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<u>99</u>0 Form 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.



Α	For th	e 2014 calendar year, or tax year beginning JUN 1, 2014 and	ending Mi	AY 31, 2015	
В	Check if applicab	C Name of organization		D Employer identi	fication number
i		THE GERMAN MARSHALL FUND OF THE			
	Addre	Je UNITED STATES			
	Name Chang	pe Doing business as		52-09	54751
	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numb	ber
	Final	/ 1744 R. STREET, NW		202-6	83-2650
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	64,846,691.
	Amen			H(a) Is this a group	return
	Applio tion pendi	F Name and address of principal officer: KAREN DONFRIED		for subordinate	es? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates	s included? Yes No
		empt status: 🗴 501(c)(3) 🚺 501(c) ( )◀ (insert no.) 🛄 4947(a)(1) c	or 🛄 527	If "No," attach	a list. (see instructions)
		te: HTTP://WWW.GMFUS.ORG		H(c) Group exempt	
	-	f organization: 🔟 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨	L Year	of formation: 1972	M State of legal domicile: DC
Pa	art I	Summary			
e	1	Briefly describe the organization's mission or most significant activities:	ING GREAT	ER COOPERATION	
anc		AND UNDERSTANDING BETWEEN THE UNITED STATES AND EUROPE.			
Governance		Check this box 🕨 🛄 if the organization discontinued its operations or dispos			
2 0 0 0	3				
~		Number of independent voting members of the governing body (Part VI, line 1b)			
Activities &		Total number of individuals employed in calendar year 2014 (Part V, line 2a)			
tivi	6	Total number of volunteers (estimate if necessary)		e	
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			,
	D	Net unrelated business taxable income from Form 990-T, line 34	<u> </u>		
		Contributions and grants (Dart )/III line 1b)		Prior Year 25,811,577	Current Year 17,533,741.
anı	8	Contributions and grants (Part VIII, line 1h)		73,224	
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		11,043,387	
Å		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		66,888	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		36,995,076	,
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		6,671,862	, ,
		Benefits paid to or for members (Part IX, column (A), line 4)		0	
s		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		13,374,415	12,024,969.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		, , 0	, ,
bei		Total fundraising expenses (Part IX, column (D), line 25)			
ŵ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		17,986,171	14,729,905.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		38,032,448	31,830,116.
	19	Revenue less expenses. Subtract line 18 from line 12		-1,037,372	-4,377,299.
OC				ginning of Current Yea	r End of Year
t Assets or d Balances	20	Total assets (Part X, line 16)		208,002,901	200,122,229.
tAs	21	Total liabilities (Part X, line 26)		24,838,036	21,679,316.
Fun	22	Net assets or fund balances. Subtract line 21 from line 20		183,164,865	178,442,913.
Pa	art II	Signature Block			

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

Sign	Signature of officer		Date				
Here	DEBORAH R. IWIG, CHIEF FINANCIAL	OFFICER					
	Type or print name and title	-					
	Print/Type preparer's name	Preparer's signature	Date Check PTIN				
Paid	YONG ZHANG, CPA		self-employed P01249785				
Preparer	Firm's name 🕞 RSM US LLP		Firm's EIN 🕨 42-0714325				
Use Only	Firm's address 👞 1861 INTERNATIONAL DRIVE	, SUITE 400					
	MCLEAN, VA 22102 Phone no.703-336-						
May the IF	RS discuss this return with the preparer shown abo	ove? (see instructions)	X Yes No				

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

	THE GERMAN MARSHALL FUND OF THE		
	1990 (2014) UNITED STATES	52-0954751	Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments		x
_	Check if Schedule O contains a response or note to any line in this Part III		🛕
1	Briefly describe the organization's mission: THE GERMAN MARSHALL FUND OF THE UNITED STATES (GMF) STRENGTHENS		
	TRANSATLANTIC COOPERATION ON REGIONAL, NATIONAL, AND GLOBAL CHALLENGES		
	AND OPPORTUNITIES IN THE SPIRIT OF THE MARSHALL PLAN.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	s?	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by exp	enses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of	hers, the total exper	nses, and
	revenue, if any, for each program service reported.		
4a	(Code: ) (Expenses \$ 6,843,677. including grants of \$ 4,861,049.) (Rev	enue \$	)
	CIVIL SOCIETY TRUSTS:		
	BALKAN TRUST FOR DEMOCRACY		
	THE BALKAN TRUST FOR DEMOCRACY (BTD) IS GRANTMAKING INITIATIVE THAT		
	SUPPORTS DEMOCRACY, GOOD GOVERNANCE, AND EUROATLANTIC INTEGRATION IN		
	SOUTHEASTERN EUROPE. BTD WAS CREATED IN 2003 BY THE GERMAN MARSHALL		
	FUND OF THE UNITED STATES, THE UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID), AND THE CHARLES STEWART MOTT FOUNDATION. BTD'S		
	ORIGINAL TEN-YEAR MANDATE CAME TO AN END IN MAY 2013. BTD THEN ENTERED		
	INTO ITS SECOND MANDATE (2013-2020) WITH STRUCTURAL CHANGES TO		
	GEOGRAPHIC COVERAGE AND GRANTMAKING SCOPE. BTD OPERATES WITH A SMALL,		
4b		enue \$	5,000.)
	MAJOR CONFERENCE		,
	BRUSSELS FORUM		
	BRUSSELS FORUM IS AN ANNUAL HIGH-LEVEL MEETING OF THE MOST INFLUENTIAL		
	NORTH AMERICAN AND EUROPEAN POLITICAL, CORPORATE, AND INTELLECTUAL		
	LEADERS TO ADDRESS PRESSING CHALLENGES CURRENTLY FACING BOTH SIDES OF		
	THE ATLANTIC. PARTICIPANTS INCLUDE HEADS OF STATE, SENIOR OFFICIALS		
	FROM THE EUROPEAN UNION INSTITUTIONS AND THE MEMBER STATES, U.S. CABINET OFFICIALS, CONGRESSIONAL REPRESENTATIVES, PARLIAMENTARIANS,		
	ACADEMICS, AND MEDIA. BY BRINGING TOGETHER LEADING POLITICIANS,		
	THINKERS, JOURNALISTS, AND BUSINESS REPRESENTATIVES, BRUSSELS FORUM		
4c	/ · · · · · · · · · · · · · · ·	enue ¢	)
40	FOREIGN AND SECURITY POLICY PROGRAM	enue φ	,
	THE FOREIGN AND SECURITY PROGRAM (FSP) AT GMF COMPRISES A STREAM OF		
	ACTIVITIES FURTHERING OBJECTIVE ANALYSIS AND DEBATE ON GEOPOLITICAL		
	QUESTIONS OF TRANSATLANTIC CONCERN. THE PROGRAM SPANS REGIONAL AND		
	FUNCTIONAL ISSUES, FROM NATO AFFAIRS TO ENERGY SECURITY, INCLUDING		
	CHALLENGES AND OPPORTUNITIES IN EUROPE'S EAST, THE STRATEGIC		
	ENVIRONMENT IN THE MEDITERRANEAN, AND THE ROLE OF TURKEY AS A		
	TRANSATLANTIC PARTNER. FSP ALSO HOUSES GMF'S SUBSTANTIAL PROGRAM OF		
	WORK ON ASIA, EMERGING POWERS, AND THE "WIDER ATLANTIC." A HALLMARK OF		
	THIS WORK IS PLACING GLOBAL ISSUES IN A TRANSATLANTIC PERSPECTIVE, WITH		
	AN EMPHASIS ON TRILATERAL PROJECTS.		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 8,028,756. including grants of \$ 189,349.) (Revenue \$	33,536.)	
<u>4e</u>	Total program service expenses 23,019,343.		000
		F	orm 990 (2014)

	990 (2014) UNITED STATES 52-0954751		Р	age <b>3</b>
Pa	t 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
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	Х	
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	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
• -	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
•	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	THE GERMAN MARSHALL FUND OF THE			-
	990 (2014) UNITED STATES 52-095475	1	P	age <b>4</b>
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
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		х
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 current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
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		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

	THE GERMAN MARSHALL FUND OF THE			
Form	990 (2014) UNITED STATES 52-0954751		Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 71			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	1		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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 67			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	<b> </b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	l		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country:  SEE SCHEDULE O			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6.		x
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		
D		6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
' 2	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	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			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	100		
		12a		
b 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	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.	.54		
h	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 9	<b>990</b> (	2014)
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	THE GERMAN MARSHALL FUND OF THE				
Form	990 (2014) UNITED STATES	52-0954751	-	Р	age <b>6</b>
	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 thro	ough 7b below, and for a	a "No" r		
	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	<b>1a</b> 2	1		
	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	<b>1b</b> 2	0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	18	-		
-	officer, director, trustee, or key employee?		2		x
3	Did the organization delegate control over management duties customarily performed by or under the				
U	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 99		4		x
5	Did the organization become aware during the year of a significant diversion of the organization's asse		5		x
6	Did the organization become aware during the year of a significant diversion of the organization s asse		6		x
0 7a	Did the organization have members, stockholders, or other persons who had the power to elect or app		-		
1a			7a		x
b	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	akhaldara ar	10		
D			7b		x
0	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		70		
8			0.0	x	
a L	The governing body? Each committee with authority to act on behalf of the governing body?		8a	X	
ь 9			8b	А	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac organization's mailing address? If "Yes," provide the names and addresses in Schedule O	neu al line	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	(enue Code )	5		
000		chuc oouc.)		Yes	No
102	Did the organization have local chapters, branches, or affiliates?		10a	X	
	If "Yes," did the organization have written policies and procedures governing the activities of such cha		104		
b	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	x	
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body		11a	x	
		before ming the form?	114		
b 120	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	x	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t	o conflicts?	12a	X	
u o			120	л	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye in Schedule O how this was done		10-	x	
10			12c	X	
13 14	Did the organization have a written whistleblower policy?		13	X	
14 45	Did the organization have a written document retention and destruction policy?		14	^	
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?		45-	х	
a L	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b	^	
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
102	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem		10	v	
	taxable entity during the year?		16a	X	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi		101	v	
<u></u>	exempt status with respect to such arrangements?		16b	X	
	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, CO, CT, DC				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (	Section 501(c)(3)s only)	availab	ne	
	for public inspection. Indicate how you made these available. Check all that apply.				
	X Own website Another's website Upon request Other (explain ii				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con	ilict of interest policy, ar	id finan	cial	
	statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and records:			
	DEBORAH R. IWIG - 202-683-2650				
	1744 R. STREET, NW, WASHINGTON, DC 20009				

Form 990 (		52-0954751	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, High	nest Compensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	1	

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."

THE GERMAN MARSHALL FUND OF THE

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	(da		Pos	ition	1		Reportable	Reportable	Estimated
	hours per	box	, unle	heck ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer ar	nd a d	irecto	or/trus	itee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for related	or di	ee			sated		organization	(W-2/1099-MISC)	from the
	organizations	rustee	l trust		ee	npen		(W-2/1099-MISC)		organization and related
	below	d ual t	itiona		nploy	st co I	5			organizations
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			5
(1) ROBERT BENNETT	1.00	_		_			_			
TRUSTEE		x						0.	0.	0.
(2) MARGARET CARLSON	1.00									
TRUSTEE		х						0.	0.	0.
(3) GREGORY CRAIG	1.00									
TRUSTEE		х						0.	0.	0.
(4) GUIDO GOLDMAN	1.00									
TRUSTEE		х						0.	0.	0.
(5) MARC GROSSMAN	1.00									
TRUSTEE		Х						0.	0.	0.
(6) JOHN HARRIS	1.00									
TRUSTEE		х						0.	0.	0.
(7) DAVID IGNATIUS	1.00									
TRUSTEE		х						0.	0.	0.
(8) MARC LELAND	1.00									
TRUSTEE		х						0.	0.	0.
(9) ROBERT LIBERATORE	1.00									
TRUSTEE		х						0.	0.	0.
(10) ROMAN MARTINEZ IV	1.00									
TRUSTEE		х						0.	0.	0.
(11) MEGHAN L. O'SULLIVAN	1.00									
TRUSTEE		х						0.	0.	0.
(12) RICHARD POWERS	1.00									
TRUSTEE		х						0.	0.	0.
(13) JIM QUIGLEY	1.00									
TRUSTEE		х						0.	0.	0.
(14) SHYAM REDDY	1.00									_
TRUSTEE		х						0.	0.	0.
(15) ANN RONDEAU	1.00									
TRUSTEE		х						0.	0.	0.
(16) CHRISTOPHER SCHROEDER	1.00								-	_
TRUSTEE		x	<u> </u>				<u> </u>	0.	0.	0.
(17) DAVID M. SMICK	1.00	I						_	-	_
TRUSTEE		Х						0.	0.	0.

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THE GERMAN MA		DO	F T	HE									-
Form 990 (2014) UNITED STATES									52-0954	751		Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	vees	, an	d Hi	ghes	st C	Compensated Employee	es (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	(do				) than d	ne	Reportable	Reportable		Es	timate	d
	hours per	box	, unle	ss pe	erson	is both	ı an	compensation	compensation	1	an	nount o	of
	week		cer ar	10 a 0	Irecto	or/trust	ee)	from	from related			other	
	(list any	recto						the	organizations			pensa	
	hours for related	or di	ee			ated		organization	(W-2/1099-MIS0	J)		om the	
	organizations	ustee	trust		e	suadu		(W-2/1099-MISC)			•	anizati d relate	
	below	ual tr	tional		ploye	t con /ee	_					anizatio	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orge	Inzan	113
(18) PAUL STAFFORD	1.00	-	-	0	1×	ᆂᅙ	ш.			$\rightarrow$			
TRUSTEE		x						0.		ο.			Ο.
(19) J. ROBINSON WEST	1.00				$\vdash$					<u> </u>			
TRUSTEE	1.00	x						0.		Ο.			0.
(20) ROBERT WEXLER	1.00	^			-			0.		<u> </u>			<u> </u>
	1.00												0
TRUSTEE	10.00	X			-			0.		0.			0.
(21) KAREN DONFRIED	40.00												
PRESIDENT		х		х	<u> </u>			248,894.		٥.		19,	168.
(22) BARRY LOWENKRON	40.00												
EXEC. VP & COO				х				35,072.		0.			0.
(23) DEBBI IWIG	40.00												
VICE PRESIDENT AND CFO				Х				201,981.		٥.		19,	616.
(24) IVAN VEJVODA	40.00												
VICE PRESIDENT					Х			257,964.		Ο.		34,	955.
(25) IAN LESSER	40.00												
DIRECTOR, FOREIGN SECURITY					х			267,940.		Ο.		36,	388.
(26) STEPHEN SZABO	40.00												
EXEC.DIR, TRANSATLANTIC AC						x		203,338.		٥.		26,	820.
1b Sub-total							•	1,215,189.		0.		136,	947.
c Total from continuation sheets to Part VI								1,178,414.		٥.		110,	510.
d Total (add lines 1b and 1c)								2,393,603.		٥.		247,	457.
2 Total number of individuals (including but n									000 of reportable				
compensation from the organization						.,	• ·						28
												Yes	No
<b>3</b> Did the organization list any <b>former</b> officer,	director or tri	ista	o ka		mnlc		or	highest compensated er	nnlovee on				
line 1a? If "Yes," complete Schedule J for s			с, кс	<i>y</i> ci	npic	ycc,	01	nightest compensated er	nployee on		3	x	
<ul><li>4 For any individual listed on line 1a, is the su</li></ul>			 		 atior			hor componention from t	ho organization		5		
and related organizations greater than \$150			•					•	•		4	x	
											-		
											-		v
rendered to the organization? If "Yes," com Section B. Independent Contractors	piele Scriedui	eji	or si	ucn	pers	son .					5		X
		-l							100 000 of com		-		
1 Complete this table for your five highest co										Jensa	ation 1	rom	
the organization. Report compensation for	the calendar y	ear	enai	ng v	Nith	or w			ear.				
(A) Name and business	address							<b>(B)</b> Description of se	anvices	C	<b>))</b>	ة) nsatior	n
	2001033						_	Description of st			ompe	1541101	<u> </u>
CAPITAL EVENTS, 280, BOULEVARD BIR													
ANZARANE, CASABLANCA, MOROCCO 20100							-	ATLANTIC DIALOGUE 2			T	,066,	556.
TNS OPINION S. A., 8-10, RUE JULES CO	ockx,							TRANSATLANTIC TRENI	DS 2014				
BRUSSELS, BELGIUM 1160							_	SURVEY				539,	408.
LAW OFFICES OF PAIGE E REFFE, 3300 LC	WELL												
STREET, NW, WASHINGTON, DC 20008							_	CONSULTING FOR EVEN	ITS			490,	000.
ASSET COMMUNICATIONS, ALLEE DES FREES	IAS												
20 (B.6), BRUSSELS, BELGIUM 1030								CONSULTING FOR EVEN	ITS			323,	158.
CLEVELAND STATE UNIVERSITY, 2121 EUCI	ID							HUD FELLOWS SALARIE	IS AND				
							L					102	000

AVENUE, GRAND-SACONNEX, OH 44115 Total number of independent contractors (including but not limited to those listed above) who received more than 2 \$100,000 of compensation from the organization 6

SEE PART VII, SECTION A CONTINUATION SHEETS

183,929.

BENEFITS

THE GERMAN MA		D O	F T	HE					E2 00E47E	1
Form 990 UNITED STATES						1	4	0	52-095475	1
		npic	byee			ligh	est			
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours	(			ition that		h.)	Reportable compensation	Reportable compensation	Estimated amount of
	per					αρρ Ι	(iy)	from	from related	other
	week					/ee		the	organizations	compensation
	(list any	ector				mplo		organization	(W-2/1099-MISC)	from the
	hours for	or din	e.			ated e		(W-2/1099-MISC)		organization
	related	ustee	truste		e	ipens				and related
	organizations below	ual tri	ional		ploye	t com				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) DAVID ROMLEY	40.00	_	-		×		<u> </u>			
VICE PRESIDENT, PARTNERSHI	40.00					x		180,007.	0.	13,999.
(28) HEIKE MACKERRON	40.00							100,007.	••	10,555.
DIRECTOR, BERLIN OFFICE						x		169,425.	0.	32,335.
(29) MARK FISCHER	40.00								•	
DIRECTOR OF EUROPEAN OFFIC						x		159,519.	0.	7,129.
(30) NEIL SUNILAS	40.00							,		,
VICE PRESIDENT						x		157,594.	Ο.	21,220.
(31) R. CRAIG KENNEDY	40.00									
FORMER PRESIDENT							x	511,869.	Ο.	35,827.
			<b> </b>	<b> </b>	<u> </u>	<u> </u>	<b> </b>			
				<u> </u>	<u> </u>					
		1								
		I								
Total to Dart VII Spatian A line to								1 170 /1/		110 510
Total to Part VII, Section A, line 1c								1,178,414.		110,510.

