e		· · · · · · · · · · · · · · · · · · ·							
Program Service Revenue			am service reve			`				
-			es 2a-2f							I
	3		come (including o				01	01		
	_		lar amounts)				81	81		
	4		nvestment of tax		•					
	5	Royalties		· · · · · · · · · · · · · · · · · · ·						
			(i) Real		(ii) F	Personal				
	6a	Gross rents								
	b	Less: rental exps.								
ĺ	С	Rental inc. or (loss)								
	d		me or (loss)			<u></u>				
	<i>1</i> a	Gross amount from sales of assets	(i) Securities		(ii)	Other				
		other than inventory								
	b	Less: cost or other								
		basis & sales exps.								
	C	Gain or (loss)								
	d	Net gain or (lo	ss)	<u>.</u>		<b>&gt;</b>				
0	8a	Gross income fro	om fundraising ever	nts						
<u>z</u>		(not including \$								
Other Revenu			eported on line 1c)							
띮		See Part IV, line	18	a						
<u>ا</u> څ	b		penses							
0			(loss) from fund		events .	<u></u>				
			om gaming activities							
			19							
	b		penses							
			(loss) from gam		ivities					
		Gross sales of		آ آ		·				
		returns and all	<del>-</del>	а						
- 1	b		oods sold		·					
			(loss) from sales		entory	<b>&gt;</b>				
ľ			ellaneous Revenue		<u> </u>	Busn, Code				
ŀ	11a									
	b									
	C									
	d		ue							
			es 11a–11d			<b></b>	,			
			See instruction			•••••	939,649	81	0	0

#### Form 990 (2014) COMMITTEE OF SEVENTY

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (A) Total expenses (D) Fundraising Do not include amounts reported on lines 6b, Management and 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members ..... Compensation of current officers, directors, trustees, and key employees ..... 511,971 398,506 54,343 59,122 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 227,832 145,691 32,527 49,614 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 42,962 Other employee benefits ..... 36,518 6,236 208 44,622 37,928 2,231 4,463 10 Payroll taxes Fees for services (non-employees): Management Legal 39,728 33,769 3,973 1,986 Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion \_\_\_\_\_ 453 385 45 12 14,385 17,464 1,747 1,332 13 Office expenses 22,067 Information technology ..... 21,032 690 345 14 15 Royalties 71,505 60,780 7,150 3,575 Occupancy ..... 16 1,794 1,525 179 90 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 1,629 1,385 163 81 20 Payments to affiliates 21 691 6,914 5,877 346 Depreciation, depletion, and amortization 22 6,395 5,436 639 320 23 Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 3,444 5,167 34,445 25,834 FOOD & CATERING RESEARCH & WRITING 32,255 29,030 3,225 17,221 1,722 DUES & SUBCRIPTIONS 14,638 861 8,916 10,489 1,049 524 TELEPHONE All other expenses ..... 14,313 12,167 1,431 715 1,104,059 853,802 123,717 126,540 Total functional expenses. Add lines 1 through 24e 25 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 following SOP 98-2 (ASC 958-720)

		(2014) COMMITTEE OF SEVENTY		23	3-0487205		Page <b>11</b>
Pai	it X			=			
		Check if Schedule O contains a response or note	e to any line	in this Part X	7	<del>;</del>	
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			379,825	1	98,471
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former of					
		trustees, key employees, and highest compensated en	nployees.				
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified pe					
		4958(f)(1)), persons described in section 4958(c)(3)(B)					
		sponsoring organizations of section 501(c)(9) voluntary					
<sub>Σ</sub>		organizations (see instructions). Complete Part II of Sc		6			
Assets	7	Notes and loans receivable, net	34,500	7	38,550		
₹	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges		• • • • • • • • • • • • • • • • • • • •	21,272	9	14,025
1	10a	Land, buildings, and equipment: cost or					,
		other basis. Complete Part VI of Schedule D	10a	100,366	i i		
	b	Less: accumulated depreciation	140-1	82,591		10c	17,775
1		Investments—publicly traded securities				11	
1	12	Investments—other securities. See Part IV, line 11				12	
1	13	Investments—program-related. See Part IV, line 11				13	
1	14	Intangible assets			14		
1	15	Other assets. See Part IV, line 11	8,750	15	8,750		
1	16	Total assets. Add lines 1 through 15 (must equal line		· · · · · · · · · · · · · · · · · · ·	459,782	16	177,571
1	17	Accounts payable and accrued expenses			79,211	17	5,098
	18	Grants payable		• • • • • • • • • • • • • • • • • • • •		18	<b>,</b>
1	19	Deferred revenue			44,500	19	13,000
2	20	Tax-exempt bond liabilities				20	
2	21	Escrow or custodial account liability. Complete Part IV	of Schedule	: D		21	
ω 2	22	Loans and other payables to current and former officer					
Liabilities		trustees, key employees, highest compensated employ	ees, and				
[교		disqualified persons. Complete Part II of Schedule L				22	
ן בֿ	23	Secured mortgages and notes payable to unrelated this	rd parties			23	
		Unsecured notes and loans payable to unrelated third				24	
l i		Other liabilities (including federal income tax, payables					
		parties, and other liabilities not included on lines 17-24					
		of Schedule D			43,253	25	31,089
2	26	Total liabilities. Add lines 17 through 25			166,964		49,187
		Organizations that follow SFAS 117 (ASC 958), che					
SS		complete lines 27 through 29, and lines 33 and 34.					
ŭ 2	27	Unrestricted net assets			76,967	27	78,384
Balances	28	Temporarily restricted net assets			215,851	28	50,000
[ 2	29	Permanently restricted net assets				29	
T.		Organizations that do not follow SFAS 117 (ASC 95	8), check h	ere ▶ and			
ō		complete lines 30 through 34.					
Si si	30	Capital stock or trust principal, or current funds				30	
ASS 3		Paid-in or capital surplus, or land, building, or equipme				31	
Net Assets or Fund		Retained earnings, endowment, accumulated income,				32	
					292,818		128,384
		Total liabilities and net assets/fund balances			459,782		177,571
							Form 990 (2014)

