efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Return of Organization Exempt From Income Tax

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

DLN: 93493319123698 OMB No 1545-0047

Open to Public Inspection

Department of the Treasure Internal Revenue Service

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

A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017 Name of organization NEW AMERICA FOUNDATION D Employer identification number B Check if applicable ☐ Address change 52-2096845 ☐ Name change Doing business as NEW AMERICA ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) 740 15TH STREET NW NO 900 ☐ Amended return ☐ Application pending (202) 986-2700 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20005 G Gross receipts \$ 39,313,077 F Name and address of principal officer H(a) Is this a group return for ANNE-MARIE SLAUGHTER ☐Yes ☑No subordinates? 740 15TH STREET NW NO 900 H(b) Are all subordinates WASHINGTON, DC 20005 ☐ Yes ☐No included? Tax-exempt status 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW NEWAMERICA ORG L Year of formation 1998 M State of legal domicile DC Summary 1 Briefly describe the organization's mission or most significant activities TO BRING EXCEPTIONALLY PROMISING NEW VOICES & IDEAS TO THE FORE OF OUR NATION'S PUBLIC DISCOURSE Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 21 Number of independent voting members of the governing body (Part VI, line 1b) 4 21 5 292 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 6 21 7a 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 ${f b}$ Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Current Year** 37,653,997 8 Contributions and grants (Part VIII, line 1h) . . 36,528,168 **9** Program service revenue (Part VIII, line 2g) 15,563 11,785 75,652 59,632 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,354,349 1,587,663 37,973,732 39,313,077 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 2,020,119 44,150 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 19.399.499 20,609,623 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶1,159,800 **17** Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . 15,825,453 15,415,676 37,245,071 36,069,449 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 728,661 19 Revenue less expenses Subtract line 18 from line 12 . 3,243,628 Assets or d Balances

Beginning of Current Year

31,923,636

8,352,035

23,571,601

End of Year

39,928,890

13,140,792

26,788,098

Part II Signature Block

20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) .

Under penalties of perjury, I declare that I have examined this return, inclu-knowledge and belief, it is true, correct, and complete Declaration of prepa any knowledge

22 Net assets or fund balances Subtract line 21 from line 20 .



Signature of officer BARRY HOWARD CFAO Type or print name and title Print/Type preparer's name IVY BECKHAM

Paid **Preparer Use Only**

Preparer's signature IVY BECKHAM Firm's name CLIFTONLARSONALLEN LLP Firm's address ▶ 901 N GLEBE ROAD SUITE 200 ARLINGTON, VA 22203

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2017)					Page 2
Par	t IIII Statemen	t of Program Ser	vice Accomplis	hments		
	Check if Sch	nedule O contains a re	sponse or note to a	any line in this Part III .		🗹
1	Briefly describe the	organization's missio	n			
HON					E QUEST TO REALIZE OUR NAT: CIAL CHANGE, AND SEIZING T	
2	Did the organizatio the prior Form 990	, -	ficant program ser	vices during the year whi	ch were not listed on	☐ Yes ☑ No
	If "Yes," describe th					
3	Did the organizatio	5 ,	r make significant	changes in how it conduc	ts, any program	☐ Yes 🗹 No
	If "Yes," describe tl	hese changes on Sche	dule O			
4	Section $501(c)(3)$ a		ations are required	to report the amount of	rgest program services, as mea grants and allocations to others	
4a	(Code See Additional Data) (Expenses \$	12,212,781	including grants of \$) (Revenue \$)
4b	(Code) (Expenses \$	8,885,791	including grants of \$) (Revenue \$)
	See Additional Data					
4c	(Code) (Expenses \$	3,484,075	including grants of \$	25,000) (Revenue \$)
	See Additional Data					
	See Additional Data					
4d	Other program ser	vices (Describe in Sch	edule O)			
	(Expenses \$	4,628,198	ncluding grants of	\$ 19,15	0) (Revenue \$	11,785)
4e	Total program se	rvice expenses 🕨	29,210,8	45		

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

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Nο

Nο

Nο

Form **990** (2017)

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🖼 . . .

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

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?

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? 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?

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 💆 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? 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 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 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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 🛸 c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆 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 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🔧

12a Did the organization obtain separate, independent audited financial statements for the tax year? 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 🛸 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

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

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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 🛸

29

Part IV Checklist of Required Schedules (continued) Yes 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a No

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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