Form	n 990 (i	2014) UNITED	STATES				52-0954751	Page <b>9</b>
Pa	rt VII	I Statement of Rever	nue					
		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
nts nts	1 a	Federated campaigns	1a					
Grai	b	Membership dues	1b					
ts, ( Am	с	Fundraising events	1c					
Gif	d	Related organizations	1d					
ns,	е	Government grants (contribut	ions) <b>1e</b>	3,789,501.				
erS	f	All other contributions, gifts, gran						
Contributions, Gifts, Grants and Other Similar Amounts		similar amounts not included abo	ve <b>1f</b>	13,744,240.				
ont od (	-	Noncash contributions included in lines	-					
<u>a</u> Č	h	Total. Add lines 1a-1f			17,533,741.			
				Business Code				
Program Service Revenue		REGISTRATION		900099	38,536.	38,536.		
erv ue	b							
ven S	c							
Be	d							
J.C	e	All 11						
-	f	All other program service reve			38,536.			
	<u>y</u> 3	Total. Add lines 2a-2f			50,550.			
	3	other similar amounts)			1,179,857.		-763,484.	1,943,341.
	4	Income from investment of ta			_,,		,	_,,
	5	Royalties						
	•		(i) Real	(ii) Personal				
	6 a	Gross rents	() 100	()				
		Less: rental expenses						
				►				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	46,053,828.					
	b	Less: cost or other basis						
		and sales expenses	37,393,874.					
	С	Gain or (loss)	8,659,954.					
	d	Net gain or (loss)		····· ►	8,659,954.			8,659,954.
ne	8 a	Gross income from fundraisin	0					
/en		including \$						
Rev		contributions reported on line						
Other Revenue		Part IV, line 18						
€		Less: direct expenses						
		Net income or (loss) from func Gross income from gaming ac		·····				
	5 4	Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam						
		Gross sales of inventory, less						
		and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sale						
		Miscellaneous Revenu		Business Code				
	11 a	OTHER INCOME		900099	40,729.			40,729.
	b							
	С			ļļ				
	d	All other revenue						
	е	Total. Add lines 11a-11d			40,729.			
	12	Total revenue. See instructions.		🕨	27,452,817.	38,536.	-763,484.	10,644,024.

432009 11-07-14

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oti	her organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	ise or note to any line in	this Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	110,000.	110,000.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	4,965,242.	4,965,242.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,121,978.	597,247.	524,731.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	8,779,590.	5,597,755.	2,681,255.	500,58
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	375,824.		112,619.	21,34
9	Other employee benefits	517,560.	252,053.	236,871.	28,63
0	Payroll taxes	1,230,017.	908,585.	280,070.	41,36
1	Fees for services (non-employees):				
а	Management				
b	Legal	67,455.	28,899.	28,028.	10,52
с	Accounting	146,544.	49,234.	97,310.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	558,199.		558,199.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	4,774,263.	4,320,806.	400,603.	52,85
12	Advertising and promotion				
13	Office expenses	1,099,568.	454,898.	605,213.	39,45
14	Information technology	212,031.	10,106.	185,968.	15,95
5	Royalties				
16	Occupancy	1,168,254.		917,134.	
7	Travel	4,721,797.	4,565,688.	115,415.	40,69
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	204,196.	204,196.		
9	Conferences, conventions, and meetings	48,893.	14,430.	23,674.	10,78
0	Interest	103,392.		103,392.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	872,310.	'	851,672.	9,44
23	Insurance	171,829.	1,840.	169,989.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	SUBSCRIPTIONS/PUBLICATI	336,903.	319,322.	15,888.	1,693
b	OTHER EXPENSES	244,271.	114,871.	98,574.	30,82
с					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	31,830,116.	23,019,343.	8,006,605.	804,16
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Ohardu have N		i		

Check here

\_\_\_\_\_ if following SOP 98-2 (ASC 958-720)

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Form 990 (2014) UNITED STATES
Part IX Statement of Functional Expenses

UNITED STATES

Form 990 (2014)

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	te to any	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			2,224.	1	3,938
	2	Savings and temporary cash investments			11,047,276.	2	9,933,324
	3	Pledges and grants receivable, net			12,840,871.	3	11,354,565
	4	Accounts receivable, net			98,950.	4	94,987
	5	Loans and other receivables from current and fo			,		,
		trustees, key employees, and highest compensation					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali				-	
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
ß		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net		F		7	
As	8					8	
		Inventories for sale or use Prepaid expenses and deferred charges			296,366.	<u> </u>	79,738
	9	• • • • • • • • • • • • • • • • • • • •			250,300.	9	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	lua	Land, buildings, and equipment: cost or other	100	29,249,571.			
		basis. Complete Part VI of Schedule D		7,974,132.	21,706,738.	10-	21 275 439
		Less: accumulated depreciation		, ,	61,693,912.		21,275,439
	11	Investments - publicly traded securities				11	40,437,993
	12	Investments - other securities. See Part IV, line			100,002,409.	12	116,674,944
	13	Investments - program-related. See Part IV, line			212 021	13	107 647
	14	Intangible assets			212,831.	14	197,647
	15	Other assets. See Part IV, line 11			101,324.	15	69,654
	16	Total assets. Add lines 1 through 15 (must equ			208,002,901.	16	200,122,229
	17	Accounts payable and accrued expenses			2,254,599.	17	2,393,883
	18	Grants payable			1,005,848.	18	746,594
	19	Deferred revenue	9,577,589.	19	6,538,839		
	20	Tax-exempt bond liabilities	12,000,000.	20	12,000,000		
	21	Escrow or custodial account liability. Complete		21			
es	22	Loans and other payables to current and former					
Liabilities		key employees, highest compensated employee					
iab.		Complete Part II of Schedule L		·····		22	
-	23	Secured mortgages and notes payable to unrela		F		23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	yables t	to related third			
		parties, and other liabilities not included on lines	s 17-24).	. Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			24,838,036.	26	21,679,316.
		Organizations that follow SFAS 117 (ASC 958	8), checl	k here ► 🔯 and			
es		complete lines 27 through 29, and lines 33 an	d 34.				
anc	27	Unrestricted net assets			168,011,299.	27	166,565,399.
Bala	28	Temporarily restricted net assets			15,153,566.	28	11,877,514
Net Assets or Fund Balances	29					29	
Fur		Organizations that do not follow SFAS 117 (A					
p		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or ec				31	
et /	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances		F	183,164,865.	33	178,442,913.
	34	Total liabilities and net assets/fund balances			208,002,901.	34	200,122,229.

Form 990 (2014)       UNITED STATES       52-0954751       F         Part XI       Reconciliation of Net Assets       Check if Schedule O contains a response or note to any line in this Part XI       E	·
	. 817.
Check if Schedule O contains a response or note to any line in this Part XI	. 817.
	·
	·
1         Total revenue (must equal Part VIII, column (A), line 12)         1         27,45	.116.
2         Total expenses (must equal Part IX, column (A), line 25)         2         31,83	/ ·
3 Revenue less expenses. Subtract line 2 from line 1 3 3	,299.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 183,16	,865.
5 Net unrealized gains (losses) on investments 5 81	545.
6 Donated services and use of facilities 6	
7 Investment expenses 7	
8 Prior period adjustments 8	
9 Other changes in net assets or fund balances (explain in Schedule O) 9 -1,16	,198.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	
column (B))	913.
Part XII Financial Statements and Reporting	
Check if Schedule O contains a response or note to any line in this Part XII	X
	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?	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,	
consolidated basis, or both:	
X Separate basis Consolidated basis Both consolidated and separate basis	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,	
review, or compilation of its financial statements and selection of an independent accountant?	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	
<b>3a</b> 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?	
<b>b</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	

SCH	IEDULE A								OMB No. 1545-0047
	n 990 or 990-EZ)			rity Status ar					201/
-	-	Co		nization is a section 50 47(a)(1) nonexempt cha			or a section		ZU 14
	nent of the Treasury			Attach to Form 990 or					Open to Public
	Revenue Service		ion about Schedule A	(Form 990 or 990-EZ) and	l its instruct	tions is at <sub>W</sub>	ww.irs.gov/fo		Inspection
Name	of the organizati		RMAN MARSHALL F	UND OF THE					identification number
Der			STATES						2-0954751
Par				All organizations must c			e instruction	3.	
Г	<u> </u>	•		(For lines 1 through 11,		,			
1 L			•	on of churches describe	ed in sectio	on 170(b)(1	)(A)(i).		
2 L			ion 170(b)(1)(A)(ii).				••		
3 L			1 0	anization described in s				VIII) Entor	the beenitel's name
4 L	city, and stat		allon operated in co	njunction with a hospita	a describe	u in sectio		(III). Enter	ine nospital s name,
5		-	or the benefit of a co	llege or university owne	d or opera	ited by a d	overnmental	init describ	ed in
•			Complete Part II.)			lica by a g			
6				nental unit described in	section 1	70(b)(1)(A)	(v).		
			-	Intial part of its support				he general	public described in
			omplete Part II.)		Ū			U U	
8 [	A community	rtrust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	rt II.)				
9	An organizati	ion that norma	ally receives: (1) more	e than 33 1/3% of its su	pport from	contributio	ons, members	ship fees, a	nd gross receipts from
	activities rela	ted to its exen	npt functions - subje	ct to certain exceptions	, and (2) no	o more tha	n 33 1/3% of	its support	from gross investment
	income and u	unrelated busi	ness taxable income	(less section 511 tax) fi	rom busine	esses acqu	ired by the o	ganization	after June 30, 1975.
Г			mplete Part III.)						
10 L		-	-	ively to test for public s	-				,
<b>11</b> L	•	•	•	ively for the benefit of, t	•		-	•	
				ed in <b>section 509(a)(1)</b> of supporting organization					
а		0		supervised, or controlled		•		-	aivina
u				gularly appoint or elect					
		-	complete Part IV, Se		amajonty				apporting
b			-	d or controlled in connec	ction with i	ts supporte	ed organizatio	on(s), by ha	ving
			-	anization vested in the s			-		-
	organizatio	n(s). You mus	t complete Part IV,	Sections A and C.					
с	Type III fur	nctionally inte	grated. A supporting	g organization operated	l in connec	tion with, a	and functiona	lly integrate	ed with,
	its support	ed organizatio	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.		
d	Type III no	n-functionally	<b>y integrated.</b> A supp	oorting organization ope	rated in co	nnection v	ith its suppo	rted organi	zation(s)
		,	0 0	zation generally must sa			•	d an attent	iveness
				nplete Part IV, Section					
е		•		written determination fro			Туре I, Туре	II, Type III	
				nally integrated suppor	0 0	zation.			
	Enter the number			d organization(s)					
g	(i) Name of supp		n about the supporte (ii) EIN	(iii) Type of organization		organization	(v) Amount of	monetary	(vi) Amount of
	organization	ı		(described on lines 1-9		in your document?	support	(see	other support (see
				above or IRC section (see instructions))	Yes	No	Instruct	ons)	Instructions)
				(					
Total									
-			lation and the last				0.1		

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## Schedule A (Form 990 or 990 EZ) 2014 UNITED STATES

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and			. ,			
	membership fees received. (Do not						
	include any "unusual grants.")	21,388,423.	18,650,313.	29,554,047.	25,811,577.	17,533,741.	112,938,101.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	21,388,423.	18,650,313.	29,554,047.	25,811,577.	17,533,741.	112,938,101.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						24,094,840.
6	Public support. Subtract line 5 from line 4.						88,843,261.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	21,388,423.	18,650,313.	29,554,047.	25,811,577.	17,533,741.	112,938,101.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	4,051,516.	8,615,394.	3,817,820.	4,187,611.	1,943,341.	22,615,682.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	34,016.					34,016.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	58,819.	29,225.	54,750.	66,374.	40,729.	249,897.
11	Total support. Add lines 7 through 10						135,837,696.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	159,054.
13	First five years. If the Form 990 is for	the organization's	s first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here					<b>&gt;</b>
See	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2014 (I					14	65.40 %
15	Public support percentage from 2013	Schedule A, Part	II, line 14			15	69.13 %
16a	33 1/3% support test - 2014. If the c	organization did no	t check the box or	n line 13, and line <sup>-</sup>	14 is 33 1/3% or n	nore, check this bo	ox and
	$\ensuremath{ \text{stop} here.}$ The organization qualifies	as a publicly supp	orted organization				► X
b	33 1/3% support test - 2013. If the c	•				•	
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances tes	<b>t - 2014.</b> If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and <b>stop h</b>	<b>ere.</b> Explain in Pa	t VI how the orgar	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	organization		▶∟
b	10% -facts-and-circumstances tes	<b>t - 2013.</b> If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or <sup>-</sup>	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	neck this box and s	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization o	ualifies as a public	cly supported orga	nization	▶□
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	s ►
					Caba	dula A (Farma 000	or 990-E7) 2014

Schedule A (Form 990 or 990-EZ) 2014

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52-0954751

# 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			_			
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 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 per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
	Amounts included on lines 1, 2, and						1
	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						
с	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</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						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organi	zation,
	check this box and stop here						
Sec	tion C. Computation of Publi	c Support Pe	ercentage				
15	Public support percentage for 2014 (li	ne 8, column (f) c	livided by line 13,	column (f))		15	%
16	Public support percentage from 2013	Schedule A, Part	t III, line 15			16	%
	tion D. Computation of Inves						
17	Investment income percentage for 20	14 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from 2	2013 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2014. If the	organization did I	not check the box	on line 14, and lin	e 15 is more than 3	33 1/3% , and line	17 is not
	more than 33 1/3%, check this box ar	-					
b	33 1/3% support tests - 2013. If the						
	line 18 is not more than 33 1/3%, che	•					
20	Private foundation. If the organization						
	23 09-17-14						90 or 990-EZ) 2014

### Schedule A (Form 990 or 990-EZ) 2014 UNITED STATES

### 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in *Part VI* how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, Ioan, 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.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

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10b

Yes

No

Sche	edule A (Form 990 or 990-EZ) 2014 UNITED STATES 52-0954	751	Pa	age <b>5</b>
	rt IV Supporting Organizations (continued)			- <b>Z</b>
			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		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> 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		
Sec	tion C. Type II Supporting Organizations	-		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion 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):			
а	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 inst	tructions	s).	
2	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.			
a				
-	trustees of each of the supported organizations? Provide details in <b>Part VI</b>	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.

Schedule A (Form 990 or 990-EZ) 2014

3b

	THE GERMAN MARSHALL FUND OF THE			
	edule A (Form 990 or 990 EZ) 2014 UNITED STATES			52-0954751 Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970. <b>See in</b>	structions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year
	······		( ) )	(optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
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		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
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-functional			examination (and

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

Schedule A (Form 990 or 990-EZ) 2014

	THE GERMAN MARSHALI	L FUND OF THE			
Sche	edule A (Form 990 or 990-EZ) 2014 UNITED STATES			52-0954751	Page 7
Pa	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	anizations <sub>(continued)</sub>		
Sect	ion D - Distributions			Current	Year
1	Amounts paid to supported organizations to accomplish ex	empt purposes			
2	Amounts paid to perform activity that directly furthers exem	npt purposes of supported			
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purport	ses of supported organizatior	IS		
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in <b>Part VI</b> ). See instructions.				
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which	the organization is responsive	e		
	(provide details in <b>Part VI</b> ). See instructions.				
9	Distributable amount for 2014 from Section C, line 6				
10	Line 8 amount divided by Line 9 amount				
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distribut Amount fo	
1	Distributable amount for 2014 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2014				
	(reasonable cause required-see instructions)				
3	Excess distributions carryover, if any, to 2014:				
a					
b					

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)		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4	Distributions for 2014 from Section D,		
	line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2014 distributable amount		
c	Remainder. Subtract lines 4a and 4b from 4.		
5	Remaining underdistributions for years prior to 2014, if		
	any. Subtract lines 3g and 4a from line 2 (if amount		
	greater than zero, see instructions).		
6	Remaining underdistributions for 2014. Subtract lines 3h		
	and 4b from line 1 (if amount greater than zero, see		
	instructions).		
7	Excess distributions carryover to 2015. Add lines 3j		
	and 4c.		
8	Breakdown of line 7:		
a			
b			
C			
-	Excess from 2013		
e	Excess from 2014		
		Schedule A	(Earm 990 or 990-E7) 2014

Schedule A (Form 990 or 990-EZ) 2014

Part VI       Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).         SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:         OTHER INCOME FROM EXEMPT ACTIVITIES         2010 AMOUNT: \$ 58,819.         2011 AMOUNT: \$ 29,225.         2012 AMOUNT: \$ 54,750.         2013 AMOUNT: \$ 66,374.	THE GERMAN MARSHALL FUND OF THE	
Part VI       Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).         SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:         OTHER INCOME FROM EXEMPT ACTIVITIES         2010 AMOUNT: \$ 58,819.         2011 AMOUNT: \$ 29,225.         2012 AMOUNT: \$ 54,750.         2013 AMOUNT: \$ 66,374.	Schedule A (Form 990 or 990-EZ) 2014 UNITED STATES	
Also complete this part for any additional information. (See instructions). SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: OTHER INCOME FROM EXEMPT ACTIVITIES 2010 AMOUNT: \$ 58,819. 2011 AMOUNT: \$ 29,225. 2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.	Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17;	a or 17b; and Part III, line 12.
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: OTHER INCOME FROM EXEMPT ACTIVITIES 2010 AMOUNT: \$ 58,819. 2011 AMOUNT: \$ 29,225. 2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.	Also complete this part for any additional information. (See instructions).	
OTHER INCOME FROM EXEMPT ACTIVITIES 2010 AMOUNT: \$ 58,819. 2011 AMOUNT: \$ 29,225. 2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.		
OTHER INCOME FROM EXEMPT ACTIVITIES 2010 AMOUNT: \$ 58,819. 2011 AMOUNT: \$ 29,225. 2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.	SCHEDULE A PART II LINE 10 EXPLANATION FOR OTHER INCOME:	
2010 AMOUNT: \$ 58,819. 2011 AMOUNT: \$ 29,225. 2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.		
2010 AMOUNT: \$ 58,819. 2011 AMOUNT: \$ 29,225. 2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.		
2011 AMOUNT: \$ 29,225. 2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.	UTHER INCOME FROM EXEMPT ACTIVITIES	
2011 AMOUNT: \$ 29,225. 2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.		
2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.	2010 AMOUNT: \$ 58,819.	
2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.		
2012 AMOUNT: \$ 54,750. 2013 AMOUNT: \$ 66,374.	2011 AMOUNT: \$ 29,225.	
2013 AMOUNT: \$ 66,374.		
2013 AMOUNT: \$ 66,374.	2012 AMOUNT: \$ 54 750	
2014 AMOINT: \$ 40,729.	2013 AMOUNT: \$ 66,374.	
	2014 AMOUNT: \$ 40,729.	