orm	n 990 (2014) COMMITTEE OF SEVENTY 23-048/205			Pa	ige 1	4
Pa	art XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI					L
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9	39,	64	9
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,1	04,	05	9
3	Revenue less expenses. Subtract line 2 from line 1		-1	64,	410	0
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	92,	818	3
5	Net unrealized gains (losses) on investments				-24	4
6	Donated services and use of facilities	6				
7	Investment expenses	7				Ī
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	1:	28,	384	4
Pa	art XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	,
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		_			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	X		•
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					8
	separate basis, consolidated basis, or both:					ě
	X Separate basis Consolidated basis Both consolidated and separate basis					ě
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					•
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain in					8
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					•
	the Single Audit Act and OMB Circular A-133?		3a		x	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b			

SCHEDULE A (Form 990 or 990-EZ) **Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

COMMITTER OF SEVENTY

Employer identification number

			COMMITTEE OF	SEVENTY			23-048	1205			
	ant	Reas	on for Public Charity	Status (All organizations	must c	omplete	this part.) See instruction	ns.			
The	orga	nization is not	t a private foundation becaus	se it is: (For lines 1 through 11, o	check onl	y one box	(.)				
1		A church, co	onvention of churches, or ass	sociation of churches described	in sectio	n 170(b)(	1)(A)(i).				
2		A school des	scribed in section 170(b)(1)(	(A)(ii). (Attach Schedule E.)							
3	П	A hospital or	r a cooperative hospital servi	ce organization described in se	ction 170	(b)(1)(A)	(iii).				
4	П	A medical re	esearch organization operate	d in conjunction with a hospital	described	in section	on 170(b)(1)(A)(iii). Enter the h	ospital's name,			
	_	city, and stat	te·								
5		An organizat		of a college or university owned			overnmental unit described in				
	ш	=	(b)(1)(A)(iv). (Complete Part	-	•	,					
6	П			jovernmental unit described in s	ection 1	70(b)(1)(A	N(v).				
7											
·	described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8				170(b)(1)(A)(vi). (Complete Part	F If A						
9	Н			1) more than 33 1/3% of its sup		contributi	one membership fees and ar	nee			
ŭ	لـــا			npt functions—subject to certain				J55			
				nd unrelated business taxable in		•	·				
				0, 1975. See section 509(a)(2)			·				
10				exclusively to test for public safe							
11	H	•	•	exclusively for the benefit of, to	•		· // /	ises of			
• • •	ш	=	=	ions described in section 509(a	•						
				cribes the type of supporting org				- Chook			
а				ed, supervised, or controlled by							
u	ш			to regularly appoint or elect a ma		_		α			
			. You must complete Part I		ajonty or	ine direct	ors or trustees or the supporting	9			
b	П			vised or controlled in connection	with ite s	unnorted	organization(e) by having				
	ш			organization vested in the same			- '''				
			(s). You must complete Par		o porsone	that con	aror or manage the supported				
С				orting organization operated in o	connectio	n with an	nd functionally integrated with				
Ū	Ш			tions). You must complete Par			• •				
d				supporting organization operate							
u	LJ			ganization generally must satisfy							
				t complete Part IV, Sections A							
е				ed a written determination from t							
C	LJ			nctionally integrated supporting			rype i, rype ii, rype iii				
f	Ent		r of supported organizations		organizat	1011.					
'			wing information about the su			• • • • • • • • • • • • • • • • • • • •					
		e of supported	T	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monatory	(vi) Amount of			
,		anization	(ii) EIN	(described on lines 1–9		ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see			
				above or IRC section		ment?	instructions)	instructions)			
				(see instructions))	Yes	No					
(A)											
(/-)											
(B)											
							1				
(C)											
				**************************************							
(D)											
<del></del>											
(E)											
Tota	al										

Schedule A (Form 990 or 990-EZ) 2014 COMMITTEE OF SEVENTY

Part II Support Schedule for Organizations Described in S 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.)