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,

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . $\$

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

20b

Page 4

Nο

Νo

No

Nο

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Nο

Yes

Yes

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25b

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Yes

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Yes

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

orm	990 (2017)					Page
Par	Statements Regarding Other IRS Filings and Tax Compliance					_
	Check if Schedule O contains a response or note to any line in this Part	V .				
_	5 · · · · · · · · · · · · · · · · · · ·		207		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	267			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
	Did the organization comply with backup withholding rules for reportable payments to vi (gambling) winnings to prize winners?	endors a	and reportable gaming	1c		
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	292			
b	If at least one is reported on line 2a, did the organization file all required federal employ Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (s			2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the		′	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation		ŀ	3b		
	At any time during the calendar year, did the organization have an interest in, or a sign		ŀ			
	financial account in a foreign country (such as a bank account, securities account, or oth			4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and	d Financ	cial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during t	he tax v	ear?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax	•	ŀ	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		•	30		
·	Tries, to line 3a or 3b, did the organization me Form 6666-17			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,0 solicit any contributions that were not tax deductible as charitable contributions?		did the organization	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that si not tax deductible?	uch con	tributions or gifts were	6b		
7	Organizations that may receive deductible contributions under section $170(c)$.					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution a provided to the payor?	nd part	y for goods and services • •	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provi	ıded? .	[7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property f Form 8282?	or which	n it was required to file	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a pers	onal be	nefit contract?			
				7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a persona		ŀ	7f		No
g	If the organization received a contribution of qualified intellectual property, did the orga required?	nızatıon	file Form 8899 as	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, di	d the or	ganization file a Form	- 9		
	1098-C ²			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess busine the year?	ess holdı	ngs at any time during			
_	,			8		
	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related Section 501(c)(7) organizations. Enter	u persor	1°	9b		
0	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	10a				
	Section 501(c)(12) organizations. Enter					
	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources					
_	against amounts due or received from them)	11b				
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 9	90 ın lıe	eu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1 1				
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	12b				
	Is the organization licensed to issue qualified health plans in more than one state? Note , additional information the organization must report on Schedule O	See th	e instructions for	13a		
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
4-	Did the organization receive any payments for indoor tanning services during the tax ye	ar? .		14a		No
4 a						

OHIII	990 (2017)			Page o
Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction 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 21			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			NI -
_		4 5		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		No
6 72	Did the organization have members or stockholders?			No
/ a	members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	<u>∍ Code</u>		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a 10b		No_
L1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			
	form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	124	165	
	conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L4 	Did the organization have a written document retention and destruction policy?	14	Yes	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		.,	
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	4.6-		NI -
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16a		No
		16b		
	ction C. Disclosure			
L7	List the States with which a copy of this Form 990 is required to be filed AL , AK , AR , CA , CO , CT , DC , FL , GA , , ME , MD , MA , MI , MN , MS , NV , NH , I , OK , OR , PA , RI , SC , TN , UT , VA , WA	ΜΝ [˙] ,	i, NY , 1	
L8	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply	-		
	Own website Another's website 🗹 Upon request 🗆 Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records SSUSAN DAILEY 740 15TH STREET NW SUITE 990 WASHINGTON, DC 20005 (202) 596-3351			

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Part VII	Compensation of Officers and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part VI	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	istees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
year .	e this table for all persons require		•	•							
of compens	of the organization's current off ation Enter -0- in columns (D), (E), and (F) if no	compe	nsatı	on w	as p	paid			-	
	of the organization's current key		•								
who receive	organization's five current high d reportable compensation (Box n and any related organizations										
	of the organization's former office e compensation from the organiz						pensat	ed e	employees who rece	ved more than \$10	0,000
	of the organization's former dire n, more than \$10,000 of reportab										2
	s in the following order individua ed employees, and former such p		ectors,	ınstıtı	ution	nal ti	rustee	s, of	ficers, key employe	es, highest	
Check 1	this box if neither the organizatio	n nor any relate	d organ	nzatio	on co	omp	ensate	d ar	y current officer, di	rector, or trustee	
	(A) Name and Title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		` MISC)	related organizations
See Addition	al Data Table										
							i .				

1662 34TH STREET NW WASHINGTON, DC 20007

compensation from the organization ▶ 8

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EGIL	Section A. Officers, Direct	tors, musices	s, key	EIIIP	Joye	<u>es,</u>	<u>, and r</u>	лığı	lest Compens	sate	u cilipioyees (, 00111	<u>inueu)</u>	
	(A) Name and Title	(B) Average hours per week (list any hours	than o	one bo	οχ, ι an of	ot che unles fficer	neck mo ess pers er and a etee)	son	(D) Reportable compensatio from the organization (on compensation from related (W- organizations (V		n I W-	Estima amount o compen- from organizat	ated of other sation the
		for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensatemployee	Former	- 2/1099-MISC	5)	2/1099-MISC))	related organizations	
			36-è	iustee			ensated							
See /	Additional Data Table			上		\perp		\perp		_		寸		
			-	\vdash	\vdash	\vdash	 	+			<u> </u>	\dashv		
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	Sub-Total	· · · · · · · · · · · · · · · · · · ·		.			*	_		\vdash		\mp		
				<u>. </u>			•		3,044,658	3		0		488,675
2	Total number of individuals (including of reportable compensation from the			se list	ed a	ıbov	e) who) rec	eived more than	า \$10	00,000			
3	Did the organization list any former line 1a? If "Yes." complete Schedule								ıghest compensa	ated	employee on		Yes	No
4	For any individual listed on line 1a, is organization and related organization individual	s the sum of repo	ortable o	comp	oensa	ation	n and o	other			ı the	3		No
5	Did any person listed on line 1a recei		mnensa	• •tion f	rom	· anv	· ·	ated	organization or	· indi	ividual for	4	Yes	
	services rendered to the organization									•		5		No
Se 1	ection B. Independent Contract Complete this table for your five high			rende	nt c	ontr	actors	that	received more	thar	±100 000 of cor	mner	reation	
	from the organization Report compe	ensation for the c									n's tax year	преп		
		(A) and business addre	ess								(B)		Comper	nsation
	OS PUBLIC AFFAIRS LLC								CONSUL SURVEY		G SVCS FOR ANNUA R ED	4L		214,750
NORW	MERRITT 7 WALK, CT 06851												<u> </u>	
	DURCES GLOBAL PROFESSIONALS								FINANC	Æ CU	ONSULTING SERVICE	ES		176,735
LOS A	ANGELES, CA 90074 E RESEARCH PARTNERS INC										AD POLICY PROG		-	152,945
	. 17TH STREET NW SUITE 301 HINGTON, DC 20036				_				RESEAR	₹Сн			<u> </u>	
HIREC	DPEN DIGITAL LLC								ED POLI		WRITING & VIDEO			152,500
	CHICAGO AVENUE SUITE 336 CAGO, IL 60611													
KRIST	STIN SHARP								CONSUL WORKE		G SVCS FOR WORK, k IT	,		105,000
1662	2 34TH STREET NW											,	1	