\*\* PUBLIC DISCLOSURE COPY \*\*

# Schedule of Contributors

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 . OMB No. 1545-0047

# 2014

Employer identification number

Name of the	organization
-------------	--------------

Schedule B

(Form 990, 990-FZ.

Department of the Treasury Internal Revenue Service

or 990-PF)

THE	GERMAN	MARSHALL	FUND	OF	THE
UNIT	TED STAT	res			

52-0954751

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	X     501(c)( <sup>3</sup> ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

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

#### **Special Rules**

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

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)			Page <b>2</b>
Name of or	-		Employ	er identification number
THE GERM UNITED S	NAN MARSHALL FUND OF THE		52-	0954751
			52	0554751
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.		
(a)	(b)	(c)		(d)
No.	Name, address, and ZIP + 4	Total contribution	ns	Type of contribution
1		\$439	<u>,275.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)		(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributio	ns	Type of contribution       Person     X       Payroll
		\$1,766	,149.	Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
3		\$761	,089.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
4		\$1,311	,204.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
5		\$4,921	,267.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
6		\$1,163	,903 <u>.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)			Page <b>2</b>
Name of or			Employ	er identification number
THE GERM UNITED S	NAN MARSHALL FUND OF THE		52_	0954751
			52	0554751
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.		
(a)	(b)	(c)		(d)
No.	Name, address, and ZIP + 4	Total contributio	ns	Type of contribution
7		\$1,310	,479 <b>.</b>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)		(d)
No.	Name, address, and ZIP + 4	Total contributio	ns	Type of contribution
8		\$743	,468 <b>.</b>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
9		\$375	<u>,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
10		\$1,797	,354.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
11		\$487	<u>,590.</u>	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
12			,483.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

	ganization An Marshall fund of the	Emp	oyer identification number
ITED S		5:	2-0954751
art II	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

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

	(Form 990, 990-EZ, or 990-PF) (2014)		Page
Name of org			Employer identification number
	AN MARSHALL FUND OF THE		
UNITED ST Part III	Exclusively religious, charitable, etc., contrib the year from any one contributor. Complete colu completing Part III, enter the total of exclusively religious, c	haritable, etc., contributions of \$1,000 or	52-0954751 in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations less for the year. (Enter this info. once.) \$ \$
	Use duplicate copies of Part III if additional	space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gif	 t
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
		(e) Transfer of gif	
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I		(0) 000 01 g	
-		(e) Transfer of gif	t
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gif	t
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee

Form 990)	74	Complete if the org Part IV, line 6, 7, 8, 9, 10	al Financial Statements Janization answered "Yes" to Form 990, J, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. rm 990) and its instructions is at <u>www.irs.go</u> g	<i>k</i>		MB No. 1545-0047 <b>2014</b> Open to Public nspection
ame of the organ		IE GERMAN MARSHALL FUND OF			90.	tification num
ame of the organ		IITED STATES		<b></b>	52-095	
Part I Orga	nizations	Maintaining Donor Advise	ed Funds or Other Similar Funds or	Acco		
		red "Yes" to Form 990, Part IV, lin				
3		, ,	(a) Donor advised funds	(b) Fu	nds and othe	er accounts
1 Total number	at end of yea	ar				
		utions to (during year)				
		from (during year)				
		year				
			writing that the assets held in donor advised fi	unds		
-			exclusive legal control?			Yes
			advisors in writing that grant funds can be use			
for charitable	purposes and	d not for the benefit of the donor of	or donor advisor, or for any other purpose cont	erring		
impermissible	e private bene	əfit?	· · · ·	<u> </u>		Yes
Part II Cons	servation E		ganization answered "Yes" to Form 990, Part I			
Preserv	ion of natural vation of oper es 2a through	n space	education) Preservation of a historica Preservation of a certified fied conservation contribution in the form of a		structure	ent on the las
Preserv	vation of oper es 2a through	n space	Preservation of a certified		structure vation easem	
Preserver     Complete line     day of the tax	vation of oper es 2a through < year.	n space 2d if the organization held a quali	fied conservation contribution in the form of a	conser	structure vation easem	
<ul> <li>Preserve</li> <li>Complete line day of the tax</li> <li>a Total number</li> </ul>	vation of oper es 2a through < year.	o space 2d if the organization held a quali ion easements	fied conservation contribution in the form of a	conserv	structure vation easem	
<ul> <li>Preserve</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> </ul>	vation of oper es 2a through < year. of conservat e restricted by	a space 2d if the organization held a quali ion easements v conservation easements	fied conservation contribution in the form of a	conserv 2a 2b	structure vation easem	
<ul> <li>Preserve</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of complete line day</li> </ul>	vation of oper es 2a through < year. of conservat e restricted by onservation ea	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str	Fied conservation contribution in the form of a rectified	conserv 2a 2b	structure vation easem	ent on the last End of the Tax Y
<ul> <li>Preserve</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of cond</li> <li>d Number of cond</li> </ul>	vation of oper es 2a through < year. of conservat e restricted by onservation ea onservation ea	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired	Freservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure	2a 2b 2c	structure vation easem	
<ul> <li>Preserve</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of conduct of the tax</li> <li>d Number of conduct of the tax</li> </ul>	vation of oper es 2a through c year. of conservat e restricted by onservation ea onservation ea lational Regis	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired ater	Freservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure	2a 2b 2c 2d	structure vation easem Held at the	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of conditional day</li> <li>d Number of conditional day</li> <li>3 Number of conditional day</li> </ul>	vation of oper es 2a through c year. of conservat e restricted by onservation ea onservation ea lational Regis	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired ater	Freservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure	2a 2b 2c 2d	structure vation easem Held at the	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of conditional day</li> <li>d Number of conditional day</li> <li>3 Number of conditional day</li> </ul>	vation of oper es 2a through < year. of conservat e restricted by onservation ea Jational Regis onservation ea	2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired oter asements modified, transferred, re	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org	2a 2b 2c 2d	structure vation easem Held at the	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of coordinate disted in the N</li> <li>3 Number of coordinate disted in the N</li> <li>4 Number of state</li> </ul>	vation of oper es 2a through c year. of conservat e restricted by onservation ea lational Regis onservation ea lational regis	2d if the organization held a quali ion easements	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org	2a 2b 2c 2d	structure vation easem Held at the	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of conditional day</li> <li>d Number of conditional day</li> <li>3 Number of conditional day</li> <li>4 Number of st.</li> <li>5 Does the organization</li> </ul>	vation of oper es 2a through c year. of conservat e restricted by onservation ea onservation ea lational Regis onservation ea lates where pr anization have	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired ster asements modified, transferred, re roperty subject to conservation ea e a written policy regarding the pe	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org usement is located riodic monitoring, inspection, handling of	2a 2b 2c 2d anizatio	structure vation easem Held at the	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of conditional day</li> <li>d Number of conditional day</li> <li>Number of conditional day</li> <li>4 Number of stational day</li> <li>5 Does the organ violations, and</li> </ul>	vation of oper es 2a through c year. of conservat e restricted by onservation ea baservation ea lational Regis onservation ea lational Regis onservation ea dates where pr anization have d enforcemer	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired iter asements modified, transferred, re roperty subject to conservation ease e a written policy regarding the pe th of the conservation easements	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org sement is located ▶	2a 2b 2c 2d anizatic	structure vation easem Held at the on during the	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of conditional day</li> <li>d Number of conditional day</li> <li>Number of stational day</li> <li>Does the organisation of the stational day</li> <li>6 Staff and volu</li> </ul>	vation of oper es 2a through c year. of conservat e restricted by onservation ea Jational Regis onservation ea Jates where pr anization have d enforcemers	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired iter asements modified, transferred, re- roperty subject to conservation ea- e a written policy regarding the pe- nt of the conservation easements i devoted to monitoring, inspecting,	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org sement is located ▶ riodic monitoring, inspection, handling of it holds?	2a 2b 2c 2d anizatio	structure vation easem Held at the on during the ar	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number of conditional acreage</li> <li>c Number of conditional acreage</li> <li>c Number of conditional acreage</li> <li>d Number of conditional acreage</li> <li>d Number of conditional acreage</li> <li>4 Number of st</li> <li>5 Does the organizational acreage</li> <li>4 Number of st</li> <li>5 Does the organizational acreage</li> <li>4 Annount of example.</li> </ul>	vation of oper es 2a through c year. of conservat e restricted by onservation ea Jational Regis onservation ea Jational Regis Jational Regis	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired ther asements modified, transferred, re- roperty subject to conservation ea- e a written policy regarding the pe- nt of the conservation easements i devoted to monitoring, inspecting, red in monitoring, inspecting, and	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org usement is located ▶ riodic monitoring, inspection, handling of it holds? , and enforcing conservation easements during enforcing conservation easements during the	conserv 2a 2b 2c 2d anizatio	structure vation easem Held at the on during the ar	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number of conditional acreage</li> <li>c Number of conditional acreage</li> <li>c Number of conditional acreage</li> <li>d Num</li></ul>	vation of oper es 2a through ( year. of conservat e restricted by onservation ea lational Regis onservation ea lational Regis onservation ea danization have d enforcemer unteer hours of penses incur onservation ea	2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired ther asements modified, transferred, re- roperty subject to conservation ea- e a written policy regarding the pe- nt of the conservation easements i devoted to monitoring, inspecting, red in monitoring, inspecting, and asement reported on line 2(d) abor	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org seement is located ▶ riodic monitoring, inspection, handling of it holds? , and enforcing conservation easements during enforcing conservation easements during the ve satisfy the requirements of section 170(h)(4	conserv 2a 2b 2c 2d anization g the year year ► )(B)(i)	structure vation easem Held at the on during the ar ▶ \$	End of the Tax Y tax Yes
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of conditional acreage</li> <li>c Number of conditional acreage</li> <li>d Number of conditionacreage</li> <li>d Num</li></ul>	vation of oper es 2a through ( year. of conservation e restricted by poservation ea participation larges poservation ea distional Regis poservation ea distional Regis poservation ea distional Regis poservation ea distional Regis poservation ea distional Regis poservation ea distinct for cemer unteer hours of penses incurr poservation ea 70(h)(4)(B)(ii)	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired oter asements modified, transferred, re- roperty subject to conservation ea- e a written policy regarding the pe- nt of the conservation easements i devoted to monitoring, inspecting, red in monitoring, inspecting, and asement reported on line 2(d) abor ?	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org risement is located ▶	2a 2b 2c 2d anizatic	structure vation easem Held at the n during the \$	End of the Tax Y tax Yes Yes
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of conditional acreage</li> <li>c Number of conditional acreage</li> <li>d Number of conditional acreage</li> <li>4 Number of conditional acreage</li> <li>4 Number of state</li> <li>5 Does the organizational acreage</li> <li>4 Number of state</li> <li>5 Does the organizational acreage</li> <li>4 Number of state</li> <li>5 Does the organization acreage</li> <li>6 Staff and volutions, and</li> <li>6 Staff and volution and section 1</li> <li>9 In Part XIII, does</li> </ul>	vation of open es 2a through ( year. of conservat e restricted by onservation ea onservation ea lational Regis onservation ea lational Regis lational Regis	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired iter asements modified, transferred, re roperty subject to conservation ea e a written policy regarding the pent of the conservation easements devoted to monitoring, inspecting, red in monitoring, inspecting, and asement reported on line 2(d) abor ? he organization reports conservat	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org usement is located ▶ riodic monitoring, inspection, handling of it holds? , and enforcing conservation easements during enforcing conservation easements during the ve satisfy the requirements of section 170(h)(4 ion easements in its revenue and expense stat	2a 2b 2c 2d anizatic	structure vation easem Held at the held a	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number</li> <li>b Total acreage</li> <li>c Number of conditional acreage</li> <li>c Number of conditional acreage</li> <li>d Number of conditional acreage</li> <li>4 Number of conditional acreage</li> <li>4 Number of state</li> <li>5 Does the organizational acreage</li> <li>4 Number of state</li> <li>5 Does the organizational acreage</li> <li>4 Number of state</li> <li>5 Does the organization acreage</li> <li>6 Staff and volutions, and</li> <li>6 Staff and volution and section 1</li> <li>9 In Part XIII, does</li> </ul>	vation of oper es 2a through ( year. of conservat e restricted by onservation ea baservation ea lational Regis onservation ea lational Regis lational Regis	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired iter asements modified, transferred, re roperty subject to conservation ea e a written policy regarding the pent of the conservation easements devoted to monitoring, inspecting, red in monitoring, inspecting, and asement reported on line 2(d) abor ? he organization reports conservat	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org risement is located ▶	2a 2b 2c 2d anizatic	structure vation easem Held at the held a	End of the Tax Y
<ul> <li>Preservent</li> <li>Complete line day of the tax</li> <li>a Total number of tax</li> <li>a Total acreage</li> <li>c Number of conditional acreage</li> <li>c Number of conditional acreage</li> <li>d Number of conditional acreage</li> <li>d Number of conditional acreage</li> <li>d Number of conditional acreage</li> <li>4 Number of conditional acreage</li> <li>4 Number of state</li> <li>5 Does the organ violations, and</li> <li>6 Staff and volutional acreage</li> <li>and section 1</li> <li>9 In Part XIII, duinclude, if approximation</li> </ul>	vation of open es 2a through c year. of conservat e restricted by onservation ea bational Regis onservation ea lational Regis lational Regis	a space 2d if the organization held a quali ion easements conservation easements asements on a certified historic str asements included in (c) acquired iter asements modified, transferred, re roperty subject to conservation ea e a written policy regarding the per to of the conservation easements devoted to monitoring, inspecting, and asement reported on line 2(d) abor ? he organization reports conservat ext of the footnote to the organization	Preservation of a certified fied conservation contribution in the form of a ructure included in (a) after 8/17/06, and not on a historic structure eleased, extinguished, or terminated by the org usement is located ▶ riodic monitoring, inspection, handling of it holds? , and enforcing conservation easements during enforcing conservation easements during the ve satisfy the requirements of section 170(h)(4 ion easements in its revenue and expense stat	anization (B)(i) (B)(i) (Conservation (Cons	structure vation easem Held at the held a	End of the Tax Y         Image: state s

1a	a If the organization elected, as permitted	d under SFAS 116 (ASC 958), not to report in its r	evenue statement and balance sheet works of art,
	historical treasures, or other similar ass	ets held for public exhibition, education, or resea	rch in furtherance of public service, provide, in Part XIII,
	the text of the footnote to its financial s	statements that describes these items.	

b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts
	relating to these items:

	(i) Revenue included in Form 990, Part VIII, line 1		• \$
	(ii) Assets included in Form 990, Part X		· \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro	ovi	vide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:		
а	Revenue included in Form 990, Part VIII, line 1		• \$
b	Assets included in Form 990, Part X		· \$

Schedule D (Form 990) 2014

mur	CEDMAN	MARSHALL	רואדים		mut
THE	GERMAN	MARSHALL	FUND	Or	THE

		MARSHALL FUND U	F THE							~
	dule D (Form 990) 2014 UNITED STAT		· · · · · · · · · · · · · · · · · · ·				09547			age <b>2</b>
Par	t III Organizations Maintaining C									
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following the	at are a si	gnificant use	of its o	collectio	n item	S
	(check all that apply):									
а	Public exhibition	d	Loan or exc	hange progr	ams					
b	Scholarly research	e	U Other							
с	Preservation for future generations									
4	Provide a description of the organization's co	pllections and explair	how they further t	ne organizat	ion's exer	npt purpose i	in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or oth	er similar	assets				
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran							ne 9, or		
	reported an amount on Form 990, Par	t X, line 21.	-							
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contribution	s or other as	ssets not	included				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII									
		·	0					Amount		
с	Beginning balance					1c			-	
	Additions during the year									
	Distributions during the year									
f	Ending balance							Yes		No
	Did the organization include an amount on Fo					ity?	ـــــــــــــــــــــــــــــــــــ	tes		No
Par	If "Yes," explain the arrangement in Part XIII. <b>t V</b> Endowment Funds. Complete it					•				
Fai							healt	() [		haali
		(a) Current year	(b) Prior year	(c) Two yea		(d) Three years		(e) Four		
	Beginning of year balance	11,457,881.	11,935,788.	12,54	8,369.	13,333,	808.	14	024,	574.
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	11,457,881.	477,907.	61	2,581.	785,	439.		690,	766.
f	Administrative expenses									
g	End of year balance		11,457,881.	11,93	5,788.	12,548,	369.	13	333,	808.
2	Provide the estimated percentage of the curr		e (line 1a. column (a	)) held as:				·		
а	Board designated or quasi-endowment	,	%							
	Permanent endowment	%								
	Temporarily restricted endowment	%								
U	The percentages in lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should									
20			tion that are hold a	nd administ	ared for th	no organizatio	<b>n</b>			
Jd	Are there endowment funds not in the posse	ssion of the organiza	illon inal are neiù a			ie organizatio	, , ,	Г	Vee	Na
	by:								Yes	No X
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		Х
b	If "Yes" to 3a(ii), are the related organizations							3b		
4	Describe in Part XIII the intended uses of the		wment funds.							
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered									
	Description of property	(a) Cost or ot		or other		cumulated		(d) Bool	k value	Э
		basis (investm		, ,	dep	preciation				
	Land			,237,440.					,237	
b	Buildings		24	,756,369.		5,386,387	'.	19	369,	982.
	Leasehold improvements									
	Equipment									
	Other		3	,255,762.		2,587,745			668,	017.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) \_\_\_\_\_ 21,275,439.