tion A. Public Support						
ndar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,418,436	911,516	1,535,487	771,457	939,568	5,576,464
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge						
Total. Add lines 1 through 3	1,418,436	911,516	1,535,487	771,457	939,568	5,576,464
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						
						2,064,042
						3,512,422
	1					
• • • • •					(e) 2014	(f) Total
***************************************	1,418,436	911,516	1,535,487	771,457	939,568	5,576,464
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	495		88	170	81	834
Net income from unrelated business activities, whether or not the business is regularly carried on						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	806					806
						5,578,104
· · · · · · · · · · · · · · · · · · ·	(see instructions)				12	81
First five years. If the Form 990 is for the	organization's first	, second, third, for	urth, or fifth tax yea	r as a section 501	(c)(3)	
organization, check this box and stop her	e					▶ □
tion C. Computation of Public Su						
Public support percentage for 2014 (line 6	, column (f) divided	l by line 11, colum	n (f))		14	62.97%
		- 44			4 -	55.52%
33 1/3% support test-2014. If the organ	ization did not che					
box and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			<b>▶</b> X
			or 16a, and line 1	5 is 33 1/3% or mo	ore,	
check this box and stop here. The organia	zation qualifies as a	a publicly supporte	d organization			▶ 🗌
10% or more, and if the organization meet	ts the "facts-and-cir	cumstances" test,	check this box and	d <b>stop here.</b> Expla	in in	
<u> </u>		_	•			▶ 🗍
10%-facts-and-circumstances test—201	I3. If the organizati	on did not check a	box on line 13, 16	a, 16b, or 17a, and	d line	
15 is 10% or more, and if the organization	meets the "facts-a	nd-circumstances	test, check this be	ox and <b>stop here.</b>		
Explain in Part VI how the organization me	eets the "facts-and-	circumstances" te	st. The organizatio	n qualifies as a pu	blicly	
supported organization						▶ □
Private foundation. If the organization did	d not check a box o	on line 13, 16a, 16l	o, 17a, or 17b, che	ck this box and se	е	· - <del>-</del>
instructions						▶ □
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 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)  Public support. Subtract line 5 from line 4.  tion B. Total Support  Idar year (or fiscal year beginning in) ▶  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc. First five years. If the Form 990 is for the organization, check this box and stop here tion C. Computation of Public Stopularical Support test—2014. If the organization, check this box and stop here. The organization qual 33 1/3% support test—2014. If the organization diversacts—and-circumstances test—2010% or more, and if the organization meets this box or more, and if the organization meets the "facts—and-circumstances test—2015 is 10% or more, and if the organization meets the "facts—and-circumstances test—2015 is 10% or more, and if the organization meets the "facts—and-circumstances test—2015 is 10% or more, and if the organization meets the "facts—and-circumstances test—2015 is 10% or more, and if the organization meets the "facts—and-circumstances test—2015 is 10% or more, and if the organization meets the "facts—and-circumstances test—2015 is 10% or more, and if the organization meets the "facts—and-circumstances test—2015 is 10% or more, and if the o	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 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) Public support. Subtract line 5 from line 4.  tion B. Total Support  dar year (or fiscal year beginning in)  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  Gross receipts from related activities, etc. (see instructions)  First five years. If the Form 990 is for the organization's first organization, check this box and stop here  tion C. Computation of Public Support Percent  Public support percentage for 2014 (line 6, column (f) divided Public support percentage form 2013 Schedule A, Part III, lime 33 1/3% support test—2014. If the organization did not check this box and stop here. The organization qualifies as a publicly s 33 1/3% support test—2014. If the organization did not check this box and stop here. The organization meets the "facts-and-circumstances test—2014. If the organization  10%-facts-and-circumstances test—2013. If the organization	dar year (or fiscal year beginning in) ► (a) 2010 (b) 2011  Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines 1 through 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)  Public support. Subtract line 5 from line 4.  tion B. Total Support  dar year (or fiscal year beginning in) ►  Amounts from line 4  Cross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets  (Explain in Part VI.)  Gross receipts from related activities, etc. (see instructions)  First five years. If the Form 990 is for the organization's first, second, third, for organization, check this box and stop here  tion C. Computation of Public Support Percentage  Public support percentage from 2013 Schedule A, Part II, line 14  33 1/3% support test—2014. If the organization did not check the box on line 15 check this box and stop here. The organization qualifies as a publicly supported organization or more, and if the organization meets the "facts-and-circumstances" test. The organization  10% or more, and if the organization meets the "facts-and-circumstances" test. The organization in Part VI how the organization meets the "facts-and-circumstances" test. plan in Part VI how the organization meets the "facts-and-circumstances" test. plan in Part VI how the organization meets the "facts-and-circumstances" test. plan in Part VI how the organization meets the "facts-and-circumstances" test. plan in Part	dar year (or fiscal year beginning in)    (a) 2010 (b) 2011 (c) 2012  Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization's though 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)  Public support. Subtract line 5 from line 4.  ### Tion B. Total Support  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income. Do not include gain or loss from the sale of capital assets (Explain in Part VI).  Total support. Add lines 7 through 10  Gross receipts from related activities, etc. (see instructions)  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year organization, check this box and stop here.  ### Tion B. Total Support Percentage  Public support percentage from 2013 Schedule A, Part II, line 14  33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 3 tox and stop here. The organization qualifies as a publicly supported organization on 31 1/3% support test—2014. If the organization did not check a box on line 13, and line 14 is 30 km and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" te	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities with the organization without charge  Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit to the organization without charge  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 11, column (n)  Public support, Subfract line 5 from line 4.  **tion B. Total Support**  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support  dar year (or fiscal year beginning in) ▶  (a) 2010  (b) 2011  (c) 2012  (d) 2013  Total Support each segment in the support each segment i	Gifts, grants, contributions, and membership fees received. (On not include any "unusual grants.")  Tax revenues levide for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf  The value of services or facilities furnished by a governmental unit to the organization without charge  Total. Add lines if 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 (n)  Public support. Subtract line 5 from line 4.  1, 418, 436  1, 418, 436  911, 516  1, 535, 487  771, 457  939, 568  771, 457  939, 568  771, 457  939, 568  771, 457  939, 568  771, 457  939, 568  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 (n)  Public support. Subtract line 5 from line 4.  1, 418, 436  1, 418, 436  1, 418, 436  1, 418, 436  1, 535, 487  771, 457  939, 568  771, 45

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

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

Sec	tion A. Public Support	quality direct t	no tooto notou	bolott, ploaco c	omplete i art i	•••	
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				, ,		.,
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	-		•		1(c)(3) 	<b>&gt;</b> 🗌
Sec	tion C. Computation of Public Sເ						
15	Public support percentage for 2014 (line 8	, column (f) divide	d by line 13, colun	nn (f))		15	%
16	Public support percentage from 2013 Scho	edule A, Part III, li	ne 15				%
Sec	tion D. Computation of Investme					······································	
17	Investment income percentage for 2014 (I	ine 10c, column (f	) divided by line 13	3, column (f))		17	%
18	Investment income percentage from 2013	Schedule A, Part	III, line 17			18	%
19a	33 1/3% support tests—2014. If the orga						processor.
	17 is not more than 33 1/3%, check this be						▶ ∐
b	33 1/3% support tests—2013. If the orga						,
	line 18 is not more than 33 1/3%, check the						
20	Private foundation. If the organization did	d not check a box	on line 14, 19a, or	19b, check this bo	x and see instruct	ions	