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

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

Part '	VIIII												
		Check if Schedule	e O contains a	a respo	onse or	note to any I		hıs Part VII	Ι.	(B)	 (C)	.	⊔ (D)
								revenue		lated or	Unrelated		Revenue
									fı	xempt unction	business revenue	ta	excluded from ax under sections
	1a	Federated campaigr	ns	1a					re	evenue			512-514
Grants Amounts		Membership dues .		1b	 								
Gra not	С	Fundraising events		1c									
	d	Related organization	าร	1d									
를 를	e	Government grants (co	ntributions)	1e		1,732,792							
Contributions, Gifts, and Other Similar A	f	All other contributions,											
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts no above	ot included	1f		35,921,205							
를함	g	Noncash contribution in lines 1a-1f \$	ns included	85,1	154								
Son	h -	Total.Add lines 1a-1				>							
						Business		7,653,997	T				Π
- m	2a ⊧	PUBLICATION SALES					900099		11,785	11	,785		
₽. ×	- b -												
106	c -												
Serv	d -			_									
an	е-			_									
Program Service Revenue	f A	All other program ser	vice revenue				11,785		I				
<u> </u>		otal.Add lines 2a-2f			>		_						
		nvestment income (ir milar amounts)			ınterest,	and other	.	59,63	2				59,632
	4 In	ncome from investme	ent of tax-exe	mpt b	ond pro	ceeds 🕨	•						
	5 Ro	oyaltıes				. •	•					\Box	
	65.0	Gross rents	(ı) Real		(11)	Personal	4						
	ua (SIOSS FEITES	1,5	87,663									
	b	Less rental expenses		0									
		Rental income or	1,5	87,663			-						
		(loss)	. (\				_	1,587,66	3				1 507 663
	u	Net rental income or	(ı) Securit			Other	1	1,567,00	1			\dashv	1,587,663
		Gross amount	(i) Securit		(11)	, other	-						
	ā	rom sales of assets other											
		han inventory											
	_	Less cost or other basis and sales expenses											
		Gain or (loss)					1						
	d	Net gain or (loss)		•		•							
ø.		Gross income from fu (not including \$		ents of									
ž.	c	contributions reporte		_	i								
eve		See Part IV, line 18 Less direct expenses		a b									
P. F		Net income or (loss)											
Other Revenue		Gross income from g		es		<u> </u>						\top	
	2	See Part IV, line 19		а] [
	bι	_ess direct expenses		ь			1						
	c۱	Net income or (loss)	from gaming	activit	ies .	. •	<u> </u>					\perp	
		Gross sales of invent returns and allowance											
				а									
	bι	ess cost of goods s	old	b									
	c l	Net income or (loss)		invent					+			\dashv	
	11a	Miscellaneous	Revenue		Busir	ness Code	\dashv						
	b -						+		+			\dashv	
	c -								+			+	
	d Ā	All other revenue .					1						
	e 1	Total. Add lines 11a-	-11d			•							
	12 7	Total revenue. See	Instructions					39,313,07	7	11,785		0	1,647,295
								37,313,07	<u>' </u>	11,703			Form 990 (2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all c	olumns All other ergs	nizations must comp	Note column (A)	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2	•	nete column (A)	🗹
Check if Schedule O contains a response or note to any	y line in this Part IX .	(B)	(0)	🖳
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	44,150	44,150		
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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,313,940	1,444,301	493,862	375,777
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	14,698,564	11,453,089	2,834,295	411,180
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,095,107	808,348	255,963	30,796
9 Other employee benefits	1,288,238	962,156	276,750	49,332
10 Payroll taxes	1,213,774	900,464	265,667	47,643
11 Fees for services (non-employees)				
a Management				
b Legal	60,583	26,610	17,163	16,810
c Accounting	41,900		41,900	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	6,006,949	5,201,942	742,962	62,045
12 Advertising and promotion				
13 Office expenses	801,649	154,837	613,715	33,097