Schedule D (Form 990) 2014

#### THE GERMAN MARSHALL FUND OF THE UNITED STATES 52-0954751 Schedule D (Form 990) 2014 Page 3 Part VII Investments - Other Securities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) ALTERNATIVE INVESTMENTS - EQUITY END-OF-YEAR MARKET VALUE FUNDS 28,541,403. (B) ALTERNATIVE INVESTMENTS - HEDGE FUNDS 32,209,268 END-OF-YEAR MARKET VALUE (C) ALTERNATIVE INVESTMENTS PRIVATE (D) EQUITY 34,547,033. END-OF-YEAR MARKET VALUE (E) ALTERNATIVE INVESTMENTS -PUBLTC (F) NATURAL RESOURCES 14,194,021 END-OF-YEAR MARKET VALUE (G) (H) 116,674,944 Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6)(7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4)(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value 1. (1) Federal income taxes (2)

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

#### Schedule D (Form 990) 2014

	THE GERMAN MARSHALL FUND OF THE				
Sche	dule D (Form 990) 2014 UNITED STATES			52-0954751	Page <b>4</b>
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per R	leturn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	27,933,089.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	_ 2a	818,545.		
b	Donated services and use of facilities	_ 2b	1,383,124.		
с	Recoveries of prior year grants	_ 2c			
d	Other (Describe in Part XIII.)	2d	-1,163,198.		
е	Add lines 2a through 2d			2e	1,038,471.
3	Subtract line 2e from line 1			3	26,894,618.
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	558,199.		
b	Other (Describe in Part XIII.)	. 4b			
С	Add lines 4a and 4b			4c	558,199.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	27,452,817.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents With	n Expenses per	Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	32,655,041.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a	1,383,124.		
b	Prior year adjustments	_ <b>2</b> b			
с	Other losses	_ 2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	1,383,124.
3	Subtract line 2e from line 1			3	31,271,917.
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	. 4a	558,199.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	558,199.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	31,830,116.
Pa	rt 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 V, LINE 4:

THE GMF BOARD OF DIRECTORS HAS DESIGNATED A PORTION OF THE UNRESTRICTED

NET ASSETS TO BE UTILIZED FOR THE BALKAN TRUST FOR DEMOCRACY AND THE BLACK

SEA TRUST FUNDING.

PART X, LINE 2:

GMF IS RECOGNIZED AS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION

501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND IS CURRENTLY

CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION WITHIN THE

MEANING OF SECTION 509(A) OF THE CODE. HOWEVER, THE GMF IS SUBJECT TO

INCOME TAXES ON UNRELATED BUSINESS INCOME AS DEFINED BY THE INTERNAL

REVENUE SERVICE.

# Part XIII Supplemental Information (continued)

DURING THE YEAR ENDED MAY 31, 2015, GMF INCURRED NO TAX EXPENSE RELATED TO

UNRELATED BUSINESS INCOME ACTIVITIES.

1700 18TH STREET LLC (LLC) IS A SINGLE MEMBER LIMITED LIABILITY COMPANY

FOR FEDERAL INCOME TAX PURPOSES. ALL TAX ATTRIBUTES FLOW THROUGH TO GMF

UNDER THIS ENTITY FORM. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS

BEEN MADE.

THE TRANSATLANTIC FOUNDATION (TTF) IS A FOREIGN NONPROFIT ENTITY

INCORPORATED UNDER THE LAWS OF BRUSSELS, BELGIUM. THERE WAS IMMATERIAL

ACTIVITY UNDER TTF DURING THE YEAR ENDED MAY 31, 2015.

ACCORDING TO THE ACCOUNTING STANDARD FOR UNCERTAINTY IN INCOME TAXES, FOR

THE PERIOD FROM THE GMF'S INCEPTION TO MAY 31, 2015, NO UNRECOGNIZED TAX

PROVISION OR BENEFIT EXISTED. DEFERRED INCOME TAXES ARE PROVIDED USING THE

LIABILITY METHOD, WHEREBY, DEFERRED TAX ASSETS ARE RECOGNIZED FOR

DEDUCTIBLE TEMPORARY DIFFERENCES AND OPERATING LOSS AND TAX CREDIT

CARRYFORWARDS AND DEFERRED TAX LIABILITIES ARE RECOGNIZED FOR TAXABLE

TEMPORARY DIFFERENCES.

TEMPORARY DIFFERENCES ARE THE DIFFERENCES BETWEEN THE REPORTED AMOUNTS OF

ASSETS AND LIABILITIES AND THEIR TAX BASES. DEFERRED TAX ASSETS ARE

REDUCED BY A VALUATION ALLOWANCE WHEN, IN THE OPINION OF MANAGEMENT, IT IS

MORE LIKELY THAN NOT THAT SOME PORTION OR ALL OF THE DEFERRED TAX ASSETS

WILL NOT BE REALIZED. DEFERRED TAX ASSETS AND LIABILITIES ARE ADJUSTED FOR

THE EFFECTS OF THE CHANGES IN TAX LAWS AND RATES OF THE DATE OF ENACTMENT.

Schedule D (Form 990) 2014 UNITED STATES	52-0954751	Page 5
Part XIII Supplemental Information (continued)		
WHEN TAX RETURNS ARE FILED, IT IS HIGHLY CERTAIN THAT SOME POSITIONS TAKEN		
WOULD BE SUSTAINED UPON EXAMINATION BY THE TAXING AUTHORITIES, WHILE		
OTHERS ARE SUBJECT TO UNCERTAINTY ABOUT THE MERITS OF THE POSITION TAKEN		
OR THE AMOUNT OF THE POSITION THAT WOULD BE ULTIMATELY SUSTAINED. THE		
BENEFIT OF A TAX POSITION IS RECOGNIZED IN THE FINANCIAL STATEMENTS IN THE		
PERIOD DURING WHICH, BASED ON ALL AVAILABLE EVIDENCE, MANAGEMENT BELIEVES		
IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON		
EXAMINATION, INCLUDING THE RESOLUTION OF APPEALS OR LITIGATION PROCESSES,		
IF ANY. TAX POSITIONS TAKEN ARE NOT OFFSET OR AGGREGATED WITH OTHER		
POSITIONS. TAX POSITIONS THAT MEET THE MORE LIKELY THAN NOT RECOGNITION		
THRESHOLD ARE MEASURED AS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS MORE		
THAN 50% LIKELY OF BEING REALIZED UPON SETTLEMENT WITH THE APPLICABLE		
TAXING AUTHORITY. THE PORTION OF THE BENEFITS ASSOCIATED WITH TAX		
POSITIONS TAKEN THAT EXCEEDS THE AMOUNT MEASURED AS DESCRIBED ABOVE WOULD		
BE REFLECTED AS A LIABILITY FOR UNRECOGNIZED TAX BENEFITS IN THE		
ACCOMPANYING BALANCE SHEET, ALONG WITH ANY ASSOCIATED INTEREST AND		
PENALTIES THAT WOULD BE PAYABLE TO THE TAXING AUTHORITIES UPON		
EXAMINATION. MANAGEMENT BELIEVES THERE ARE NO POSITIONS THAT WOULD RESULT		
IN ADDITIONAL TAX LIABILITY.		
INTEREST AND PENALTIES ASSOCIATED WITH UNRECOGNIZED TAX BENEFITS ARE		
CLASSIFIED AS ADDITIONAL INCOME TAXES IN THE STATEMENT OF ACTIVITIES.		

GMF FILES INCOME TAX RETURNS IN THE U.S. FEDERAL JURISDICTION. AS OF MAY

31, 2015, AND FOR THE YEAR THEN ENDED, THERE WERE NO MATERIAL

UNRECOGNIZED/DERECOGNIZED TAX BENEFITS OR TAX PENALTIES OR INTEREST.

GENERALLY, GMF IS NO LONGER SUBJECT TO U.S. FEDERAL INCOME TAX

#### EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE FISCAL YEAR ENDED MAY 31,

Schedule D (Form 990) 2014         UNITED STATES           Part XIII         Supplemental Information (continued)		52-0954751	Page
012.			
ART XI, LINE 2D - OTHER ADJUSTMENTS:			
ETURNED GRANTS TO THIRD PARTIES	-432,968.		
RANTS RETURNED TO GMF FROM GRANTEE	44,629.		
OSS FROM FOREIGN CURRENCY EXCHANGES	-774,859.		
OTAL TO SCHEDULE D, PART XI, LINE 2D	-1,163,198.		

THE GERMAN MARSHALL FUND OF THE			
Schedule D (Form 990) UNITED STATES		52-0954751	Page 5
Part XIII Supplemental Information (continued)			
Part VII Investments - Other Securities. See Form 990, Part X, lir	ne 12.		
(a) Description of security or category		(c) Method of valuation	on.
(including name of security)	(b) Book value	Cost or end-of-year marke	et value
ALTERNATIVE INVESTMENTS - PRIVATE DEBT	3,898,093.	FMV	
ALTERNATIVE INVESTMENTS - PRIVATE REAL ESTATE	3,285,126.	FMV	

SCHEDULE F	Stateme	nt of Act	ivities Outside the U	nited Sta	ates –	OMB No. 1545-0047
			n answered "Yes" on Form 990, Part			2014
Department of the Treasury			Attach to Form 990.			Open to Public
Internal Revenue Service	Information ab	out Schedule F	(Form 990) and its instructions is at	www.irs.gov/f	orm990.	Inspection
Name of the organization					Employer ider	ntification number
THE GERMAN MARSHALL FU	ND OF THE					
UNITED STATES					52-0954751	
<b>Part I</b> General Info Form 990, Part IV		Activities Ou	tside the United States. Compl	ete if the orgar	nization answered	d "Yes" on
	,	n maintain recor	ds to substantiate the amount of its gr	ants and other	rassistance	
-	•		the selection criteria used to award the		· -	X Yes No
2 For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and c	other assistance of	outside the
3 Activities per Region. (T	he following Parl	t I, line 3 table c	an be duplicated if additional space is	needed.)		
(a) Region	(b) Number of		(d) Activities conducted in region	(e) If act	ivity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (e.g., fundraising, program		gram service,	expenditures for and
	in the region	independent contractors	services, investments, grants to		e specific type	investments
		in region	recipients located in the region)	of servi	ce(s) in region	in region
CENTRAL AMERICA AND						
THE CARIBBEAN			INVESTMENTS			52,283,850.
EUROPE (INCLUDING ICELAND & GREENLAND)	6	18	GRANTS TO RECIPIENTS			2 512 000
ICELAND & GREENLAND)	0	10	GRANIS IO RECIPIENIS			2,512,088.
RUSSIA AND						
NEIGHBORING STATES			GRANTS TO RECIPIENTS			2,453,154.
EAST ASIA AND THE						
PACIFIC	0	7	PROGRAM SERVICE	CONVENING		707,147.
EUROPE (INCLUDING						
ICELAND & GREENLAND)	3	32	PROGRAM SERVICE	CONVENING		8,113,511.
EUROPE (INCLUDING						
ICELAND & GREENLAND)	0	2	PROGRAM SERVICE	PUBLIC OPI	NION SURVEY	818,571.
EUROPE (INCLUDING						100.004
ICELAND & GREENLAND)	0	1	FUNDRAISING			126,804.
אדחחד האמש אזה						
MIDDLE EAST AND	1		DROCRAM SERVICE	CONVENTIO		2 220 210
NORTH AFRICA		60	PROGRAM SERVICE	CONVENING		2,329,219.
<b>3 a</b> Sub-total	10	60				69,344,344.
<b>b</b> Total from continuation		0				191 226
sheets to Part I		0				181,226.
c Totals (add lines 3a and 3b)	10	60				69,525,570.
anu 301	. 10					

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

Schedule F (Form 990) 2014

chedule F (Form 990)	UNITED STATE			52-09547	751 Page
Part I Continuat	tion of Activitie	s per Regio	<b>n.</b> (Schedule F (Form 990), Part I, line 3	3)	_
<b>(a)</b> Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditure for region
OUTH ASIA			PROGRAM SERVICE	CONVENING	181,2:
otals					181,2

UNITED STATES

52-0954751

Schedule F (Form 990) 2014

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			DEMOCRACY					
		ICELAND & GREENLAND)	BUILDING/SUPPORT FOR CIVIL SOCIETY	18,146.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	36,480.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	51,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,910.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,995.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	42,395.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	19,450.	ELECTRONIC FUND TRANSFER	0.		
			recognized as charities by the n 501(c)(3) equivalency letter			xempt by		219
	-					<b>&gt;</b>		0

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2014

Schedule F (Form 990)	UNITED	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,700.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	37,395.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	52,888.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,999.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	38,138.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,206.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	13,964.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	55,000.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED S	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,400.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	49,030.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	57,300.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	22,414.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	10,600.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	13,812.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	22,494.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	23,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,800.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED S	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	36,914.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	21,148.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	21,830.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	13,775.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,500.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	36,925.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,040.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	49,790.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,999.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED S	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	30,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	31,990.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	30,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	51,330.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,000.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED S	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,500.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	27,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	40,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	29,920.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,950.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,550.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED S	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	21,795.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	40,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	36,447.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	9,370.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	19,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	46,867.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED S	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	13,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	34,450.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	8,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	30,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	13,225.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	28,000.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED S	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	30,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	34,950.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	4,460.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	5,987.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	10,700.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	16,106.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	17,796.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED S	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	22,977.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	38,519.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	14,980.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	5,300.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	6,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,350.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	14,820.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	17,600.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	18,100.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED	MAN MARSHALL FUND ( STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	22,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,440.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	13,043.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,999.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	8,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	8,000.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	TRANSATLANTIC DIALOGUE	25,000.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990		STATES			52-09547	751		Page <b>2</b>
	/	Assistance to Organiza	ations or Entities Outside the	United States.			)	1 490 2
1 (a) Name of organiza	(b) IBS code section	(a) Pagian	(d) Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	TRANSATLANTIC DIALOGUE	51,847.	ELECTRONIC FUND TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	TRANSATLANTIC DIALOGUE	27,345.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	22,996.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	21,130.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	29,990.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,675.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	36,940.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	21,100.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,980.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (F	<sup>-</sup> orm 990)	UNITED :	MAN MARSHALL FUND STATES		52-0954751					
		f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	. (Schedule F (Form 9	90), Part II, line 1	)	Page <b>2</b>	
1 (a) Name of	organization	(b) IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,999.	ELECTRONIC FUND TRANSFER	0.			
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	23,810.	ELECTRONIC FUND TRANSFER	0.			
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	34,950.	ELECTRONIC FUND TRANSFER	0.			
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	38,800.	ELECTRONIC FUND TRANSFER	0.			
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	50,007.	ELECTRONIC FUND TRANSFER	0.			
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,999.	ELECTRONIC FUND TRANSFER	0.			
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	22,950.	ELECTRONIC FUND TRANSFER	0.			
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,999.	ELECTRONIC FUND TRANSFER	0.			
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,804.	ELECTRONIC FUND TRANSFER	0.			

Schedule F (Form 990)	UNITED :	MAN MARSHALL FUND STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	1 ugo <b>1</b>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(a) Pagian	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,990.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	21,950.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,500.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	22,526.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	23,207.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	35,000.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	23,595.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	29,123.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	29,700.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	UNITED :	MAN MARSHALL FUND STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States			)	- ugo <u>-</u>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(a) Pagian	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,980.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,920.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	55,705.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	22,750.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	74,720.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,890.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,986.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,999.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	52,265.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990		MAN MARSHALL FUND	OF THE		52-0954	751		Page <b>2</b>
	<i>c)</i>		ations or Entities Outside the	United States			)	Faye Z
1 (a) Name of organiz	(b) IBS code section	(a) Pagian	(d) Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	50,000.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	47,855.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	42,392.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	1,600.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	3,500.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	4,300.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	5,000.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	5,600.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	6,000.	ELECTRONIC FUND TRANSFER	٥.		

Schedule F (Form 990)	UNITED :	MAN MARSHALL FUND STATES	OF THE		52-0954	751		Page <b>2</b>
			ations or Entities Outside the	United States.			)	1 dgo <b>1</b>
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(a) Degion	(d) Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	6,100.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	6,860.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	7,000.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	7,555.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	7,850.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	8,000.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	8,000.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	8,800.	ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	9,000.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form	990)	UNITED S	STATES			52-0954	751		Page <b>2</b>
		Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	)	
1 (a) Name of orga		<b>b)</b> IRS code section nd EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	9,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	9,400.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	9,500.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	9,500.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	9,935.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	9,980.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	10,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	10,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	10,000.	ELECTRONIC FUND TRANSFER	0.		

Schodulo	F (Form 990)	UNITED S	MAN MARSHALL FUND	OF THE		52-09547	751		Page <b>2</b>
Part II				ations or Entities Outside the	United States.			)	Tage Z
<b>1</b> (a) Name	e of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(a) Pagian	(d) Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	10,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	10,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	10,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	11,015.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	11,920.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	11,950.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	11,965.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	11,980.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	11,990.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Forr	m 990)	UNITED S	STATES	or me		52-0954	751		Page <b>2</b>
		f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States			)	
1 (a) Name of org		(b) IRS code section and EIN (if applicable)		<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	11,995.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	11,995.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,175.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,195.	ELECTRONIC FUND TRANSFER	0.		

Schedule	F (Form 990)	UNITED S	STATES		52-0954751 Page						
Part II		f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States			)	1 490 2		
1	e of organization	<b>(b)</b> IRS code section and EIN (if applicable)		<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,550.	ELECTRONIC FUND TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	12,700.	ELECTRONIC FUND TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	13,000.	ELECTRONIC FUND TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	14,500.	ELECTRONIC FUND TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	14,900.	ELECTRONIC FUND TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,000.	ELECTRONIC FUND TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,000.	ELECTRONIC FUND TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,050.	ELECTRONIC FUND TRANSFER	0.				
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	15,750.	ELECTRONIC FUND TRANSFER	0.				