#### Part IV Supporting Organizations

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

#### **Section A. All Supporting Organizations**

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

	Yes	No
*********	163	************
1	1	
********		
2		
****	***************************************	***************************************
×××××		
3a		1
Ja		
3b		
	**********	*************
3с		
	************	
4a		
******	***************************************	
**************************************		
4b		
		200000000000000000000000000000000000000
4c		
<u>4c</u>		
*****		***************************************
5a		
	************	::::::::::::::::::::::::::::::::::::::
5b		
5c		
6		
6		
6		
6		
6		
6		
6 7 8		
7 8		
6 7 8		
6 7 8		
6 7 8		
6 7 8 9a		
6 7 8 9a		
6 7 8 9a 9b		

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

Schedule A (Form 990 or 990-EZ) 2014 COMMITTEE OF SEVENTY		23-0487	205	Page 6		
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	ıniza	ntions		T		
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All						
other Type III non-functionally integrated supporting organizations must complete Section	other Type III non-functionally integrated supporting organizations must complete Sections A through E.					
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Y (optional)			
1 Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
Other gross income (see instructions)	3					
4 Add lines 1 through 3	4					
5 Depreciation and depletion	5					
Portion of operating expenses paid or incurred for production or						
collection of gross income or for management, conservation, or						
maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7					
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Y (optional)	ear		
Aggregate fair market value of all non-exempt-use assets (see						
instructions for short tax year or assets held for part of year):						
Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other						
factors (explain in detail in Part VI):						
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d	3					
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,						
see instructions).	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by .035	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount			Current Yea	ar		
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3	4					
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to						
emergency temporary reduction (see instructions)	6					
7 Check here if the current year is the organization's first as a non-functionally-integrated Ty	pe III	supporting organization (se	ee			
instructions).						

Schedule A (Form 990 or 990-EZ) 2014

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
	on D - Distributions	are (containada)	Current Year			
1	Amounts paid to supported organizations to accomplish exempt purpos	ses				
2	Amounts paid to perform activity that directly furthers exempt purposes					
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purposes of suppo					
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 organiza	tion is responsive				
	(provide details in Part VI). See instructions.					
9	Distributable amount for 2014 from Section C, line 6					
10	Line 8 amount divided by Line 9 amount					
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable		
	,		Pre-2014	Amount for 2014		
1	Distributable amount for 2014 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2014					
	(reasonable cause required-see instructions)					
3	Excess distributions carryover, if any, to 2014:					
а						
b						
С						
d						
е	From 2013					
f	Total of lines 3a through e					
g	Applied to underdistributions of prior years					
h	Applied to 2014 distributable amount					
i	Carryover from 2009 not applied (see instructions)					
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2014 from Section					
	D, line 7: \$					
а	Applied to underdistributions of prior years					
	Applied to 2014 distributable amount					
С	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:					
<u>a</u>						
b						
<u> </u>	- 1 0010					
	Excess from 2013					
е	Excess from 2014					

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 COMMITTEE OF SEVENTY

	Part III, lin	e 12. Als	o complete	this part fo	or any additi	onal informa	ation. (See i	nstructions.)	<u> </u>	
Part I	[, Line	10 -	Other	Income	Detail					
					\$		806			
					• • • • • • • • • • • • • • • • • • • •					
						• • • • • • • • • • • • • • • • • • • •				•••••
		• • • • • • • • • • • • • • • • • • • •								
									• • • • • • • • • • • • • • • • • • • •	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
						• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	••••••
							• • • • • • • • • • • • • • • • • • • •			

23-0487205

Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Name of the organization

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

**Employer identification number** 

COMMITTEE O	F SEVENTY	23-0487205
Organization type (check	cone):	
Filers of:	Section:	
Form 990 or 990-EZ	<b>X</b> 501(c)( <b>3</b> ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	n
	501(c)(3) taxable private foundation	
•	n is covered by the <b>General Rule</b> or a <b>Special Rule</b> . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a	a Special Rule. See
General Rule		
or more (in mone	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution or property) from any one contributor. Complete Parts I and II. See instructions	
contributor's total  Special Rules	contributions.	
Special Rules		
	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 %	
<del>-</del>	sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or and that received from any one contributor, during the year, total contributions of	• •
	of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Cor	
For an organization	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	eived from any one
	the year, total contributions of more than \$1,000 exclusively for religious, chari	
literary, or educati	ional purposes, or for the prevention of cruelty to children or animals. Complete	Parts I, II, and III.
	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	•
	g the year, contributions exclusively for religious, charitable, etc., purposes, but i	
	ed more than \$1,000. If this box is checked, enter here the total contributions th r an exclusively religious, charitable, etc., purpose. Do not complete any of the p	
	olies to this organization because it received nonexclusively religious, charitable	•
totaling \$5,000 or	more during the year	<b>▶</b> \$
Caution. An organization	that is not covered by the General Rule and/or the Special Rules does not file S	Schedule B (Form 990,
990-EZ, or 990-PF), but it	must answer "No" on Part IV, line 2, of its Form 990; or check the box on line h	H of its Form 990-EZ or on its
Form 990-PF, Part I, line 2	2, to certify that it does not meet the filing requirements of Schedule B (Form 99	∂0, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

COMMITTEE OF SEVENTY

Employer identification number 23-0487205

Part I	Contributors (see instructions). Use duplicate copies of P	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Independence Blue Cross 1901 Market Street Philadelphia PA 19103	\$ 30,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Morgan, Lewis & Bockius LLP 1701 Market Street Philadelphia PA 19103	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
3	Philadelphia Phillies One Citizens Bank Way Philadelphia PA 19148	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	PricewaterhouseCoopers 2001 Market Street Philadelphia PA 19103	\$ 30,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Stradley Ronon Stevens & Young 2600 One Commerce Square Philadelphia PA 19103	\$ 30,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	TD Bank 1701 Route 70 East Cherry Hill NJ 08034	\$ 30,000	Person X  Payroll  Noncash  (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