36,923

4,236,871

1,496,158

723,982

1,050,630

108,455

218,495

143,734

112,208

377,139

36,069,449

0

1,724

2,201,858

1,315,344

313,289

27,724

14,203

4,088,744

252,062

29,210,845

35,199

48,740

2,868

51,786

24,231

5,495

1,159,800

Form 990 (2017)

2,035,013

132,074

407,825

1,050,630

108,455

218,495

64,224

73,774

-4,088,744

119,582

5,698,804

	para to or rot managers		i
5	Compensation of current officers, directors, trustees, and key employees	2,313,940	1,444,30
€	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	14,698,564	11,453,08
8	Pension plan accruals and contributions (include section 401	1,095,107	808,34

14 Information technology

20 Interest

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

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

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O)

a BAD DEBT EXPENSE

b PUBLICATIONS/SUBS

c STAFF RECRUITMENT

d M&G ALLOCATION

e All other expenses

15 Royalties .

17 Travel .

16 Occupancy .

23 Insurance .

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

26

27

28

29

30

31

32

33

34

iabilities 22

Fund Balances

Assets or

Net

662,254

6,287,697

18,261

388.722

39.928.890

2.206.863

89,471

10.844.458

13,140,792

4.061.052

22,727,046

26,788,098

39.928.890 Form **990** (2017)

(B) End of year

Page **11**

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

Part II of Schedule L . .

b Less accumulated depreciation

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Unrestricted net assets

Notes and loans receivable, net . Inventories for sale or use .

Prepaid expenses and deferred charges

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here > \(\subseteq \) and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

Other assets See Part IV, line 11

basis Complete Part VI of Schedule D

Intangible assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities.Add lines 17 through 25 .

1	Cash-non-interest-bearing	7,078,653	1	7,428,655
2	Savings and temporary cash investments	10,027,722	2	7,548,297
3	Pledges and grants receivable, net	13,016,921	3	16,858,390
4	Accounts receivable, net	205,153	4	736,614
_	Loans and other receivables from current and former officers, directors			

(A)

Beginning of year

5

6

7

8

9

10c

11

12

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14

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16

17

18

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22 23

24

25

26

27

28

29

30

31

32

33

34

570,100

568,292

446.903

31.923.636

2.490.590

1.639.545

82.704

89,471

4.049.725

8.352.035

5.379.121

18.192.480

23,571,601

31.923.636

9.892

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and

10a

10b

contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete

7,569,931

1,282,234

Page **12**

-264

Yes

Yes

Yes

2a

2b

2c

3а

3b

No

No

No

Form 990 (2017)

3	Revenue less expenses Subtract line 2 from line 1	3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	
5	Net unrealized gains (losses) on investments	5	
5	Donated services and use of facilities	6	

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

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?

audit or audits. explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

Form 990 (2017)

Schedule O

4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	

Par	XII Financial Statements and Reporting		_
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	26,788,098
9	Other changes in net assets or fund balances (explain in Schedule 0)	9	-26,867
8	Prior period adjustments	8	
7	Investment expenses	7	
6	Donated services and use of facilities	6	

☐ Cash ☑ Accrual ☐ Other

Both consolidated and separate basis

Both consolidated and separate basis

Additional Data

Software ID:

Software Version:

EIN: 52-2096845

Name: NEW AMERICA FOUNDATION

CONFLICT

Form 990 (2017) Form 990, Part III, Line 4a: DOMESTIC POLICY PROGRAMS EDUCATION POLICY PROGRAM THE EDUCATION POLICY PROGRAM USES ORIGINAL RESEARCH AND POLICY ANALYSIS TO HELP SOLVE THE NATION'S CRITICAL EDUCATION PROBLEMS, CRAFTING OBJECTIVE ANALYSES AND SUGGESTING NEW IDEAS FOR POLICYMAKERS. EDUCATORS. AND THE PUBLIC AT LARGE NEW AMERICA COMBINES A STEADFAST CONCERN FOR HISTORICALLY DISADVANTAGED POPULATIONS WITH A BELIEF THAT BETTER INFORMATION ABOUT EDUCATION CAN VASTLY IMPROVE BOTH THE POLICIES THAT GOVERN EDUCATIONAL INSTITUTIONS AND THE OUALITY OF LEARNING ITSELF THE EARLY & ELEMENTARY EDUCATION POLICY TEAM WORKS TO HELP ENSURE THAT ALL CHILDREN HAVE ACCESS TO A SYSTEM OF HIGH-QUALITY EARLY LEARNING OPPORTUNITIES FROM BIRTH THROUGH THIRD GRADE THAT PREPARE THEM TO SUCCEED IN SCHOOL AND IN LIFE THE PREK-12 INITIATIVE WORKS TO ENSURE THAT ALL CHILDREN ATTENDING PUBLIC ELEMENTARY AND SECONDARY SCHOOLS HAVE ACCESS TO AND RECEIVE HIGH-OUALITY EDUCATIONAL EXPERIENCES. WITH A PARTICULAR EMPHASIS ON IMPROVING EQUITY AND OUTCOMES FOR TRADITIONALLY UNDERSERVED STUDENTS NEW AMERICA'S HIGHER EDUCATION INITIATIVE WORKS TO MAKE HIGHER EDUCATION MORE ACCESSIBLE. INNOVATIVE. STUDENT-CENTERED. OUTCOMES-FOCUSED. AND EQUITABLE THE CENTER ON EDUCATION AND SKILLS IS A RESEARCH AND POLICY DEVELOPMENT PROGRAM FOCUSED ON THE INTERSECTION OF OUR HIGHER EDUCATION, JOB TRAINING, AND WORKFORCE DEVELOPMENT SYSTEMS THE CENTER IS DEDICATED TO BUILDING LEARNING-BASED PATHWAYS TO ECONOMIC OPPORTUNITY THAT CAN BEGIN INSIDE OR OUTSIDE OF FORMAL HIGHER EDUCATION DUAL LANGUAGE LEARNERS NATIONAL WORK GROUP PROVIDES A POLICY-DRIVEN FOCUS ON LANGUAGE LEARNERS IN THE EARLY AND ELEMENTARY YEARS THE WORK GROUP CONDUCTS RESEARCH, DEVELOPS RECOMMENDATIONS, AND DISSEMINATES NEW IDEAS TO POLICYMAKERS, PRACTITIONERS, AND THE PUBLIC TO IMPROVE OUTCOMES FOR DUAL LANGUAGE LEARNERS (DLLS), CHILDREN FROM BIRTH THROUGH AGE EIGHT WHO ARE LEARNING ENGLISH IN ADDITION TO THEIR NATIVE LANGUAGES THE LEARNING TECHNOLOGIES PROJECT SEEKS TO ENSURE THAT PUBLIC EDUCATION IS EQUITABLE AND OPEN SO ALL STUDENTS HAVE ACCESS TO THE INFORMATION, TOOLS, AND EXPERIENCES THEY NEED TO SUCCEED IN THE DIGITAL AGE POLITICAL REFORM PROGRAM. THE POLITICAL REFORM PROGRAM SEEKS TO DEVELOP NEW STRATEGIES AND INNOVATIONS TO REPAIR THE DYSFUNCTION OF GOVERNMENT, RESTORE TRUST, AND REBUILD THE PROMISE OF AMERICAN DEMOCRACY BY WORKING TOWARDS AN OPEN, FAIR DEMOCRATIC PROCESS, WITH EQUITABLE OPPORTUNITIES FOR FULL PARTICIPATION, IN ORDER TO RESTORE DYNAMISM AND GROWTH TO THE AMERICAN ECONOMY AND SOCIETY BETTER LIFE LAB. THE BETTER LIFE LAB IS LEADING THE NATIONAL CONVERSATION ABOUT THE EVOLUTION OF GENDER ROLES AND NORMS, FAMILY POLICY, AND HOW WE WORK AND LIVE THE PROGRAM SEEKS TO CREATE A PUBLIC ENVIRONMENT THAT'S HOSPITABLE TO CHANGE, THROUGH POWERFUL WRITING AND INFORMED DEBATE ABOUT CAREERS AND FAMILIES, THEIR STRENGTHS AND THEIR NEEDS THE GLOBAL GENDER PARITY INITIATIVE AIMS TO BROADEN HOW POLICYMAKERS AND THE GENERAL PUBLIC UNDERSTAND UNPAID WORK THROUGH SURVEYS AND JOURNALISM NATIONAL NETWORK NEW AMERICA IS OVERHAULING THE TRADITIONAL THINK TANK MODEL BY DEVELOPING A NEW MODEL OF CIVIC ENTERPRISE. WHICH EXPERIMENTS WITH IDEAS AND SOLUTIONS TO PUBLIC PROBLEMS ON THE GROUND THROUGH DIRECT ACTION AND COLLABORATIVE POLICY PROCESSES IN ADDITION TO THE RESEARCH AND WRITING THE ANALYSTS AND FELLOWS DO AROUND THE COUNTRY, THE TEAMS IN NEW YORK CITY, CALIFORNIA, INDIANAPOLIS, AND CHICAGO ARE DEDICATED TO DOING WORK RELEVANT TO-AND WITH-PEOPLE IN THEIR COMMUNITIES MUSLIM DIASPORA INITIATIVE THE MUSLIM DIASPORA INITIATIVE PROVIDES A FRESH PERSPECTIVE ON MUSLIM COMMUNITIES IN THE UNITED STATES THROUGH A NON-SECURITY LENS. THEY RESEARCH, ANALYZE, WRITE, CONVENE. ADVISE AND CONDUCT OUTREACH ON POLICY-RELEVANT TOPICS RELATED TO AMERICAN MUSLIM COMMUNITIES. THROUGH THESE ACTIVITIES. THE MUSLIM DIASPORA INITIATIVE SEEKS TO INFORM AND IMPROVE THE PUBLIC CONVERSATION ABOUT AMERICAN MUSLIM COMMUNITIES. AS WELL AS USE SCHOLARSHIP AND DATA TO INFORM POLICY MILLENNIALS INITIATIVE THE MILLENNIALS INITIATIVE EXAMINES THE CHALLENGES FACING THIS GENERATION OF YOUNG ADULTS (BORN BETWEEN 1980 AND 2000) IT ENCOMPASSES A PUBLIC POLICY FELLOWSHIP AND A PROGRAM OF IN-DEPTH POLICY RESEARCH FOCUSED ON SUPPORTING THE DEVELOPMENT OF A FORWARD-LOOKING POLICY AGENDA FAMILY CENTERED SOCIAL POLICY PROGRAM THE FAMILY CENTERED SOCIAL POLICY PROGRAM IS A COLLABORATIVE EFFORT TO HELP REIMAGINE SOCIAL POLICY FOR THE TWENTY-FIRST CENTURY. THE PRIMARY OBJECTIVES INCLUDE ASSESSING CURRENT CONDITIONS. EXPLORING ALTERNATIVES. AND PROPOSING FORWARD-LOOKING REFORMS TO INFORM POLICY DESIGN AND PUBLIC DISCOURSE RESILIENT COMMUNITIES PROGRAM THE RESILIENT COMMUNITIES