Schedule F (Form	n 000)	UNITED S	MAN MARSHALL FUND	OF THE		52-0954	751		Page <b>2</b>
				ations or Entities Outside the	United States			)	T age ∠
1 (a) Name of org		( <b>b)</b> IRS code section and EIN (if applicable)	(a) Pagian	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	16,200.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	17,805.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	18,500.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	18,607.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	18,660.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	18,825.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	19,970.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)		MAN MARSHALL FUND	OF THE		52-0954751 Pag					
		Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	)	1 490 2		
1 (a) Name of organiza	(b) IBS code section	(a) Pagian	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.				
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.				
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.				
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,000.	ELECTRONIC FUND TRANSFER	0.				
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,020.	ELECTRONIC FUND TRANSFER	0.				
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,020.	ELECTRONIC FUND TRANSFER	0.				
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,050.	ELECTRONIC FUND TRANSFER	0.				
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,875.	ELECTRONIC FUND TRANSFER	0.				
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,875.	ELECTRONIC FUND TRANSFER	0.				

Schedule F (Fo	orm 990)	UNITED S	STATES	or me		52-0954	751		Page <b>2</b>
		f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States			)	
<b>1</b> (a) Name of c		<b>(b)</b> IRS code section and EIN (if applicable)		<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,875.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	20,875.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	24,705.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		
			RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY	25,000.	ELECTRONIC FUND TRANSFER	0.		

Schedule F (Form 990)	THE GERI UNITED :	MAN MARSHALL FUND STATES	OF THE		52-09547	/51		Page <b>2</b>
	of Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line <sup>-</sup>	1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(a) Degion	<b>(d)</b> Purpose of grant	(e) Amount	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER	0.		
		RUSSIA AND NEIGHBORING STATES	DEMOCRACY BUILDING/SUPPORT FOR CIVIL SOCIETY		ELECTRONIC FUND TRANSFER	0.		

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Schedule F (Form 990) 2014

UNITED STATES

52-0954751

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

Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2014

Page 3

	THE GERMAN MARSHALL FUND OF THE		
Schedu	Ile F (Form 990) 2014 UNITED STATES	52-0954751	Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the		
	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	X Yes	🗌 No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With		
	a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To		
	Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	🗌 No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund		
	(see Instructions for Form 8621)	X Yes	No No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
5			
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		<u> </u>
	Foreign Partnerships (see Instructions for Form 8865)	X Yes	L No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions		
	for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2014

52-0954751

Page 5

## Schedule F (Form 990) 2014 UNITED STATES Part V Supplemental Information

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

PART I, LINE 2:

PRESCREENING OF POTENTIAL GRANTEES IS AN IMPORTANT PART OF THE MONITORING

OF GRANT FUNDS. THE RESPONSIBLE STAFF PERSON IS IN TOUCH WITH THE

GRANTEE AND CONDUCTS ON-SITE MONITORING AND/OR RECEIVES INTERIM WRITTEN

OR ORAL REPORTS. ADDITIONALLY, ADVISORY BOARD MEMBERS HELP AND CONDUCT

MONITORING UPON REQUEST OF THE GMF STAFF. THE GRANTEE IS UNDER

OBLIGATION TO FOLLOW THE GRANT BUDGET LINES ALLOCATED FOR SPECIFIC

SPENDING AND STAFF ROUTINELY MONITOR SPENDING. MANY OF GMF'S GRANTS ARE

INDEPENDENTLY REVIEWED BY EXTERNAL EVALUATORS AS ANOTHER DEGREE OF

OVERSIGHT. AT THE CLOSE OF THE GRANT PERIOD, THE GRANTEE IS REQUIRED TO

PROVIDE A DETAILED NARRATIVE AND FINANCIAL REPORT TO GMF.

PART I, LINE 3:

THE ORGANIZATION USES GAAP TO REPORT EXPENDITURES IN A FOREIGN REGION.

SCHEDULE I (Form 990)	Go	arants and Oth vernments, ar	nd Individua	ls in the Ŭni	ted States		OMB No. 1545-0047
Department of the Treasury	Comp	lete if the organization	Attach to For		't IV, line 21 or 22.		Open to Public
Internal Revenue Service	Informat	ion about Schedule I	•		t www.irs.cov/form0	00	Inspection
Name of the organization THE GERMAN MAI					- www.iis.govnoinis.	30.	Employer identification numbe
UNITED STATES							52-0954751
Part I General Information on Grants a	nd Assistance						
<b>1</b> Does the organization maintain records		-			-		
criteria used to award the grants or assis							X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to					anization answered "	Yes" to Form 990, Par	t IV, line 21, for any
recipient that received more than					(f) Method of	T	1
<b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN COUNCIL ON GERMANY							
L4 EAST 60TH STREET							
IEW YORK, NY 10022	13-1889074	501 (C ) (3)	25,000.	0.			TRANSATLANTIC DIALOGUE
MERICAN INSTITUTE FOR							
CONTEMPORARY GERMAN STUDIES - 1755							
MASSACHUSETTS AVE, NW -			05 000				
VASHINGTON, DC 20036	52-1309525	501 ( C )(3)	25,000.	0.			TRANSATLANTIC DIALOGUE
THE ASSOCIATION OF FORMER MEMBERS OF CONGRESS - 1401 K STREET NW -							
VASHINGTON, DC 20005	54-0883744	501 ( C )(3)	60,000.	Ο.			TRANSATLANTIC DIALOGUE
<ul> <li>2 Enter total number of section 501(c)(3) a</li> <li>3 Enter total number of other organization</li> </ul>							 

Schedule I (Form 990) (2014) UNITED STATES

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Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

**Part IV** Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

GMF'S APPLICATION PROCESS OF POTENTIAL GRANTEES IS AN IMPORTANT PART OF THE

MONITORING OF GRANT FUNDS. ONCE APPROVED, THE RESPONSIBLE STAFF PERSON

REVIEWS THE INTERIM WRITTEN REPORTS RECEIVED FROM THE GRANTEE. THE GRANTEE

IS REQUIRED TO FOLLOW THE GRANT BUDGET AS APPROVED. STAFF ROUTINELY

MONITORS SPENDING. AT THE CLOSE OF THE GRANT PERIOD, THE GRANTEE IS

REQUIRED TO PROVIDE A DETAILED NARRATIVE AND FINANCIAL REPORT TO GMF.

sc	HEDULE J	Compensation Information	1	OMB No.	1545-00	)47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	1/	I
		Compensated Employees Complete if the organization answered "Ves" on Form 990, Part IV, line 23		20	1-4	ľ
Depa	rtment of the Treasury	► Attach to Form 990.		Open to		
Interr	al Revenue Service			Inspe		
Nan	ne of the organizatio				on nu	mber
			52-095	4751		
Pa	rt I Question	s Regarding Compensation				1
		inte la suíze d'internet de la companya de la compa	000		Yes	No
та			990,			
	First-class or o	, jaka setter set				
	Travel for com					
		spending account Personal services (e.g., maid, chauffeur, o	liner)			
h	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
D	•			1b	х	
2						
2				2	x	
	trustees, and onice			2		
3	Indicate which if a	ny of the following the filing organization used to establish the compensation of the organiz-	ation's			
Ŭ						
	X Compensation					
	X Form 990 of c		committee			
			501111111111111111111111			
4	During the year, die	any person listed in Form 990. Part VII. Section A. line 1a. with respect to the filing				
-	organization or a re					
а	0			4a	х	
b						X
с			For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Attach to Form 990. Match to Form 990. mation about Schedule J (Form 990) and its instructions is at www.irs.gov/form900. The STATES         E GERMAN MARSHALL FUND OF THE If the organization provided any of the following to or for a person listed in Form 990, mplete Part III to provide any relevant information regarding these items. rel          i) if the organization provided any of the following to or for a person listed in Form 990, mplete Part III to provide any relevant information regarding these items. rel          iii the organization provided any of the following to or for a person listed in Form 990, moplete Part III to provide any relevant information regarding these items. rel          iii the organization provided any of the following to business use of personal residence moplete Part III to provide any relevant information regarding payment or f all of the expenses described above? If "No," complete Part III to explain ubstantiation prior to reimbursing or allowing expenses incurred by all directors, g the CEO/Executive Director, regarding the items checked in line 1a? ollowing the filing organization used to establish the compensation of the organization to a CO/Executive Director, but explain in Part III. e           ollowing the filing organization used to establish the compensation action 's skall that apply. Do not check any boxes for methods used by a related organization to a CO/Executive Director, but explain in Part III. ceo (EA)/Executive Director, but explain in Part III. for mage of control payment? nent from,			x
		nes 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		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
	contingent on the					
а	The organization?			5a		х
b	Any related organiz	ration?				Х
		r 5b, describe in Part III.				
6	For persons listed	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatic	n			
	contingent on the r	net earnings of:				
а	The organization?			6a		х
b	Any related organiz	ation?		6b		Х
		r 6b, describe in Part III.				
7	For persons listed	n Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	S			
				7		х
8		reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				
				8		x
9	If "Yes" to line 8, d	d the organization also follow the rebuttable presumption procedure described in				
	Regulations section	n 53.4958-6(c)?		9		
LHA		eduction Act Notice, see the Instructions for Form 990.		ule J (Forr	n 990	) 2014

UNITED STATES

Schedule J (Form 990) 2014

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(I)-(D)	in column (B) reported as deferred in prior Form 990	
(1) KAREN DONFRIED	(i)	248,259.	0.	635.	11,375.	7,793.	268,062.	0.	
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) DEBBI IWIG	(i)	200,667.	0.	1,314.	14,310.	5,306.	221,597.	0.	
VICE PRESIDENT AND CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) IVAN VEJVODA	(i)	246,083.	0.	11,881.	17,206.	17,749.	292,919.	0.	
VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) IAN LESSER	(i)	211,459.	0.	56,481.	14,888.	21,500.	304,328.	0.	
DIRECTOR, FOREIGN SECURITY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) STEPHEN SZABO	(i)	201,861.	Ο.	1,477.	6,900.	19,920.	230,158.	0.	
EXEC.DIR, TRANSATLANTIC AC	(ii)	0.	0.	Ο.	0.	0.	. 0.	0.	
(6) DAVID ROMLEY	(i)	179,754.	Ο.	253.	12,634.	1,365.	194,006.	0.	
VICE PRESIDENT, PARTNERSHI	(ii)	Ο.	Ο.	0.	0.	٥.	. 0.	0.	
(7) HEIKE MACKERRON	(i)	169,425.	0.	0.	6,237.	26,098.	201,760.	0.	
DIRECTOR, BERLIN OFFICE	(ii)	Ο.	Ο.	0.	0.	٥.	. 0.	0.	
(8) MARK FISCHER	(i)	116,352.	Ο.	43,167.	0.	7,129.	166,648.	0.	
DIRECTOR OF EUROPEAN OFFIC	(ii)	Ο.	Ο.	0.	0.	٥.	. 0.	0.	
(9) NEIL SUNILAS	(i)	109,087.	Ο.	48,507.	8,106.	13,114.	178,814.	0.	
VICE PRESIDENT	(ii)	Ο.	Ο.	0.	0.	٥.	. 0.	0.	
(10) R. CRAIG KENNEDY	(i)	185,945.	225,000.	100,924.	17,033.	18,794.	547,696.	0.	
FORMER PRESIDENT	(ii)	Ο.	Ο.	0.	0.	٥.	. 0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2014

)14 UNITED STATES

## Part III Supplemental Information

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

PART I, LINE 1A:

THE FOLLOWING EMPLOYEES RECEIVED HOUSING ALLOWANCE OR RESIDENCE FOR

PERSONAL USE, WHICH IS TAXABLE TO THE EMPLOYEES:

IVAN VEJVODA: \$5,274

IAN LESSER: \$27,792

MARK FISCHER: \$7,374

PART I, LINE 4A:

THREE EMPLOYEES RECEIVED A SEVERANCE PAYMENT FROM THE ORGANIZATION. IT IS

INCLUDED IN COMPENSATION AS REPORTED IN PART VII AND SCHEDULE J, PART II.

THE TERMS AND CONDITIONS OF THE AGREEMENTS ARE CONFIDENTIAL AND CAN BE MADE

AVAILABLE TO THE IRS UPON REQUEST. ALL AMOUNTS PAID DURING THE PERIOD

COVERED BY THIS RETURN ARE APPROPRIATELY INCLUDED IN FORM 990, PART VII,

AND IN SCHEDULE J, PART II AS A PART OF REPORTABLE COMPENSATION REPORTED ON

THEIR RESPECTIVE FORMS W-2.

Schedule J (Form 990) 2014

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SCHEDULE K Form 990) Department of the Treasury Internal Revenue Service	n 990) ment of the Treasury Revenue Service Attach to Form 990. Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Information about Schedule K (Form 990) and its instructions is at <u>www.irs.gov/form990</u> .											OMB No. 1545-0047 2014 Open to Public Inspection			
Name of the organizatio	n THE GERMAN MAR: UNITED STATES	SHALL FUND OF THE	1					-	-	<b>oloyer</b> 2-095	<b>identificati</b> 4751	on nur	nber		
Part I Bond Issues	;	i	i	1											
( <b>a</b> ) Iss	suer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	l (e) Issu	e price	(f) Descript	tion of purpose	(g) D	efeased	(h) On beha				
											of issuer	-	ncing		
									Yes	No	Yes No	Yes	No		
A DISTRICT OF COL	UMBTA	53-6001131	25483VDJ0	04/21/11	12 (	000 000	SEE PART V	FOR DETATLS		x	x		x		
<u>A 21011101 01 001</u>					,										
В															
С															
D															
Part II Proceeds															
				/			В	С			D				
	retired														
	legally defeased														
	issue				2,000,000.										
	reserve funds														
5 Capitalized interes	st from proceeds														
6 Proceeds in refun	•														
	om proceeds				261,785.										
	ent from proceeds														
	penditures from proceed														
	res from proceeds				7,925,012.										
	eds				295,117.										
	ceeds				3,518,086.										
3 Year of substantia	al completion				2012		1	+ I							
· · · · · · ·				Yes	No	Yes	No	Yes	No		Yes	No			
	sued as part of a current				x x			┨───┤							
	sued as part of an advan	<u> </u>			X					_					
	ation of proceeds been m			X	Δ			<u> </u>							
	aintain adequate books and recor	ds to support the final allocation	ion of proceeds?	A											
Part III Private Busi	ness Use														
1 Moo the exerci-	ion a partner in a partner	bin or a mambar of a	2110			Vaa	B	C Voc	Na		D	N.a			
-	ion a partner in a partners			Yes	No X	Yes	No	Yes	No	+	Yes	No			
	perty financed by tax-exer				Δ			┨────┤──		+					
•	e arrangements that may	-			х										
bond-financed pro	rwork Reduction Act No			70	Δ						dule K (For				

Schedule K (Form 990) 2014 UNITED STATES			52-09	54751				Page
Part III Private Business Use (Continued)		-						
		A 		B				
<b>3a</b> Are there any management or service contracts that may result in private	Yes	No X	Yes	No	Yes	No	Yes	No
business use of bond-financed property?								
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								1
counsel to review any management or service contracts relating to the financed property?								<b> </b>
c Are there any research agreements that may result in private business use of bond-financed property?		X						l
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								ł
counsel to review any research agreements relating to the financed property?								1
4 Enter the percentage of financed property used in a private business use by								
entities other than a section 501(c)(3) organization or a state or local government		%		%		%		
5 Enter the percentage of financed property used in a private business use as a result of								
unrelated trade or business activity carried on by your organization, another								
section 501(c)(3) organization, or a state or local government		%		%		%		
6 Total of lines 4 and 5		%		%		%		
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-								l
governmental person other than a 501(c)(3) organization since the bonds were issued?		x						ł
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
of		%		%		%		
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								ĺ
1.141-12 and 1.145-2?								ł
9 Has the organization established written procedures to ensure that all nonqualified								
bonds of the issue are remediated in accordance with the requirements under								ł
Regulations sections 1.141-12 and 1.145-2?	х							ł
Part IV Arbitrage		•				•		
		4		В	(	c		, ,
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		Х						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		x						
b Exception to rebate?	X							
c No rebate due?		x						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was				1 1		1 1		
performed								
3 Is the bond issue a variable rate issue?	X							i
<ul><li>4a Has the organization or the governmental issuer entered into a qualified</li></ul>								i
hedge with respect to the bond issue?		x						I
				1				
b Name of provider								
c Term of hedge				1		1 1		
d Was the hedge superintegrated?								
e Was the hedge terminated?							adula K (Ea	

chedule K (Form 990) 2014     UNITED STATES       Part IV     Arbitrage (Continued)			52-09	54/5L				Pag
		<u>۸</u>		3		<u> </u>		<u> </u>
	Yes	n No	Yes	No	Yes	No	Yes	, No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?	165	x	163		165		165	NO
b Name of provider								
c Term of GIC				<u> </u>				
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		v						
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?		x						
Part V Procedures To Undertake Corrective Action								
		4	I	3		2	C	)
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of								
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation is not available under applicable								
regulations?	х							
Part VI Supplemental Information. Provide additional information for responses to questions		e K (see insti	uctions)					
CHEDULE K, PART I, COLUMN (F)								
HE DISTRICT OF COLUMBIA ISSUED ITS \$12,000,000 AGGREGATE PRINCIPAL								
MOUNT VARIABLE RATE DEMAND REVENUE BONDS (THE GERMAN MARSHALL FUND OF								
HE UNITED STATES ISSUE) SERIES 2011 (THE BONDS), AND LOANED THE								
ROCEEDS TO GMF TO FINANCE CERTAIN COSTS OF THE RENOVATION, IMPROVING,								
EMODELING AND EQUIPPING OF ITS OFFICE BUILDINGS LOCATED AT 1700 18TH								
TREET NW, AND 1744 R. ST. NW, WASHINGTON D.C.								
INDEL NW, AND 1744 N. 51. NW, WASHINGTON D.C.								