COMMITTEE OF SEVENTY

Employer identification number 23-0487205

Part I	Contributors (see instructions). Use duplicate copies of P	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 7	Wells Fargo Foundation 90 South 7th Street Minneapolis MN 55479	\$ 30,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 8	Name, address, and ZIP + 4  Comcast Corporation/Foundation One Comcast Center 49th Floor Philadelphia PA 19103	Total contributions  \$ 30,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	FMC Corporation 1735 Market Street Philadelphia PA 19103	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Philadelphia Foundation 1234 Market Street Suite 1800 Philadelphia PA 19107	\$ 50,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.11	Citizens Bank/Foundation One Comcast Center 22nd Floor Philadelphia PA 19103	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	Thomas Jefferson University 1020 Walnut Street Philadelphia PA 19107	\$ 35,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Page 3 of 3

Page 2

Name of organization

COMMITTEE OF SEVENTY

Employer identification number 23-0487205

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	University City Science Center 3711 Market Street Suite 800 Philadelphia PA 19104	\$ 30,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

#### **SCHEDULE C** (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

Complete if the organization is described below.

• Section 527 organizations: Complete Part I-A only.

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

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

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

Тах)	(see separate instructions), then				
	section 501(c)(4), (5), or (6) organizations: Complete Part III				
Name	e of organization				ification number
	COMMITTEE OF SEVENTS			23-04872	
Pai	t I-A Complete if the organization is exem	· · · · · · · · · · · · · · · · · · ·	<u> </u>	n 527 organizatio	on.
1	Provide a description of the organization's direct and indire	ct political campaign activities	in Part IV.		
2	Political expenditures			▶\$	
3	Volunteer hours				
~~~~					
Pai	t I-B Complete if the organization is exem				
1	Enter the amount of any excise tax incurred by the organization	ation under section 4955		▶\$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Fo	rm 4720 for this year?			Yes No
4a	Was a correction made?	***************************************			Yes No
b	If "Yes," describe in Part IV.				
Pai	t I-C Complete if the organization is exem	·	• • • • • • • • • • • • • • • • • • • •	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	on for section 527 exempt fund	tion		
	activities			▶\$	
2	Enter the amount of the filing organization's funds contribute	•			
	527 exempt function activities			▶\$	
3	Total exempt function expenditures. Add lines 1 and 2. Ent	er here and on Form 1120-PO	L,		
	line 17b			▶\$	· · · · · <u>· · · ·</u> · · · · · · · <u>· · · ·</u> · · · ·
4	Did the filing organization file Form 1120-POL for this year	?			Yes No
5	Enter the names, addresses and employer identification nu				
	organization made payments. For each organization listed,	enter the amount paid from th	e filing organizatio	n's funds. Also enter	
	the amount of political contributions received that were pro-	mptly and directly delivered to	a separate politica	l organization, such	
	as a separate segregated fund or a political action committed	ee (PAC). If additional space i	s needed, provide	information in Part IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization. If
					none, enter -0
1)					
2)					
(3)					
4)				/	
5)					
6)					

Schedule C (Form 990 of 990-EZ) 2014 COPILI	TITED OF SEABILI	23 0407203	raye 🚣				
Part II-A Complete if the organisection 501(h)).	zation is exempt under section 501(c)(3) a	nd filed Form 5768 (elec	ction under				
A Check ▶ ☐ if the filing organizati	Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's						
name, address, EIN	name, address, EIN, expenses, and share of excess lobbying expenditures).						
•	on checked box A and "limited control" provisi	•					
	bbying Expenditures	(a) Filing	(b) Affiliated				
(The term "expenditures"	organization's totals	group totals					
	ublic opinion (grass roots lobbying)	0					
	legislative body (direct lobbying)	0					
	and 1b)	0					
d Other exempt purpose expenditures		· ΔΙ					
e Total exempt purpose expenditures (add		l 01					
f Lobbying nontaxable amount. Enter the a							
columns.							
If the amount on line 1e, column (a) or (b) is	s: The lobbying nontaxable amount is:						
Not over \$500,000	20% of the amount on line 1e.						
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.						
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.						
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.						
Over \$17,000,000	\$1,000,000.						
g Grassroots nontaxable amount (enter 25%	% of line 1f)						
h Subtract line 1g from line 1a. If zero or les	ss, enter -0-						
i Subtract line 1f from line 1c. If zero or les	s, enter -0-						
j If there is an amount other than zero on e	ither line 1h or line 1i, did the organization file Form 4720						
reporting section 4911 tax for this year?			Yes No				
	4-Year Averaging Period Under section 501(	h)					

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total			
2a Lobbying nontaxable amount								
b Lobbying ceiling amount (150% of line 2a, column(e))								
c Total lobbying expenditures				0				
d Grassroots nontaxable amount								
e Grassroots ceiling amount (150% of line 2d, column (e))								
f Grassroots lobbying expenditures				0				

Schedule C (Form 990 or 990-EZ) 2014

Pa	ft 11=8	(election under section 501(h)).			m 57			
For	each "Yes	response to lines 1a through 1i below, provide in Part IV a detailed	(-	a)	<u> </u>	(t	) 	
		he lobbying activity.	Yes	No		Amo	ount	
1	During the	year, did the filing organization attempt to influence foreign, national, state or local						
	legislation,	including any attempt to influence public opinion on a legislative matter or						
	referendun	n, through the use of:						
а	Volunteers	?						
		or management (include compensation in expenses reported on lines 1c through 1i)?						
		ertisements?			·	*************	**********	
		members, legislators, or the public?						
u 0	Dublication	s, or published or broadcast statements?			1			
•	Cranto to a	ther graphizations for labbying purposes?						
	Direct cont	ther organizations for lobbying purposes?	-		1			
g	Direct cont	act with legislators, their staffs, government officials, or a legislative body?			_			
	Other activ	monstrations, seminars, conventions, speeches, lectures, or any similar means? ities?						