PROGRAM WORKS ALONGSIDE LOCAL GROUPS AND LEADERS TO DESIGN, BUILD, MANAGE, AND LEVERAGE COMMUNITY WIRELESS NETWORKS AS PLATFORMS TO STRENGTHEN RELATIONSHIPS AND ADDRESS RISKS AND CHALLENGES RESOURCE SECURITY PROGRAM NEW AMERICA'S RESOURCE SECURITY PROGRAM WORKS ON THE INTERSECTION OF SECURITY, PROSPERITY, AND NATURAL RESOURCES, OR "NATURAL SECURITY " NEW AMERICA IS LOOKING AT THE SHIFTING PATTERNS OF NATURAL SECURITY, FROM LOCAL COMMUNITIES TO GEOPOLITICS, AND WITH ITS PHASE ZERO PROJECT, SEEKS TO UNDERSTAND HOW CLIMATE CHANGE CAN PREDICT GLOBAL

Form 990, Part III, Line 4b:

THE POLICY DEBATES OF THE COMING DECADE

AND COMMUNICATIONS NETWORKS PARTNERING WITH COMMUNITIES, RESEARCHERS, INDUSTRY AND PUBLIC INTEREST GROUPS, NEW AMERICA PROMOTES AFFORDABLE, UNIVERSAL, AND UBIOUITOUS COMMUNICATIONS NETWORKS THE WIRELESS FUTURE PROJECT DEVELOPS AND ADVOCATES POLICY PROPOSALS TO PROMOTE UNIVERSAL, AFFORDABLE, AND UBIOUITOUS BROADBAND AND IMPROVE THE PUBLIC'S ACCESS TO CRITICAL WIRELESS COMMUNICATION TECHNOLOGIES THE RANKING DIGITAL RIGHTS PROJECT EVALUATES AND RANKS THE WORLD'S LARGEST INTERNET, MOBILE, AND TELECOMMUNICATIONS COMPANIES' COMMITMENTS,

TECHNOLOGY POLICY PROGRAMS OPEN TECHNOLOGY INSTITUTE THE OPEN TECHNOLOGY INSTITUTE STRENGTHENS COMMUNITIES THROUGH GROUNDED RESEARCH. TECHNOLOGICAL INNOVATION, AND POLICY REFORM NEW AMERICA CREATES REFORM TO SUPPORT OPEN SOURCE INNOVATIONS AND FOSTER OPEN TECHNOLOGIES

POLICIES AND PRACTICES AFFECTING FREEDOM OF EXPRESSION AND PRIVACY TECHCONGRESS IS A PROJECT TO EMBED TECHNOLOGISTS IN CONGRESSIONAL OFFICES TO BOLSTER IN-HOUSE TECH EXPERTISE IN GOVERNMENT THE MEASUREMENT LAB (M-LAB) PLATFORM AND CORRESPONDING TOOLKIT MEASURE INTERNET SPEEDS AND PERFORMANCE, SO THAT ANYONE CAN NOW SEARCH FOR LOCAL INFORMATION ABOUT INTERNET PROVIDERS AND SPEEDS, DOWNLOAD THE DATA THEMSELVES. AND

COMPARE LOCATIONS ACROSS THE WORLD PUBLIC INTEREST TECHNOLOGY PROGRAM THE PUBLIC INTEREST TECHNOLOGY PROGRAM CONNECTS TECHNOLOGISTS TO PUBLIC INTEREST ORGANIZATIONS TO IMPROVE SERVICES TO VULNERABLE COMMUNITIES AND STRENGTHEN LOCAL ORGANIZATIONS THAT SERVE THEM CYBERSECURITY INITIATIVE THE GOAL OF NEW AMERICA'S CYBERSECURITY INITIATIVE IS TO BRING THE KEY ATTRIBUTES OF NEW AMERICA'S ETHOS TO THE CYBERSECURITY POLICY CONVERSATION IN DOING SO, THE INITIATIVE PROVIDES A LOOK AT ISSUES FROM FRESH PERSPECTIVES, AN EMPHASIS ON CROSS-