SCHEDULE L						Interested						//B No.		
(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	-	28	Bb, or 28c, o ► Atta	or For ach to	m 990- Form <sup>g</sup>	s" on Form 990, Pa ·EZ, Part V, line 38 990 or Form 990-E EZ) and its instructio	Ba or E <b>Z</b> .	40b.			0	20	- o Put	-
Name of the organization								" www.irs.gov/fe			ident	spect		mbor
Name of the organization	1 THE GERMAN UNITED STA		ALL FUND	OF TH	115				-	0954'		mcau		innbei
Part I Excess E			s (section 5	01(c)(3	B), sect	ion 501(c)(4), and 5	501(c	)(29) organizatior			/ 51			
						art IV, line 25a or 2					)b.			
1 (a) Name of diaguali	fied person		ionship bet			lified		accription of tran	oootio	2		(d)	Corre	ected?
(a) Name of disquali	med person	pe	erson and o	rganiza	ation		(C) D	escription of tran	Isactic	or 1		Y	Yes No	
												_		
													_	
2 Enter the amount o	f tax incurred by	the orgar	nization mar	nagers	or disc	qualified persons d	luring	the year under						
										▶ \$				
3 Enter the amount o	f tax, if any, on lir	ne 2, abo	ve, reimburs	sed by	the or	ganization				▶ \$				
Part II Loans to	and/or Fron	n Intere	sted Per	sons	-									
						, Part V, line 38a oi	r Forr	n 990 Part IV lir	e 26 <sup>.</sup>	or if th	ne oras	nizati	on	
•	amount on Forn					, i alt i, illo ooa ol		n 000, r art rt, m	.0 20,	01 11 11	io orge	Lati	011	
(a) Name of	(b) Relation		) Purpose		oan to or n the	(e) Original		f) Balance due		In	(h) Approved by board or ogregoment			
interested person	with organiz	zation	of loan		ization?	principal amount			defa	ult?	? committee? a		agree	ement?
				То	From				Yes	No	Yes	No	Yes	No
							_							
							_							
							-							
							+							
							+-							
Total				1		> 9								1
Part III Grants o	r Assistance	Benefi	ting Inte	reste	d Pe	rsons.	Þ							
	the organization		-											
(a) Name of interes	sted person	inte	Relationship erested pers the organiz	son an		(c) Amount of assistance	f	<b>(d)</b> Type assistan				) Purp assista		f
										+				

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

Schedule L (Form 990 or 990-EZ) 2014

## Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	<b>(c)</b> Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
CREATIVE ENGAGEMENT LLC	SEE PART V	231,250.	SEE PART V		х

## Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: CREATIVE ENGAGEMENT LLC

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

CREATIVE ENGAGEMENT LLC IS AN ENTITY CO-OWNED BY FORMER PRESIDENT CRAIG

KENNEDY

(C) AMOUNT OF TRANSACTION: \$231,250

(D) DESCRIPTION OF TRANSACTION: CREATIVE ENGAGEMENT LLC PROVIDED

CONSULTING SERVICE TO GMF DURING THE YEAR.

(E) SHARING OF ORGANIZATION'S REVENUE: NO

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on	-EZ	OMB No. 1545-0047
Department of the Treasury	Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.		Open to Public
Internal Revenue Service	Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/f THE GERMAN MARSHALL FUND OF THE		Inspection
Name of the organization	UNITED STATES	52-095	identification number 4751
FORM 990, PART III,	LINE 1, DESCRIPTION OF ORGANIZATION MISSION:		
GMF DOES THIS BY SUE	PPORTING INDIVIDUALS AND INSTITUTIONS WORKING IN THE		
TRANSATLANTIC SPHERE	, BY CONVENING LEADERS AND MEMBERS OF THE POLICY		
AND BUSINESS COMMUNI	TIES, BY CONTRIBUTING RESEARCH AND ANALYSIS ON		
TRANSATLANTIC TOPICS	, AND BY PROVIDING EXCHANGE OPPORTUNITIES TO FOSTER		
RENEWED COMMITMENT 1	O THE TRANSATLANTIC RELATIONSHIP.		
IN ADDITION, GMF SUP	PPORTS A NUMBER OF INITIATIVES TO STRENGTHEN		
DEMOCRACIES. FOUNDED	) IN 1972 AS A NON-PARTISAN, NON-PROFIT ORGANIZATION		
THROUGH A GIFT FROM	GERMANY AS A PERMANENT MEMORIAL TO MARSHALL PLAN		
ASSISTANCE, GMF MAIN	TAINS A STRONG PRESENCE ON BOTH SIDES OF THE		
ATLANTIC. IN ADDITIC	ON TO ITS HEADQUARTERS IN WASHINGTON, DC, GMF HAS		
OFFICES IN BERLIN, P	PARIS, BRUSSELS, BELGRADE, ANKARA, BUCHAREST, AND		
WARSAW. GMF ALSO HAS	SMALLER REPRESENTATIONS IN BRATISLAVA, TURIN, AND		
STOCKHOLM.			
FORM 990, PART III,	LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:		
SKILLED STAFF WITH E	XTENSIVE EXPERIENCE IN THE REGION. THROUGH ITS		
GRANTMAKING, BTD SUE	PORTS A WIDE RANGE OF INNOVATIVE AND CREATIVE FORMS		
OF PUBLIC OUTREACH,	CROSS-BORDER AND REGIONAL EXCHANGES, AND		
INTER-COMMUNITY DIAI	OGUE.		
THE BLACK SEA TRUST	FOR REGIONAL COOPERATION		

THE BLACK SEA TRUST FOR REGIONAL COOPERATION (BST) PROMOTES GOOD

GOVERNANCE, STABILITY AND SECURITY IN THE WIDER BLACK SEA REGION. THE

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization THE GERMAN MARSHALL FUND OF THE	Page 2 Employer identification number
UNITED STATES	52-0954751
TRUST ENCOURAGES ACCOUNTABLE, TRANSPARENT, AND OPEN GOVERNMENTS;	
STRONG, EFFECTIVE CIVIC SECTORS; INDEPENDENT, OBJECTIVE AND	
PROFESSIONAL MEDIA; CONSTANT DIALOGUE BETWEEN GROUPS AND SOCIETIES IN	
CONFLICT AREAS; COHERENT AND EFFECTIVE EUROPEAN POLICIES IN AND ON THE	
REGION; STRONG TRANSATLANTIC COOPERATION IN PROMOTING STABILITY AND	
DEVELOPMENT OF THE REGION.	
FUND FOR BELARUS DEMOCRACY	
THE FUND FOR BELARUS DEMOCRACY MAKES SUPPORT AVAILABLE TO CITIZEN	
INITIATIVES, INDEPENDENT MEDIA, AND HUMAN RIGHTS GROUPS, ENABLING THEM	
TO RESIST THE PRESSURES OF A DICTATORIAL REGIME AND WORK TOWARDS ITS	
DEMOCRATIZATION. IN 2005-2014, IT HAS SUPPORTED SOME 650 PROJECTS WITH	
GRANTS TOTALING \$8.8 MILLION. THIS VOLUME HAS MADE THE FUND FOR BELARUS	
DEMOCRACY ONE OF THE LARGEST SUPPORT PROGRAMS AVAILABLE TO CIVIL	
SOCIETY IN BELARUS. SUPPORT UNDER THIS PROGRAM WILL BE PROVIDED FOR AS	
LONG AS REQUIRED FOR THE DEMOCRATIZATION AND EUROPEAN INTEGRATION OF	
BELARUS. KEY ACTIVITIES OF THE FUND INCLUDE SMALL-GRANT SUPPORT,	
SHARING OF TRANSITION EXPERIENCES, CAPACITY-BUILDING AND INTERNATIONAL	
ADVOCACY.	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:	
HELPS SHAPE A NEW TRANSATLANTIC AGENDA THAT CAN ADAPT TO CHANGING	
GLOBAL REALITIES AND NEW THREATS.	

ATLANTIC DIALOGUES

THE ATLANTIC DIALOGUES IS AN ANNUAL HIGH-LEVEL GATHERING OF THE MOST

Schedule O (Form 990 or 990-EZ) (2014)           Name of the organization         THE GERMAN MARSHALL FUND OF THE	Employer identification number
UNITED STATES	52-0954751
INFLUENTIAL PUBLIC- AND PRIVATE-SECTOR LEADERS FROM AROUND THE ATLANTIC	
BASIN FOR THREE DAYS OF OPEN, INFORMAL DISCUSSION ON CROSS-REGIONAL	
ISSUES RANGING FROM SECURITY TO ECONOMICS, MIGRATION TO ENERGY.	
PARTICIPANTS FROM NORTH AND SOUTH AMERICA, AFRICA, EUROPE, AND ASIA	
INCLUDE SENIOR OFFICIALS, BUSINESS LEADERS, OPINION SHAPERS AND THE	
MEDIA. AT THE ATLANTIC DIALOGUES PARTICIPANTS ANALYZE THE SHARED POLICY	
CHALLENGES SHAPING THE FUTURE OF FOUR CONTINENTS AROUND THE ATLANTIC	
BASIN AND EXPLORE POLICY RESPONSES. THROUGH INTERACTIVE PANELS AND	
SMALLER BREAK-OUT SESSIONS, THE ATLANTIC DIALOGUES AIMS TO CREATE A	
UNIQUE ATMOSPHERE FOR INTELLECTUAL EXCHANGE AND NETWORKING, AND ENABLE	
ALL PARTICIPANTS TO BE FULLY ENGAGED IN THE DEBATES.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	
MEDITERRANEAN	
THE MEDITERRANEAN POLICY PROGRAM ENCOURAGES OPEN, OBJECTIVE DEBATE AND	
ANALYSIS ON MEDITERRANEAN POLICY QUESTIONS, WITH AN EMPHASIS ON	
TRANSATLANTIC STAKES AND STRATEGIES. OUR WORK SPANS SOUTHERN EUROPE,	
TURKEY, NORTH AFRICA AND THE LEVANT, AND UNDERSCORES THE GROWING	
INTERDEPENDENCE BETWEEN THE MEDITERRANEAN AND ADJACENT REGIONS, AND THE	
CONNECTIONS BETWEEN MEDITERRANEAN, TRANSATLANTIC, AND GLOBAL DYNAMICS.	
IN ADDITION TO SENIOR POLICYMAKERS AND ESTABLISHED EXPERTS, GMF	
ENDEAVORS TO BRING NEW AND YOUNGER VOICES TO THESE DEBATES. THE	
MEDITERRANEAN POLICY PROGRAM IS CONDUCTED IN PARTNERSHIP WITH THE	
COMPAGNIA DI SAN PAOLO, THE OCP FOUNDATION AND NOBLE ENERGY. IT IS A	
FOCAL POINT FOR GMF'S COOPERATION WITH SOUTHERN EUROPEAN AND SOUTHERN	
MEDITERRANEAN INSTITUTIONS, INCLUDING IAI (ISTITUTO AFFARI	

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization THE GERMAN MARSHALL FUND OF THE UNITED STATES	Employer identification number 52-0954751
	52 0554751
INTERNAZIONALI) IN ROME. THE MEDITERRANEAN STRATEGY GROUP, THE CORE	
CONTRENING AGETUINT OF THE DECORAN ADDRESSES MODICE OF CONCERN TO	
CONVENING ACTIVITY OF THE PROGRAM, ADDRESSES TOPICS OF CONCERN TO	
GOVERNMENTS AND THE PRIVATE SECTOR, INCLUDING FOREIGN AND DEFENSE	
POLICY, ECONOMICS AND FINANCE, MARITIME COMMERCE, AND ENERGY SECURITY.	
THE EASTERN MEDITERRANEAN ENERGY PROJECT FOCUSES ON THE POLITICAL AND	
ECONOMIC IMPLICATIONS, RISKS, AND OPPORTUNITIES FLOWING FROM THE RECENT	
ENERGY DISCOVERIES IN THE EASTERN MEDITERRANEAN REGION.	
WIDER ATLANTIC	
THE WIDER ATLANTIC PROGRAM PROMOTES AN UPDATED STRATEGIC UNDERSTANDING	
OF THE INTERESTS, THREATS, AND OPPORTUNITIES PARTICULAR TO THE ATLANTIC	
COMMUNITY, NORTH AND SOUTH, EAST AND WEST. THIS UNDERSTANDING, AND THE	
COLLABORATION IT CAN LEVERAGE, INCREASINGLY WILL BE CRUCIAL TO	
ACHIEVING THE GOALS OF PROSPERITY AND SECURITY AT THE CORE OF THE	
TRADITIONAL TRANSATLANTIC RELATIONSHIP AND THE INTERESTS OF A MORE	
EXPANSIVE BASIN-WIDE COMMUNITY. THE ATLANTIC BASIN HAS RENEWED	
IMPORTANCE TO GLOBAL ORDER, AND THIS IS AN IMPORTANT MOMENT TO FOCUS	
ATTENTION ON THE WIDE SPECTRUM OF VALUES AND INTERESTS COMMON TO	
ATLANTIC SOCIETIES-AND TO EXPLORE HOW THOSE AFFINITIES CAN STRENGTHEN	
COOPERATION THAT PROTECTS THOSE INTERESTS AND ADVANCES SECURITY AND	
PROSPERITY BROADLY.	
TRILATERAL STRATEGY GROUP	

THE TRILATERAL STRATEGY GROUP IS A MULTI-YEAR PROJECT UNDERTAKEN BY GMF

IN PARTNERSHIP WITH TURKISH INDUSTRY AND BUSINESS ASSOCIATION (TUSIAD),

Schedule O (Form 990 or 990-EZ) (2014)	Page <b>2</b>
Name of the organization THE GERMAN MARSHALL FUND OF THE	Employer identification number
UNITED STATES	52-0954751
MEETS ROUGHLY TWICE EACH YEAR TO DISCUSS CRITICAL ISSUES AFFECTING	
TURKEY, THE EUROPEAN UNION, AND THE UNITED STATES AND ALTERNATES AMONG	
THOSE THREE LOCATIONS. TRILATERAL STRATEGY GROUP MEETINGS BRING	
TOGETHER A CORE GROUP OF AROUND 40 GOVERNMENT AND BUSINESS LEADERS AND	
OPINION SHAPERS, FOR A DAY AND A HALF OF INFORMAL, OFF-THE-RECORD	
DIALOGUE WITH THE OBJECTIVE OF IDENTIFYING EMERGING ISSUES AND THEIR	
POSSIBLE POLICY IMPLICATIONS.	
ASIA	
GMF'S ASIA PROGRAM ADDRESSES THE IMPLICATIONS OF ASIA'S RISE FOR THE	
WEST THROUGH RESEARCH, COMMENTARY, CONFERENCES, AND PUBLICATIONS.	
COVERING AN EXPANSIVE AREA - FROM THE HINDU KUSH TO THE PACIFIC - THE	
PROGRAM HAS REGION-WIDE PROJECTS AS WELL AS SPECIFIC INITIATIVES	
RELATED TO CHINA, INDIA, JAPAN, AND PAKISTAN. THE ASIA PROGRAM'S	
FELLOWS AND STAFF MANAGE AN ACTIVE SET OF POLICY PROGRAMS, CONDUCT	
IN-DEPTH RESEARCH, AND FREQUENTLY CONTRIBUTE ARTICLES AND COMMENTARY TO	
A WIDE RANGE OF PUBLICATIONS AND NEWS OUTLETS BOTH IN THE UNITED STATES	
AND INTERNATIONALLY.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
TRANSATLANTIC LEADERSHIP INITIATIVES	
GMF OFFERS A PORTFOLIO OF INITIATIVES FOR ESTABLISHED, MID-CAREER, AND	
NEXT GENERATION LEADERS WHO ARE COMMITTED TO STRENGTHENING	
TRANSATLANTIC RELATIONS. THESE INITIATIVES INCLUDE: TRANSATLANTIC	
INCLUSION LEADERS NETWORK, YOUNG TRANSATLANTIC NETWORK, MARSHALL	
MEMORIAL FELLOWSHIP, MANFRED W RNER SEMINAR AND ALUMNI ENGAGEMENT.	
432212 08-27-14	Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)	Page <b>2</b>
Name of the organization THE GERMAN MARSHALL FUND OF THE UNITED STATES	Employer identification number 52-0954751
EXPENSES \$ 1,842,394. INCLUDING GRANTS OF \$ 0. REVENUE \$ 22,148.	
URBAN AND REGIONAL POLICY PROGRAM	
GMF'S URBAN AND REGIONAL POLICY PROGRAM (URP) SUPPORTS LEADERS,	
POLICYMAKERS, AND PRACTITIONERS IN THE UNITED STATES AND EUROPE BY	
FACILITATING THE TRANSATLANTIC EXCHANGE OF KNOWLEDGE FOR BUILDING	
INCLUSIVE, SUSTAINABLE, AND GLOBALLY ENGAGED CITIES. URP WORKS TO:	
- CONNECT LOCAL LEADERS IN A TRANSATLANTIC NETWORK THAT EXCHANGES	
KNOWLEDGE AND INNOVATIVE SOLUTIONS;	
- COACH THE NETWORK IN TRANSLATING NEW IDEAS TO THEIR CITY'S UNIQUE	
CONTEXT; AND	
- CHAMPION THE SUCCESSES OF THE NETWORK BY LIFTING UP INDIVIDUAL	
INNOVATIONS AND NEW MODELS.	
URP WORKS IN SELECTED CITIES IN THE UNITED STATES AND EUROPE THAT SHARE	
A SET OF COMMON CHALLENGES AND DESIRE TO EXPLORE SOLUTIONS THROUGH	
TRANSATLANTIC EXCHANGE. URP ACTIVELY STEWARDS TRANSATLANTIC INITIATIVES	
THAT EXPLORE KEY ISSUES THROUGH HIGH-IMPACT GATHERINGS, PEER EXCHANGES,	
AND APPLIED RESEARCH. URP HAS AN EXTENSIVE AND SUCCESSFUL HISTORY OF	
WORKING COOPERATIVELY WITH PUBLIC, PRIVATE, AND NGO LEADERS TO APPLY	
THESE INSIGHTS TO IMPROVE LOCAL AND REGIONAL POLICIES AND PROGRAMS. IN	
ADDITION TO SUPPORTING POLICY INNOVATION, URP ACTIVITIES ALSO SUPPORT	
INDIVIDUAL PARTICIPANTS IN EXPANDING THEIR TRANSATLANTIC NETWORK,	
GROWING THEIR POLICY EXPERTISE, AND DEVELOPING THEIR LEADERSHIP SKILLS.	
EXPENSES \$ 1,659,134. INCLUDING GRANTS OF \$ 0. REVENUE \$ 11,388.	