j	Total. Add	lines 1c through 1i						
2a	Did the act	ivities in line 1 cause the organization to be not described in section 501(c)(3)?						
		ter the amount of any tax incurred under section 4912				200000000000000000000000000000000000000	,000000000	
		ter the amount of any tax incurred by organization managers under section 4912						
		organization incurred a section 4912 tax, did it file Form 4720 for this year?	*********	*********				
		Complete if the organization is exempt under section 501(c)(4), section 501(	1/51	ore	octic		·····	**********
	1:1117 <b>6</b> 4		, <sub>)</sub> (3),	01 5	BCHO	11		
		501(c)(6).					Т.,	T
							Yes	No
1	Were subs	tantially all (90% or more) dues received nondeductible by members?			. <b></b> .	1	₩	<b></b>
2	Did the org	anization make only in-house lobbying expenditures of \$2,000 or less?				2	—	<del> </del>
3		anization agree to carry over lobbying and political expenditures from the prior year?					<u> </u>	
Pa	t III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c)						
		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes."	R (b	) Par	t III-/	۱, line	3, is	;
1	Dues, asse	ssments and similar amounts from members		1				
2		2(e) nondeductible lobbying and political expenditures (do not include amounts of						
		openses for which the section 527(f) tax was paid).						
а	Current year	·		2a				
				2b				
٥	Total	rom last year	• • • • •					
,			• • • •	2c 3	<del></del>			
3		amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		<u> </u>				
4		ere sent and the amount on line 2c exceeds the amount on line 3, what portion of the						
		s the organization agree to carryover to the reasonable estimate of nondeductible lobbying						
	-	l expenditure next year?		4				
ACCRECATION.		nount of lobbying and political expenditures (see instructions)		5	<u> </u>			
		Supplemental Information						
Provi	de the desc	riptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part	I-A, lin	ies 1 a	and			
2 (se	e instructior	s); and Part II-B, line 1. Also, complete this part for any additional information.						
S	chedul	e C, Part II-A, Explanation of Four Year Averaging						
		······································			• • • • • •			
C	MMITT!	EE OF SEVENTY SUBMITTED A VALID 501(H) ELECTION IN	AU	GUS	т 2	013	•	
IJ/	व्यक्त <u>म्</u>	, THE ORGANIZATION HAD NO LOBBYING EXPENDITURES DU	DTN	C T	เมษา			
	> 14 TH V C. C.	, IND CAGARIZATION HAD NO DODDIING EXPENDITURES DO	******	<del></del>	<u></u>			
. 20	)13 OR	2014 YEARS.						

Schedule C (Form	990 or 990-EZ) 2014	COMMITTEE	OF	SEVENTY	<b>23-0487205</b> Pag	ge <b>4</b>
Part IV	Supplemental	Information (cor	ntinue	ed)		
		-				
		***************************************			***************************************	
				• • • • • • • • • • • • • • • • • • • •		
				• • • • • • • • • • • • • • • • • • • •		
				· · · · · · · · · · · · · · · · · · ·		
		• • • • • • • • • • • • • • • • • • • •				
		• • • • • • • • • • • • • • • • • • • •				
					••••••	
					••••••	• • • •
		• • • • • • • • • • • • • • • • • • • •				
						• • • •
						•••
,						
						• • •

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	<u>-</u>		• •
C	OMMITTEE OF SEVENTY		23-0487205
	Organizations Maintaining Donor Advised Fur Complete if the organization answered "Yes" to F	nds or Other Similar Funds or A orm 990. Part IV. line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		· · · · · · · · · · · · · · · · · · ·
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	***************************************	
5	Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised	
•	funds are the organization's property, subject to the organization's exclusive the organization of the org		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in		
·	only for charitable purposes and not for the benefit of the donor or dono		
			Yes No
Pa	irt II Conservation Easements.	ili da kalantutu kulo ka kulo kulo da kalanda da kulo kulo kulo kulo kulo kulo kulo kulo	
******	Complete if the organization answered "Yes" to F		
1	Purpose(s) of conservation easements held by the organization (check		
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically impo	
	Protection of natural habitat	Preservation of a certified historic	structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conser	vation contribution in the form of a conse	***************************************
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b	• • • • • • • • • • • • • • • • • • • •		2b
	Number of conservation easements on a certified historic structure includes		
d	Number of conservation easements included in (c) acquired after 8/17/0		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, ext	tinguished, or terminated by the organizat	tion during the
	tax year ▶		
4	Number of states where property subject to conservation easement is le		
5	Does the organization have a written policy regarding the periodic moni		
	violations, and enforcement of the conservation easements it holds? $_{\hdots}$		
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	ing conservation easements during the ye	ear
	·		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of	onservation easements during the year	
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) above satisfy the		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easeme		
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that de	escribes the
************************	organization's accounting for conservation easements.  IT III Organizations Maintaining Collections of Art,	Uistoriaal Trassuras, an Other S	Similar Apoeto
	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to Fe		ommar Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), no	ot to report in its revenue statement and b	palance sheet
	works of art, historical treasures, or other similar assets held for public e		
	public service, provide, in Part XIII, the text of the footnote to its financia	al statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to		nce sheet
	works of art, historical treasures, or other similar assets held for public e	exhibition, education, or research in furthe	erance of
	public service, provide the following amounts relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b></b> ▶ \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or		
	following amounts required to be reported under SFAS 116 (ASC 958) r		
а	Revenue included in Form 990, Part VIII, line 1	_	<b>▶</b> \$
h	Assets included in Form 990 Part Y		▶ \$

000000000	edule D (Form 990) 2014 COMMITTIES				23-040			<del></del>		age z
	irt III Organizations Maintaining		·					contin	ued)	