DISCIPLINARY COLLABORATION, A COMMITMENT TO QUALITY RESEARCH AND EVENTS, AND DEDICATION TO DIVERSITY IN ALL ITS GUISES THE INITIATIVE SEEKS TO ADDRESS ISSUES OTHERS CAN'T OR DON'T AND CREATE IMPACT AT SCALE FUTURE TENSE. FUTURE TENSE IS A PARTNERSHIP BETWEEN NEW AMERICA, ARIZONA STATE

UNIVERSITY, AND SLATE MAGAZINE TO EXPLORE EMERGING TECHNOLOGIES AND THEIR TRANSFORMATIVE EFFECTS ON SOCIETY AND PUBLIC POLICY CENTRAL TO THE PARTNERSHIP IS A SERIES OF EVENTS THAT TAKE IN-DEPTH, PROVOCATIVE LOOKS AT ISSUES THAT, WHILE LITTLE UNDERSTOOD TODAY, WILL DRAMATICALLY RESHAPE

Form 990, Part III, Line 4c: INTERNATIONAL POLICY PROGRAMS INTERNATIONAL SECURITY PROGRAM THE INTERNATIONAL SECURITY PROGRAM AIMS TO PROVIDE EVIDENCE-BASED ANALYSIS OF SOME OF THE TOUGHEST SECURITY CHAILENGES FACING AMERICAN POLICYMAKERS AND THE PUBLIC ITS RESEARCH HAS ADDRESSED HOMEGROWN AMERICAN

TERRORISM, THE DEVELOPMENT AND NATURE OF ISIS' NETWORKS IN THE WEST, THE UNITED STATES' DRONE WARS ABROAD, THE COLLAPSE OF THE AMERICAN

MONOPOLY ON ARMED DRONES AND THE PROLIFERATION OF DRONES AROUND THE WORLD, AND THE PROFOUND CHANGES IN WARFARE WROUGHT BY NEW TECHNOLOGY AND SOCIETAL CHANGES THE PROGRAM ALSO EXAMINES REGIONAL SECURITY ISSUES. WITH A PARTICULAR FOCUS ON THE MIDDLE EAST AND SOUTH

ASIA INTERNATIONAL REPORTING PROJECT THE INTERNATIONAL REPORTING PROJECT PROVIDES FELLOWSHIP OPPORTUNITIES FOR JOURNALISTS TO REPORT INTERNATIONALLY ON CRITICAL ISSUES THAT ARE UNDER-COVERED IN THE NEWS MEDIA U.S.-IRAN INITIATIVE. THE U.S.-IRAN INITIATIVE COMBINES POLICY

DIALOGUE, RESEARCH, PRIVATE ROUNDTABLES, AND PUBLIC EVENTS, WITH THE AIM OF EXPLORING POSSIBLE GROUNDS FOR CONSTRUCTIVE ENGAGEMENT AND DEVELOPING MUTUALLY ACCEPTABLE STRATEGIES FOR ADDRESSING A RANGE OF ISSUES. IT REPRESENTS ONE OF THE FEW CONSISTENT BRIDGES FOR UNOFFICIAL

BILATERAL DIALOGUE ON NUCLEAR ISSUES, REGIONAL SECURITY, AND U.S.-IRAN RELATIONS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code) (Expenses \$ 2.412.972 including grants of \$) (Revenue \$ FELLOWS PROGRAM NEW AMERICA FELLOWS. THE NEW AMERICA FELLOWS PROGRAM SUPPORTS TALENTED JOURNALISTS, ACADEMICS AND OTHER PUBLIC POLICY ANALYSTS WHO OFFER A FRESH AND OFTEN UNPREDICTABLE PERSPECTIVE ON THE MAJOR CHALLENGES FACING OUR SOCIETY (Code) (Expenses \$ 2,215,226 including grants of \$ 19.150) (Revenue \$ ECONOMIC/FISCAL POLICY PROGRAMS BRETTON WOODS II THE BRETTON WOODS II PROGRAM IS ENGAGING SOVEREIGN WEALTH FUNDS. PENSION FUNDS, ENDOWMENTS, AND FAMILY OFFICES TO BUILD A NEW BUSINESS MODEL FOR SOCIAL FINANCE. THE INITIATIVE IS HARNESSING ANALYTICS, ADVOCACY, AND FINANCIAL TOOLS TO CHANNEL PART OF THE \$25 TRILLION CONTROLLED BY LONG-TERM ASSET HOLDERS INTO STRATEGIC INVESTMENTS IN SOCIAL IMPACT THAT ADDRESS THE ROOT CAUSES OF VOLATILITY THE PROGRAM IS ALSO HOME