Name of the organization THE GERMAN MARSHALL FUND OF THE UNITED STATES	Employer identification numbe
UNITED STATES	JZ-09J47J1
CONGRESSIONAL	
THE CONGRESSIONAL AFFAIRS PROGRAM INFORMS AND EDUCATES MEMBERS OF THE	
U.S. CONGRESS ON TRANSATLANTIC AFFAIRS. GMF DOES THIS THROUGH ITS	
GRANTMAKING, CONVENING, NETWORKING, AND RESEARCH ACTIVITIES. GMF	
PROVIDES A NONPARTISAN PLATFORM FOR TRANSATLANTIC LEARNING AMONG	
POLICYMAKERS ON ISSUES OF MUTUAL CONCERN.	
EXPENSES \$ 965,384. INCLUDING GRANTS OF \$ 10,000. REVENUE \$ 0.	
EUROPE	
GMF'S EUROPE PROGRAM ENGAGES IN THE DISCUSSION ON THE DRIVERS OF	
DISINTEGRATION AND INTEGRATION IN THE EU AND EXPLORES THE IMPLICATIONS	
OF THESE DEVELOPMENTS FOR THE TRANSATLANTIC PARTNERSHIP. GMF FURTHER	
CONTRIBUTES TO THE POLICY DEBATE ON THE FUTURE OF THE EU THROUGH ITS	
RESEARCH, CONVENING, AND NETWORKING ACTIVITIES.	
EXPENSES \$ 855,708. INCLUDING GRANTS OF \$ 54,348. REVENUE \$ 0.	
TRANSATLANTIC ACADEMY	
THE TRANSATLANTIC ACADEMY IS A RESEARCH INSTITUTION DEVOTED TO CREATING	
COMMON APPROACHES TO THE LONG-TERM CHALLENGES FACING EUROPE AND NORTH	
AMERICA. THE ACADEMY DOES THIS BY EACH YEAR BRINGING TOGETHER SCHOLARS,	
POLICY EXPERTS, AND AUTHORS FROM BOTH SIDES OF THE ATLANTIC AND FROM	
DIFFERENT DISCIPLINARY PERSPECTIVES TO RESEARCH AND ANALYZE A DISTINCT	
POLICY THEME OF TRANSATLANTIC INTEREST. WORKING TOGETHER FROM A	
COLLABORATIVE AND INTERDISCIPLINARY PERSPECTIVE, ACADEMY FELLOWS BRIDGE	
THE ATLANTIC ACADEMIC AND POLICY COMMUNITIES, AND USE RESEARCH.	

Name of the organization THE GERMAN MARSHALL FUND OF THE	Employer identification number
UNITED STATES	52-0954751
PUBLICATIONS, AND SEMINARS TO DEVELOP POLICY-RELEVANT CONTRIBUTIONS TO	
CRITICAL DEBATES IN NORTH AMERICA AND EUROPE.	
EXPENSES \$ 1,026,953. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
OTHER PROGRAMS	
EXPENSES \$ 1,679,183. INCLUDING GRANTS OF \$ 125,001. REVENUE \$ 0.	
FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:	
GERMANY, FRANCE, BELGIUM, ROMANIA,	
TURKEY, POLAND, TUNISIA, SERBIA	
FORM 990, PART VI, SECTION B, LINE 11:	
PRIOR TO FILING THE 990 WITH THE IRS, THE GERMAN MARSHALL FUND'S REVIEW OF	
THE 990 IS CONDUCTED BY THE OFFICERS OF THE ORGANIZATION (PRESIDENT,	
MANAGING DIRECTOR OF EXECUTIVE OFFICE, AND CHIEF FINANCIAL OFFICER), AND	
BOARD OF TRUSTEES.	
FORM 990, PART VI, SECTION B, LINE 12C:	
GERMAN MARSHALL FUND HAS A WRITTEN CONFLICT OF INTEREST POLICY AND ALL	
TRUSTEES, OFFICERS, AND EMPLOYEES ARE REQUIRED TO READ AND SIGN THE POLICY.	
THIS POLICY IS INTENDED TO HELP IDENTIFY SITUATIONS THAT PRESENT POTENTIAL	
CONFLICT OF INTERESTS AND TO PROVIDE PROCEDURES TO ADDRESS ANY POTENTIAL	
CONFLICTS. ADDITIONALLY, EACH TRUSTEE, OFFICER, AND EMPLOYEE IS REQUIRED	
TO ANNUALLY SIGN A STATEMENT AFFIRMING THE (1) RECEIPT OF THE CONFLICT OF	
INTEREST POLICY; (2) HAS READ AND UNDERSTANDS THE POLICY; AND (3) AGREES TO	
COMPLY WITH THE POLICY.	

Schedule O (Form 990 or 9			
Name of the organization	THE GERMAN MARSHALL FUND OF THE UNITED STATES		Employer identification number 52-0954751
GERMAN MARSHALL FUND	USES BOTH A COMPENSATION SYSTEM A	ND COMPARABILITY DATA	
TO DETERMINE COMPENS	ATION FOR OFFICERS AND EMPLOYEES.	THIS SYSTEM	
EVALUATES RELATIVE M	ARKETPLACE JOB WORTH OF THE POSITI	ON COMPARABLE TO	
SIMILAR POSITIONS OF	OTHER LOCAL ORGANIZATIONS. THE S	YSTEM ALSO EVALUATES	
THE RELATIVE WORTH O	F EACH POSITION WHEN COMPARING THE	REQUIRED LEVEL OF	
JOB COMPETENCIES AND	FORMAL TRAINING AND EXPERIENCE.	SENIOR MANAGEMENT AND	
HUMAN RESOURCES PERF	ORMS AN ANNUAL REVIEW OF ALL COMPE	NSATION.	
ADDITIONALLI, THE CO.	MPENSATION COMMITTEE OF THE BOARD	OF IROSIELS, REVIEWS	
AND APPROVES COMPENS	ATION FOR THE OFFICERS OF THE ORGA	NIZATION.	
FORM 990, PART VI, L	INE 17, LIST OF STATES RECEIVING C	OPY OF FORM 990:	
AK, AL, AR, CA, CO, CT, DC	,FL,GA,HI,IL,KS,KY,MA,MD,ME,MI,MN,	MS,NC,ND,NH,NJ,NM,NV	
NY,OH,OK,OR,PA,RI,SC	,TN,UT,VA,WA,WI,WV		
FORM 990, PART VI, S	ECTION C LINE 19:		
<u></u>			
GERMAN MARSHALL FUND	S MAKES AVAILABLE ITS GOVERNING DO	CUMENTS, AUDITED	
FINANCIAL STATEMENTS	, AND CONFLICT OF INTEREST POLICY	AVAILABLE TO THE	
GENERAL PUBLIC UPON	REQUEST.		
FORM 990, PART IX, L	INE 11G, OTHER FEES:		
OTHER PROFESSIONAL S	ERVICES:		
PROGRAM SERVICE EXPE	NSES	4,320,806.	
MANAGEMENT AND GENER	AL EXPENSES	400,603.	
FUNDRAISING EXPENSES		52,854.	
TOTAL EXPENSES		4,774,263.	
		4 774 262	
	FORM 990, PART IX, LINE 11G, COL A	4,774,263.	

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: 432212 08-27-14

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization THE GERMAN MARSHALL FUND OF THE		Page 2 Employer identification number
UNITED STATES		52-0954751
FOREIGN CURRENCY EXCHANGE LOSS	-774,859.	
RETURNED GRANTS TO THIRD PARTIES	-432,968.	
GRANTS RETURNED TO GMF FROM GRANTEE		
TOTAL TO FORM 990, PART XI, LINE 9	-1,163,198.	
FORM 990, PART XII, LINE 2C		
THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL	STATEMENTS AND	
SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED T	THE FINANCIAL	
STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.		
FORM 990, PART IX, LINE 18		
PAYMENTS OF TRAVEL OR ENTERTAINMENT EXPENSES FOR ANY	FEDERAL, STATE, OR	
LOCAL PUBLIC OFFICIALS - TO CARRY OUT ITS STATED MISS	ION, GMF CONVENES	
MULTIPLE EVENTS ANNUALLY TO ALLOW DIALOGUE AMONG GLOE	AL POLICY MAKERS	
ON TRANSATLANTIC ISSUES. TRAVEL EXPENSES FOR US OFFI	CIALS MAY INCLUDE	
AIRFARE, HOTEL, MEALS AND GROUND TRANSPORTATION WHILE	PARTICIPATING IN	
THESE EVENTS. GOVERNMENT OFFICIALS DO NOT RECEIVE A	N HONORARIUM OR	
OTHER COMPENSATIONS FOR ATTENDANCE. REQUIRED FINANCI	AL DISCLOSURES ARE	
MADE PROMPTLY IN ACCORDANCE WITH REGULATIONS.		

SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Description of the Treeserver	Attach to Form 990.
Department of the Treasury Internal Revenue Service	Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.
Name of the organizat	ion THE GERMAN MARSHALL FUND OF THE

UNITED STATES

OMB No. 1545-0047

2014
Open to Public

Employer identification number 52-0954751

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

	1	1	·	·	· · · · · · · · · · · · · · · · · · ·
(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
1700 18TH STREET, LLC - SINGLE MEMBER LLC -					
52-0954751, 1744 R STREET, NW, WASHINGTON,					THE GERMAN MARSHALL
DC 20009	REAL ESTATE	DISTRICT OF COLUMBIA	0.	4,592,553.	FUND OF UNITED STATES
THE TRANSATLANTIC FOUNDATION - 98-1154381	PROMOTE GREATER COOPERATION				
RUE DE LA LOI 155	AND UNDERSTANDING BETWEEN				THE GERMAN MARSHALL
BRUSSELS, BELGIUM 1040	THE U.S. AND EUROPE	BELGIUM	25,832.	73,796.	FUND OF UNITED STATES
	]				

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Exempt Code section	<b>(e)</b> Public charity status (if section	<b>(f)</b> Direct controlling entity	contr	<b>g)</b> 512(b)(13) rolled ity?
		501(c)(3))	Yes	No			
							<u> </u>
							<u> </u>
	1						

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

Schedule R (Form 990) 2014

Schedule R (Form 990) 2014 UNITED STATES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	managing partner?	-
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	General o managing partner?	)
	_										
	_										
	_										
	_										
	_										
	4										

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	i) tion
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	ent	
		country)		,				Yes	No

# Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

52-0954751

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THE GERMAN MARSHALL FUND OF THE

Schedule R (Form 990) 2014 UNITED STATES

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.										
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No							
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?										
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a									
	1b									
	1c									
	1d									
	1e									
f Dividends from related organization(s)	1f									
	1g									
h Purchase of assets from related organization(s)	1h									
i Exchange of assets with related organization(s)										
j Lease of facilities, equipment, or other assets to related organization(s)	1j									
k Lease of facilities, equipment, or other assets from related organization(s)	1k									
I Performance of services or membership or fundraising solicitations for related organization(s)	11									
m Performance of services or membership or fundraising solicitations by related organization(s)	1m									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n									
o Sharing of paid employees with related organization(s)	10									
p Reimbursement paid to related organization(s) for expenses	1p									
q Reimbursement paid by related organization(s) for expenses	1q									
r Other transfer of cash or property to related organization(s)	1r									
	1s									
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.										

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)			
(2)			
_(3)			
(4)			
_(6)	0.7		

52-0954751

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## THE GERMAN MARSHALL FUND OF THE

Schedule R (Form 990) 2014 UNITED STATES

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are a partners 501(c) orgs <b>Yes</b>	) all s sec. )(3) .? <b>No</b>	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	Dispr tior	n) opor- nate tions? No	(j) General o managing partner? Yes NC	<b>(k)</b> Percentage ownership

Schedule R (Form 990) 2014

Schedule	R (Form 990) 2014 UNITED STATES	52-0954751	Page 5
Part VI	R (Form 990) 2014 UNITED STATES		
	Provide additional information for responses to questions on Schedule R (see instructions).		

Form	990-Т	Exempt Organization Busi	ne	ss Income Ta	ax Returr	n	OMB No. 1545-0687
		(and proxy tax unde		· · ·	21 0015		0044
		For calendar year 2014 or other tax year beginning JUN 1, 201		, and ending MAY		- ·	2014
	tment of the Treasury al Revenue Service	<ul> <li>Information about Form 990-T and its instructi</li> <li>Do not enter SSN numbers on this form as it may be</li> </ul>				. F	Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if	Name of organization ( Check box if name cha				DEmpl	oyer identification number loyees' trust, see
	address changed	THE GERMAN MARSHALL FUND OF THE	•	,			ictions.)
ΒE	xempt under section	Print UNITED STATES					2-0954751
Х	501(c)(3)	or Number, street, and room or suite no. If a P.O. box, Type	see ir	structions.			ated business activity codes nstructions.)
	408(e) 220(e)	1744 R. STREET, NW					
	」408A	City or town, state or province, country, and ZIP or f	foreig	n postal code			
	529(a) ok value of all assets	WASHINGTON, DC 20009				90000	00
C at	end of year	F Group exemption number (See instructions.)	► 	FO4(a) truct	404(-) truct		Oth an trunch
		G Check organization type ► <u>X</u> 501(c) corporation n's primary unrelated business activity. ► PARTNERSHIP		501(c) trust	401(a) trust	L	Other trust
		the corporation a subsidiary in an affiliated group or a parent-				Ye	es X No
		and identifying number of the parent corporation.	-SubS	ulary controlled group?	F L		
		DEBORAH R. IWIG		Telenho	ne number 🕨 20	02-68	3-2650
	-	d Trade or Business Income		(A) Income	(B) Expenses		(C) Net
	Gross receipts or sale			.,	( ) 1		
	Less returns and allo		1c				
2	Cost of goods sold (S	Schedule A, line 7)	2				
3	Gross profit. Subtrac		3				
4 a	Capital gain net incor	ne (attach Schedule D)	4a				
		4797, Part II, line 17) (attach Form 4797)	4b				
C	Capital loss deductio	n for trusts	4c				
5		artnerships and S corporations (attach statement)	5	-763,484.	STMT 1		-763,484.
6	Rent income (Schedu	/	6				
7	Unrelated debt-finance	ed income (Schedule E)	7				
8		yalties, and rents from controlled organizations (Sch. F)	8				
9		f a section 501(c)(7), (9), or (17) organization (Schedule G)	9				
10		vity income (Schedule I)	10				
11		Schedule J)	11 12				
12		structions; attach schedule)	12	-763,484.			-763,484.
13 Pa		s 3 through 12		,			-705,404.
		contributions, deductions must be directly connected			income.)		
14	Compensation of of	ficers, directors, and trustees (Schedule K)				14	
15						15	
16		nance				16	
17						17	
18		edule)				18	
19	Taxes and licenses					19	250.
20		ions (See instructions for limitation rules)				20	
21		Form 4562)					
22		aimed on Schedule A and elsewhere on return				22b	
23	Contributions to def	arrad companyation plana				23 24	
24 25		erred compensation plans				24	
26	Excess exempt expe	ograms Inses (Schedule I)				26	
27	Excess readership cope	osts (Schedule J)				27	
28	Other deductions (a	ttach schedule)				28	
29	Total deductions	. Add lines 14 through 28				29	250.
30	Unrelated business	taxable income before net operating loss deduction. Subtract l	line 2	9 from line 13		30	-763,734.
31		eduction (limited to the amount on line 30)				31	, ,
32		taxable income before specific deduction. Subtract line 31 from				32	-763,734.
33		Generally \$1,000, but see line 33 instructions for exceptions)				33	1,000.
34		taxable income. Subtract line 33 from line 32. If line 33 is gr					
	line 32					34	-763,734.