3	Using the organization's acquisition, accessi collection items (check all that apply):	on, and other record	ls, check any of the f	ollowing that a	are a significant	use of its	•			
а	Public exhibition	d	Loan or exchange p	rograms						
b	Scholarly research	е	Other							
С	Preservation for future generations	·				• • • • • • • • •				
4	Provide a description of the organization's co	ollections and explain	n how they further the	e organization	's exempt purpo	se in Pai	rt			
	XIII.	'	,	3	1 - 1 - 4					
5	During the year, did the organization solicit o	r receive donations	of art_historical treas	ures or other	r similar					
_	assets to be sold to raise funds rather than to					*		T Y	96	No
Pa	art IV Escrow and Custodial Arr		Jan or the organization	511 0 00110011011	<u>'                                    </u>		*******	_ <u></u>		
******	Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contributions	or other asse	ets not					
٠			-						ae	No
h	If "Yes," explain the arrangement in Part XIII	and complete the fo						L	.5	
	ii res, explain the arrangement in rate xiii	and complete the to	nowing table.					Amoun		
_	Reginning halance					1c		7 (1110 (11	<u>`                                    </u>	
	Beginning balance				• • • • • • • • • • • • • • • • • • • •	1d				
	Additions during the year									
e	Distributions during the year						<del></del>			
f	Ending balance									
	Did the organization include an amount on F								es 📙	No
	If "Yes," explain the arrangement in Part XIII.	Check here if the e	xplanation has been	provided in Pa	art XIII					
Pe	irt V Endowment Funds.									
	Complete if the organization		" to Form 990, Pa	art IV, line 1						
	<u> </u>	(a) Current year	(b) Prior year	(c) Two ye	ears back (d)	Three year	s back	(e) Fou	r years l	back
		,								
b	Contributions									
	Net investment earnings, gains, and									
	losses									
đ	Grants or scholarships									
	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the curr		e (line 1g. column (a)	) held as:	•					
	Board designated or quasi-endowment	%	- ( 3, ()	,,						
	Permanent endowment ▶ %									
	Temporarily restricted endowment ▶	%								
Ŭ	The percentages in lines 2a, 2b, and 2c shou									
22	Are there endowment funds not in the posses	•	ation that are held an	d administere	d for the					
Ja	organization by:	ssion of the organiza	ation that are new an	u aummistere	d for the			ſ	Yes	No
	(I) consolists disconsissations							20(1)	165	NO
	(III)							3a(i)		***
L								3a(ii)	$\dashv$	
	If "Yes" to 3a(ii), are the related organizations					· · · · · · · · · ·	• • • • • • • •	3b		
	Describe in Part XIII the intended uses of the		wment funds.							
	rt VI Land, Buildings, and Equi		. t-			- 000	D - 1 X		_	
	Complete if the organization	1					<u> </u>			
	Description of property	(a) Cost or other b	I ' '	other basis	(c) Accumul			(d) Book	value	
		(investment)	(ot	her)	depreciati	on				
1a	Land						Щ			
b	Buildings						4			
C	Leasehold improvements									
d	Equipment									
е	Other			L00,366	8	2,593	L		L7,7	
Γotal	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Parl	X, column (B), line 1	l0c.)		Þ	-		L7,7	775

Part VII	Investments—Other Securities.		
	Complete if the organization answered "Yes" to		
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
(1) Financial c	derivatives		
	eld equity interests		
(3) Other		•	
		•	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		•	
		•	
(D)			
(F)		•	
(G)			
(H)			
	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII	Investments—Program Related.		
***************************************	Complete if the organization answered "Yes" to	Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
_(7)			
(8)			
(9)	4)		
	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.	Form 000 Bort IV line	11d Soc Form 000 Part V line 15
	Complete if the organization answered "Yes" to	FOITH 990, FAILTY, IIIIE	(b) Book value
	(a) Description		(b) book value
(2)	·		
(3)	•••		
(4)			
(5)			
(6)			
(7)			
(8)		•	
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 15.)		<b>&gt;</b>
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" to	Form 990, Part IV, line	11e or 11f. See Form 990, Part X,
	line 25.		
1.	(a) Description of liability	(b) Book value	
(1) Federal i	income taxes		
(2) DEFER	RED RENT	22,046	
(3) CAPIT	AL LEASE PAYABLE	9,043	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		02 000	
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶	31,089	

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

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

SCHE	dule D (Folili 990) 2014 COPMITTIES OF BEVERLE		25 0407205	raye <del>4</del>
Pa	ift XI Reconciliation of Revenue per Audited Financial St	atements With	Revenue per Return.	
*******	Complete if the organization answered "Yes" to Form 9	90, Part IV, line	12a.	
1	Total revenue, gains, and other support per audited financial statements		1	1,076,747
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a	-24	
b	Donated services and use of facilities		137,122	
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	137,098
3	Subtract line 2e from line 1		3	939,649
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			939,649
Pa	rt XII Reconciliation of Expenses per Audited Financial S	tatements With	Expenses per Return	
	Complete if the organization answered "Yes" to Form 9	90, Part IV, line	12a.	
1	Total expenses and losses per audited financial statements		1	1,241,181
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	, ,		
а	Donated services and use of facilities	2a	137,122	
b	Prior year adjustments			
C	Other losses	1 4 1		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	137,122
3	Subtract line 2e from line 1		3	1,104,059
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	(.)	5	1,104,059

Part XIII Supplemental Information.

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

#### Part X - FIN 48 Footnote

Seventy is exempt from federal income tax under IRC Section 501(a) as an organization described in Section 501(c)(3) of the Internal Revenue Code. Since its initial filing for tax-exempt status, Seventy has not received any notice from the Internal Revenue Service ("IRS") that such tax-exempt status has been challenged or changed. There was no taxable income during 2014 and 2013; therefore, no provision for income taxes has been included in the accompanying financial statements.

Seventy is required to report information regarding its exposure to various tax positions taken. Seventy has determined whether any tax positions met the recognition threshold and has measured its exposure to those tax positions. Management believes Seventy has adequately addressed all relevant tax positions and there are no unrecorded tax liabilities. No interest or penalties from federal and state tax authorities were recorded