Form 990-T (2014)	UNITED STATES						52-09547	51			Page <b>2</b>
Part III	Fax Computation										
35 Orga	nizations Taxable as Corpora	tions. See ins	structions for tax c	omputation.							
Contr	olled group members (section	ns 1561 and 1	563) check here 🖡	See inst	tructions and:						
	your share of the \$50,000, \$2	25,000, and \$	9,925,000 taxable	income brackets (	in that order):						
(1)	\$	(2) \$		(3) \$							
<b>b</b> Enter	organization's share of: (1) A	dditional 5%	tax (not more than	\$11,750) \$							
	dditional 3% tax (not more tha										
c Incon	ne tax on the amount on line 3	4					►	35c			٥.
36 <u>Trus</u> t	s Taxable at Trust Rates. See	instructions	for tax computatio	n. Income tax on t	he amount on I	ne 34 froi	m:				
	Tax rate schedule or							36			
37 Proxy	/ tax. See instructions						►	37			
								38			
	Add lines 37 and 38 to line 3	5c or 36, whi	chever applies					39			٥.
	Fax and Payments										
	gn tax credit (corporations atta					)a					
c Gener	ral business credit. Attach Fori	m 3800			4						
	t for prior year minimum tax (a										
e Total	credits. Add lines 40a throug	h 40d						40e			
41 Subtr	act line 40e from line 39	·····	<u> </u>					41			0.
	taxes. Check if from: 🔄 Fo	orm 4255 📖	_  Form 8611	_  Form 8697	Form 8866	Othe	er (attach schedule)	42			
								43			0.
	ents: A 2013 overpayment cr					la	440	-			
	estimated tax payments					lb		-			
C lax d	eposited with Form 8868					łc		-			
	gn organizations: Tax paid or v							-			
e Backi	up withholding (see instruction	1S)						-			
	t for small employer health ins	urance prem	iums (Attach Form	8941)		4f		-			
	credits and payments:		Form 2439		Total 🕨 4						
	Form 4136		Other					45			440.
45 Total	payments. Add lines 44a thro ated tax penalty (see instruction	uyii 44y	Earm 2220 ia atta	abad 🕨 🗔				45 46			440.
	l <b>ue.</b> If line 45 is less than the to							40			
	payment. If line 45 is larger that							47			440.
	the amount of line 48 you war						Refunded	40			0.
	Statements Regardii					•		-13			
	e during the 2014 calendar ye	-				-		count (h	nank	Yes	No
-	or other) in a foreign country		-	-		-					
										х	
2 During the t	If YES, enter the name of the ax year, did the organization receive instructions for other forms the orga	e a distribution t	from, or was it the grain	ntor of, or transferor to	o, a foreign trust?						х
3 Enter the a	amount of tax-exempt interest	received or a	ccrued during the	tax vear ►\$							
	A - Cost of Goods S				N/A						
1 Inventory	at beginning of year	1		6 Inventory a	at end of year			6			
2 Purchases		2			ods sold. Subtr						
3 Cost of lat	or	3		from line 5	. Enter here and	in Part I,	line 2	7			
	ection 263A costs (att. schedule)	4a		8 Do the rule	es of section 26	BA (with re	espect to			Yes	No
b Other cost	ts (attach schedule)	4b		property p	roduced or acq	ired for r	esale) apply to				
	d lines 1 through 4b	5		the organiz	zation?						
	nder penalties of perjury, I declare the rrect, and complete. Declaration of	nat I have exami	ned this return, includ	ing accompanying so	hedules and state	nents, and	to the best of my know	wledge a	nd belief, it is	true,	
Sign					i willon propuloi li		-	ay the IR:	S discuss thi	s return v	with
Here					LEF FINANCI	AL OFF			er shown belo		_
	Signature of officer		Date	Title			ir	structions	s)? X Y	es 📃	No
	Print/Type preparer's name		Preparer's sig	nature	Date			f PTI	N		
Paid							self- employed				
Preparer	YONG ZHANG, CPA								1249785		
Use Only	Firm's name RSM US I			autes (22			Firm's EIN 🕨	42	2-071432	5	
			IONAL DRIVE,	SUITE 400			Dharra	02 22	6 6400		
	IIIIIS AUULESS 🕨 MCLEA	AN, VA 22	TUZ				Phone no. 7	<u>vs-3</u> 3	6-6400		

Form 990-T (2014) UNITED S Schedule C - Rent Inc		rom Real	Propert	v and	Personal	Propert	v I eas	52-0954 Sed With Real P		Pag
. Description of property		Tom neur	ropert	y ana	reisonai	ropen			Tope	( <b>, , , , , , , , , , , , , , , , , , , </b>
(1)										
2)										
3)										
(4)										
(4)		2. Rent receive	ed or accrued							
(a) From personal property rent for personal proper 10% but not more	ty is more th	entage of nan	( <b>b</b> ) Fro	ent for pe	d personal proper rsonal property ex is based on profit	ceeds 50% c	entage or if			nected with the income in b) (attach schedule)
1)										
2)										
3)										
(4)										
otal		0.	Total				0.			
; <b>) Total income</b> . Add totals of c ere and on page 1, Part I, line 6		a) and 2(b). En					0.	(b) Total deductions Enter here and on page Part I, line 6, column (B)	1,	
chedule E - Unrelate				e (see i	nstructions)		••			
					2. Gross inc	come from		3. Deductions directly to debt-fir		
1	of dobt for	and over			or allocable	e to debt-	(a)	Straight line depreciation		(b) Other deductions
1. Description	of dept-finar	nced property			financed p	oroperty		(attach schedule)		(attach schedule)
[1)										
2)										
3)										
(4)										
4. Amount of average acquisiti debt on or allocable to debt-finar property (attach schedule)		of or a debt-fina	age adjusted basis or allocable to financed property tach schedule)		ocable to by column 5 ced property		<ul> <li>Gross income reportable (column 2 x column 6)</li> </ul>		<b>8.</b> Allocable deduction (column 6 x total of colum 3(a) and 3(b))	
(1)						%	, 0			
(2)						%				
						%				
(4)						%				
(*)								nter here and on page 1,		Enter here and on page 1
Fotals								Part I, line 7, column (A).	0.	Part I, line 7, column (B).
Total dividends-received dedu						••••••				
chedule F - Interest,	Annuit	ies, Royal	ties, and	d Ren	ts From Co	ontrolle	d Orga	nizations (see i	nstruc	tions)
					Controlled O		-			,
1. Name of controlled organiz	ation	<b>2.</b> Employer ide numb		Net un (loss) (s	<b>3.</b> related income ee instructions)	Total o paym	<b>4.</b> of specified ents made	5. Part of column included in the con organization's gross	itrolling	connected with income
1)										<u> </u>
2)										
3)										
4)										
onexempt Controlled Orgar	1								<u> </u>	
7. Taxable Income	8. Ne	t unrelated incom (see instructions)		<b>9</b> . Tot	al of specified pay made	ments	in the con	column 9 that is included trolling organization's ross income		Deductions directly connec with income in column 10
1)	+								+	
2)	+								1	
	+								-	
3)	+									
4)	1						Enter here	olumns 5 and 10. and on page 1, Part I,	Ent	Add columns 6 and 11. er here and on page 1, Part
otals							line	e 8, column (A). 0 .		line 8, column (B).

Form 990-T (2014) UNITED STATES

52-0954751

Page 4

# Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

1. Description of income	2. Amount of income	<ol> <li>Deductions directly connected (attach schedule)</li> </ol>	<b>4.</b> Set-asides (attach schedule)	<ol> <li>Total deductions and set-asides (col. 3 plus col. 4)</li> </ol>
(1)				
(2)				
(3)				
(4)				
	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).
Totals	0.			٥.

## Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.
Totals 🕨	0.	0.				0.
Schodulo I - Advortisi	na Incomo (	······································				

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	<b>2.</b> Gross advertising income	<b>3.</b> Direct advertising costs	<b>4.</b> Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) 🕨	Ο.	٥.				0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	<b>2.</b> Gross advertising income		Direct sing costs	<b>4.</b> Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		rculation come	6.1	Readership costs	7. Excess readership costs (column 6 minus column 5, but not mor than column 4).	s
(1)										
(2)										
(3)										
(4)										
Totals from Part I	0.		0.							0.
	Enter here and on page 1, Part I, line 11, col. (A).	page	ere and on 1, Part I, I, col. (B).						Enter here and on page 1, Part II, line 27.	
Totals, Part II (lines 1-5) 🕨	٥.		0.							Ο.
Schedule K - Compensatio	n of Officers,	Direct	ors, an	d Trustees (see ir	nstructio	ns)				
1. Name				2. Title		<ol> <li>Percertime devot</li> <li>busines</li> </ol>	ed to		pensation attributable related business	
(1)							%			
(2)							%			
(3)							%			
(4)							%			

Total. Enter here and on page 1, Part II, line 14

Ο.

▲

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS	STATEMENT 1
DESCRIPTION		AMOUNT
ENERGY & MINER HARVEST MLP IN		47,692. -637,797. 9.
	L ESTATE PARTNERS II-TE, LP MEZZANINE PARTNERS , LLC	-79,215. -85,746. -8,427.
TOTAL TO FORM	990-T, PAGE 1, LINE 5	-763,484.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
05/31/12	257.	0.	257.	257.
05/31/13	98,039.	0.	98,039.	98,039.
05/31/14	462,421.	0.	462,421.	462,421.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	560,717.	560,717.

FORM 990-T	NAME OF FOREIGN COUNTRY IN WHICH	STATEMENT	3
	ORGANIZATION HAS FINANCIAL INTEREST		

NAME OF COUNTRY

GERMANY FRANCE BELGIUM ROMANIA TURKEY POLAND TUNISIA SERBIA

Capital Gains and Losses ► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. ► Information about Schedule D (Form 1120) and its separate instructions is at www.irs.gov/form1120.

OMB No. 1545-0123

2 Δ Employer identification number

Name

THE GERMAN MARSHALL FUND OF THE

UNITED STATES				52-09	954751
Part I Short-Term Capital Ga	ins and Losses - As	sets Held One Year	r or Less		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	<b>(g)</b> Adjustments to gai or loss from Form(s) 894 Part I, line 2, column (g	9,	( <b>h</b> ) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked					
2 Totals for all transactions reported on					
Form(s) 8949 with <b>Box B</b> checked					-133.
3 Totals for all transactions reported on					
Form(s) 8949 with <b>Box C</b> checked					
4 Short-term capital gain from installment sales	s from Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or (loss) from like-kin	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach compu	tation)	SEE STATI	EMENT 4	6	( 18,085.)
7 Net short-term capital gain or (loss). Combin	ie lines 1a through 6 in column	h		7	-18,218.
Part II Long-Term Capital Ga	ins and Losses - Ass	ets Held More Tha	n One Year		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	( <b>g</b> ) Adjustments to gai or loss from Form(s) 894 Part II, line 2, column (g	9,	( <b>h</b> ) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with <b>Box D</b> checked					
9 Totals for all transactions reported on					
Form(s) 8949 with <b>Box E</b> checked					893.
10 Totals for all transactions reported on					
Form(s) 8949 with <b>Box F</b> checked					
11 Enter gain from Form 4797, line 7 or 9				11	551.
12 Long-term capital gain from installment sales	s from Form 6252, line 26 or 3	7		12	
13 Long-term capital gain or (loss) from like-kir				13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Combin	e lines 8a through 14 in colum	nh		15	1,444.
Part III Summary of Parts I an	d II				
16 Enter excess of net short-term capital gain (li	ne 7) over net long-term capita	Il loss (line 15)		16	
17 Net capital gain. Enter excess of net long-terr	n capital gain (line 15) over net	short-term capital loss (line	7)	17	
18 Add lines 16 and 17. Enter here and on Form	1120, page 1, line 8, or the pr	oper line on other returns		18	0.

Note. If losses exceed gains, see Capital losses in the instructions.

JWA

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) (2014)

Form	8949
	ent of the Treasury Revenue Service

Name(s) shown on return

# Sales and Other Dispositions of Capital Assets

Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.
 File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.



Sequence No. 12A Social security number or taxpayer identification no.

THE GERMAN MARSHALL FUND OF THE

52-0954751

Attachmer

UNITED STATES

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2. Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

 $\Box$  (C) Short-term transactions not reported to you on Form 1099-B

	on the first transactions no	St reported to yo	10111011111099	Б				
	(a) ption of property e: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	<b>(d)</b> Proceeds (sales price)	(e) Cost or other basis. See the <b>Note</b> below and	loss. If ye in column column (f	nt, if any, to gain or ou enter an amount (g), enter a code in ). See instructions.	(h) Gain or (loss). Subtract column (e) from column (d) &
			(MO., Gay, yr.)		see <i>Column (e)</i> in the instructions	<b>(f)</b> Code(s)	<b>(g)</b> Amount of adjustment	combine the result with column (g)
IRON POINT	REAL ESTATE							
PARTNERS I	I-TE, LP							<133.>
IRON POINT	REAL ESTATE							
PARTNERS I	I-TE, LP							
2 Totals. A	dd the amounts in colu	 umns (d), (e), (a) a	and (h) (subtract					
negative	amounts). Enter each t	total here and inc	lude on your					
	D, line 1b (if Box A at checked), or line 3 (if l		,					<133.>

**Note.** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2014)				Attachn	nent Sequer	nce No. <b>12A</b>	Page <b>2</b>
Name(s) shown on return. Name an THE GERMAN MARSHALL		er identification I	no. not required if			Social secur	ity number or ntification no.
UNITED STATES						52-095	4751
Before you check Box D, E, or F below, see wh Either may show your basis (usually your cost) instruments you bought in 2014 or later).							
Part II Long-Term. Transac Note. You may aggregate a codes are required. Enter th	all long-term transac	tions reported on I	Form(s) 1099-B shov	ving basis was report	ed to the IRS	and for which no a	djustments or
You must check Box D, E, or F below. If you have more long-term transactions than w (D) Long-term transactions re	ill fit on this page for or	ne or more of the boxe	es, complete as many fo	orms with the same box c	hecked as you i	need.	r each applicable box.
X (E) Long-term transactions re	ported on Form(s	) 1099-B showir	ng basis was <b>not</b> r			(6)	
(F) Long-term transactions no	1 · · · · · · · · · · · · · · · · · · ·			1	Adjustment	if any to gain or	
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	<b>(c)</b> Date sold or disposed (Mo., day, yr.)	<b>(d)</b> Proceeds (sales price)	(e) Cost or other basis. See the <b>Note</b> below and see <i>Column (e)</i> in the instructions	loss. If you in column (	(g) Amount of	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
IRON POINT REAL ESTATE						adjustment	with column (g)
PARTNERS II-TE, LP							893.
2 Totala Add the americante in and		and (b) (au bit					
2 Totals. Add the amounts in col negative amounts). Enter each Schedule D, line 8b (if Box D a	total here and inc	lude on your					
above is checked), or line 10 (if	Box F above is o	checked)	waa inaarraat an				893.

**Note.** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Form <b>4797</b>
Department of the Treasury

## Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) Attach to your tax return.

OMB No. 1545-0184	
2014	
Attachment	

	tment of the Treasury al Revenue Service	Informat	tion about Form	4797 and its se	eparate instruction	ons is at <sub>www.irs.c</sub>	ov/form4797		Attachment Sequence No. 27
Name	(s) shown on return							lde	ntifying number
THE	GERMAN MARSHALL	FUND OF THE							
UNI	TED STATES								52-0954751
	nter the gross procee								
(0	or substitute statemer	t) that you are ir	ncluding on line 2	2, 10, or 20				1	
Pa	rt I Sales or Other Th	Exchanges an Casualty	of Property I / or Theft-Mo	Used in a Tr ost Property	ade or Busine Held More Th	ess and Involution an 1 Year (see	ntary Conv instructions)	/ersi	ions From
2	( <b>a</b> )Descriptio of property	n	(b) Date acquired (mo., day, yr.)	<b>(C)</b> Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or ot basis, plus improvements expense of sa	and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
IRO	N POINT REAL EST	ATE PARTNER							
<u>II-'</u>	TE, LP								551.
3	Gain, if any, from Fo	rm 4684. line 39	)					3	
4	Section 1231 gain fi							4	
5	Section 1231 gain o							5	
6	Gain, if any, from lin							6	
7	Combine lines 2 three							7	551.
	Partnerships (exce instructions for Forn below.	pt electing larg	e partnerships)	and S corporat	tions. Report the g	gain or (loss) follow	ing the		
	Individuals, partner from line 7 on line 1 1231 losses, or they the Schedule D filed	l below and skip were recapture	o lines 8 and 9. If ed in an earlier ye	line 7 is a gain a r, enter the gai	and you did not ha in from line 7 as a	ave any prior year :	section		
8	Nonrecaptured net	section 1231 los	ses from prior ye	ars (see instruc	tions)			8	
9	Subtract line 8 from								
	line 9 is more than z	ero, enter the ar	mount from line 8	on line 12 belo	w and enter the g	ain from line 9 as a	long-term		
	capital gain on the S	Schedule D filed	with your return	(see instruction	s)			9	551.
Pa	rt II Ordinary	Gains and	Losses (see in:	structions)					
10	Ordinary gains and	osses not includ	ded on lines 11 th	nrough 16 (inclu	de property held	1 year or less):			
					1	1	1		

11	Loss, if any, from line 7						11	( )
12	Gain, if any, from line 7 or amount from	m line 8, if appl	icable				12	
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, lir						14	
15	Ordinary gain from installment sales	from Form 6252	, line 25 or 36 _				15	
16	Ordinary gain or (loss) from like-kind	exchanges from	Form 8824				16	
17	Combine lines 10 through 16						17	
18	For all except individual returns, ente					skip lines		
	a and b below. For individual returns, complete lines a and b below: a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter							
а								
	the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss							
	from property used as an employee							
	See instructions						18a	
b	Redetermine the gain or (loss) on line	e 17 excluding th	ne loss, if any, c	on line 18a. Enter he	ere and on			
	Form 1040, line 14						18b	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2014)

Form 4797 (2014) UNITED STATES

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Α В С D

52-0954751	
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Page 2

### Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions) (c) Date sold (b) Date acquired (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: (mo., day, yr.) (mo., day, yr.) These columns relate to the properties on lines 19A through 19D. ► **Property A Property B** Property C Property D 20 Gross sales price (Note: See line 1 before completing.) Cost or other basis plus expense of sale 21 22 22 Depreciation (or depletion) allowed or allowable Adjusted basis. Subtract line 22 from line 21 ..... 23 24 Total gain. Subtract line 23 from line 20. 25 If section 1245 property: a Depreciation allowed or allowable from line 22 ... 25a 25b **b** Enter the **smaller** of line 24 or 25a If section 1250 property: If straight line depreciation was used, enter -O- on line 26g, except for a corporation subject to section 291. a Additional depreciation after 1975 (see instructions) .... 26a **b** Applicable percentage multiplied by the **smaller** of line 24 or line 26a (see instructions) 26b c Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip Ines 26d and 26e 26c **F**\_\_\_ • A al al :+: .

d Additional depreciation after 1969 and before 1976	26d		
e Enter the smaller of line 26c or 26d	26e		
f Section 291 amount (corporations only)	26f		
<b>g</b> Add lines 26b, 26e, and 26f	26g		
<ul> <li>27 If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).</li> <li>a Soil, water, and land clearing expenses</li> </ul>	27a		
<b>b</b> Line 27a multiplied by applicable percentage	27b		
<b>c</b> Enter the <b>smaller</b> of line 24 or 27b	27c		
<ul> <li>28 If section 1254 property:</li> <li>a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)</li> </ul>	28a		
<b>b</b> Enter the <b>smaller</b> of line 24 or 28a	28b		
<ul> <li>29 If section 1255 property:</li> <li>a Applicable percentage of payments excluded from income under section 126 (see instructions)</li> </ul>	29a		
<b>b</b> Enter the <b>smaller</b> of line 24 or 29a (see instructions)	29b		

## Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30				
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31				
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion					
	from other than casualty or theft on Form 4797, line 6	32				
Part V Desenture Amountal Index Sections 170 and 2005(h)(2) When Business Lies Dreps to 50% or Less						

## Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions)

			(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33		
34	Recomputed depreciation (see instructions)	34		
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		
4180	12 12-18-14			Form <b>4797</b> (2014)