Part XIII Supplemental Information (continued)
in the accompanying financial statements. Seventy is subject to routine
audits by taxing jurisdictions; however, there are currently no audits for
any tax periods in progress. Seventy believes it is no longer subject to
income tax examinations for years prior to 2011.
·
·

**SCHEDULE J** (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ▶Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

COMMITTEE OF SEVENTY

Employer identification number 23-0487205

<u></u>	art 💹 Questions Regarding Compensation		Yes	No
19	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form		ies	INO
10	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	İ		
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			Ī
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			
	1a?	2		
3	Indicate which, if any, of the following the filing organization uses to establish the compensation of the			
,	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b		4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
Ü	compensation contingent on the revenues of:			
_			*********	X
	The organization?	5a		X
D	Any related organization?	5b		<u> </u>
	If "Yes" to line 5a or 5b, describe in Part III.			
_				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		x
				<u>-</u> _
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		*********	
J	Regulations section 53.4958-6(c)?	9		
	1 togulations social solution o(o):			

Schedule J (Form 990) 2014

Page 2

COMMITTEE OF SEVENTY

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

23-0487205

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

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

	(B) Breakdown of	of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)+(D)	in column (B) reported as deferred in prior Form 990
Stalberg	(1) 137,928	0	15,913	0	696	154,810	
	0	0		0			0
Kaplan	(1) 171,420	15,000	О	0	26,815	213,235	0
2 VP/Pol Dir/Int. Pres	(II) O	0	0	0			0
	(E)						
	(E)						
	(E)						
	(0)						
	(C)						
	(II) (I)						
	E (E)						
10	(m)						
11	(n)						
12	(II)						
13	(II)						
14	(ii)						
15	(II)						
16	(II)						
						Sch	Schedule J (Form 990) 2014

#### **SCHEDULE 0** (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

COMMITTEE OF SEVENTY	23-0487205
Amended Return Explanation	
THIS RETURN IS BEING AMENDED TO REFLECT THE 501(H)	ELECTION THAT WAS IN
EFFECT DURING THE TAX YEAR.	
Form 990 - Organization's Mission	
Committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit, nonpartisan, committee of Seventy is a nonprofit of Seventy is a nonprofit of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a nonpartisan of Seventy is a no	ivic organization
dedicated to making government work better and Phila	adelphia a better place
to live, work and play. Seventy exists to improve the	ne voting process and
open up our political culture. We encourage honest,	capable people to seek
public office, and to help them make government work	c better. We engage
citizens in the process of making important decision	ns about Philadelphia's
future.	
Form 990, Part VI, Line 11b - Organization's Process	s to Review Form 990
The Audit Committee reviews and recommends approval	to the Board and
Executive Committee. The full Board receives a revi	iew copy for comment and
approval prior to filing the 990.	
Form 990, Part VI, Line 12c - Enforcement of Conflic	cts Policy
Annual Conflicts of Interest Disclosures Statements	are required in
accordance with Seventy's Code of Ethics and Conflic	cts of Interest Policy
for Seventy's Board of Directors. Directors are also	required to notify
Seventy throughout the year as conflicts arise. Ann	nual Disclosure
Statements are on file.	

Schedule O (Form 990 or 990-EZ) (2014) Employer identification number Name of the organization COMMITTEE OF SEVENTY 23-0487205 Form 990, Part VI, Line 15a - Compensation Process for Top Official The Compensation Committee reviews and recommends compensation for the President & CEO. The President & CEO reviews and recommends compensation for other senior management. Both are presented to the Executive Committee for comment and approval. Form 990, Part VI, Line 15b - Compensation Process for Officers The Compensation Committee reviews and recommends compensation for the President & CEO. The President & CEO reviews and recommends compensation for other senior management. Both are presented to the Executive Committee for comment and approval. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation The governing documents and financial statements are available upon request. Seventy's Form 990s are available on the website www.seventy.org. 10905AMD COMMITTEE OF SEVENTY

Federal Statements

5/20/2016 12:54 PM

FYE: 12/31/2014

23-0487205

# Form 990 - Federal General Footnote

## Description

COMMITTEE OF SEVENTY MOVED ITS OFFICES FROM 8 PENN CENTER, 1628 JFK BLVD, PHILA., PA 19103 TO THE ADDRESS LISTED IN THIS FORM 990 SINCE THE FILING OF THE ORIGINAL RETURN.

Form 4562

Department of the Treasury

Internal Revenue Service

**Depreciation and Amortization** 

(Including Information on Listed Property)

Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

Identifying number Name(s) shown on return COMMITTEE OF SEVENTY 23-0487205 Business or activity to which this form relates Indirect Depreciation Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 Maximum amount (see instructions) 1 Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions .......... (a) Description of property (b) Cost (business use only) (c) Elected cost 6 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 R Tentative deduction. Enter the smaller of line 5 or line 8 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 ..... 12 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12 \_\_\_\_\_ 

13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 6,914 Other depreciation (including ACRS) ...... 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2014 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ...... Section B—Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 19a 3-year property 5-year property 7-year property d 10-year property e 15-year property 20-year property g 25-year property 25 yrs. S/L Residential rental 27.5 yrs. MM property 27.5 yrs. MM S/L MM S/L Nonresidential real 39 yrs. property MM S/L Section C-Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. S/L b 12-year S/L 40 yrs. MM 40-year **Summary** (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 22 6,914 22 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the