TO THE BLOCKCHAIN TRUST ACCELERATOR. A PROJECT THAT EXPLORES HOW BLOCKCHAIN TECHNOLOGY CAN BE USED TO SOLVE SOCIAL IMPACT AND GOVERNANCE CHALLENGES OPEN MARKETS. THE OPEN MARKETS PROGRAM AT NEW AMERICA USES JOURNALISM TO PROMOTE GREATER AWARENESS OF THE POLITICAL AND ECONOMIC DANGERS OF MONOPOLIZATION, IDENTIFIES THE CHANGES IN POLICY AND LAW THAT CLEARED THE WAY FOR SUCH CONSOLIDATION, AND FOSTERS DISCUSSIONS WITH POLICYMAKERS AND CITIZENS AS TO HOW TO UPDATE AMERICA'S TRADITIONAL POLITICAL ECONOMIC PRINCIPLES FOR OUR 21ST CENTURY DIGITAL SOCIETY WWT COMMISSION THE WWT

COMMISSION ON WORK, WORKERS, AND TECHNOLOGY REIMAGINES AMERICA'S SOCIAL CONTRACT AND HOW THE EVOLUTION OF WORK IS CHANGING SOCIETY THROUGH A SERIES OF SCENARIO PLANNING EXERCISES WITH SMALL GROUPS OF TECH AND BUSINESS CEOS, WWT

EXPLORES HOW ARTIFICIAL INTELLIGENCE. THE ON-DEMAND ECONOMY, THE AGING WORKFORCE, AND OTHER TECHNOLOGICAL AND CULTURAL

CHANGES WILL TRANSFORM THE WAY WE WORK

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ including grants of \$) (Revenue \$ 11,785)

PUBLICATION SALES

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

		and a director/trustee/					'	Organización	organizations	nom the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
LENNY T MENDONCA CHAIRMAN	1 00	х		×				0	0	0
JEFFREY LEONARD TREASURER	1 00	х		х				0	0	0
DAVID G BRADLEY SECRETARY	1 00	х		х				0	0	0
ROBERT ABERNETHY BOARD MEMBER	1 00	X						0	0	0
DAVID BROOKS	1 00	×						0	0	0

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ROBERT ABERNETHY
BOARD MEMBER
DAVID BROOKS
BOARD MEMBER

MICHAEL M CROW

BOARD MEMBER

R BOYKIN CURRY

JAMES FALLOWS

BOARD MEMBER

TOM FRESTON

BOARD MEMBER

BOARD MEMBER

ATUL A GAWANDE MD MPH

........ BOARD MEMBER

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation compensation hours per amount of other week (list person is both an officer from the from related compensation from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	and a director/trustee)						organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
HELENE D GAYLE BOARD MEMBER	1 00	x						0	0	0	
WILLIAM W GERRITY BOARD MEMBER	1 00	х						0	0	0	
TED HALSTEAD BOARD MEMBER	1 00	х						0	0	0	
ZACHARY KARABELL BOARD MEMBER	1 00	x						0	0	0	
WALTER RUSSELL MEAD	1 00	¥						0	0	0	

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BOARD MEMBER
ZACHARY KARABELL
BOARD MEMBER
WALTER RUSSELL MEAD

BOARD MEMBER

BOARD MEMBER

STEVEN RATTNER

BOARD MEMBER

REIHAN SALAM

BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

JONATHAN SOROS

ASHLEY SWEARENGIN

.......

TODD PARK

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

and Independent Contractors

PETER BERGEN

KEVIN CAREY

SUZANNE DIMAGGIO

PROGRAM DIRECTOR

KEVIN BANKSTON

PETER SINGER

VP, DIR OF NATIONAL FELLOWS & INT'L SECURIT

......

DIRECTOR, EDUCATION POLICY PROGRAM

BARRY HOWARD MAY-DEC 2017

CHIEF FINANCIAL & ADMIN OFFICER

DIRECTOR, OPEN TECH INSTITUTE

SENIOR FELLOW AND STRATEGIST

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	,	u u u oo.o., uo.oo,					,	(14, 2,4,000	(14) 2/4000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
FAREED ZAKARIA BOARD MEMBER	1 00	x						0	0	0
ANNE-MARIE SLAUGHTER PRESIDENT & CHIEF EXECUTIVE OFFICER	40 00			x				504,776	0	33,041
TYRA MARIANI EXECUTIVE VICE PRESIDENT	40 00			х				319,917	0	39,605
CECILIA MUNOZ APR-DEC 2017 VICE PRESIDENT	40 00			х				204,813	0	6,948

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244,861

209,828

131,438

231,215

221,332

220,584

67,083

45,579

17,972

54,899

38,203

23,795

0

40 00

40 00

40 00

40 00

40 00

40 00

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and Independent Contractors (C) (A) (B) (D) (E) Name and Title Position (do not check more Reportable Reportable Average than one box, unless compensation compensation

40 00

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MEREDITH HANLEY

DIRECTOR, DEVELOPMENT

	week (list person is		မြိန်မျှ (mox				compensation from the organization (W- 2/1099- MISC)	compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations	
ELANA BROITMAN DIRECTOR, NEW AMERICA NYC	40 00					x		208,700	0	25,866
MARK SCHMITT DIRECTOR OF STUDIES	40 00				×			202,434	0	26,110
SHARON BURKE SENIOR ADVISOR	40 00					х		172,925	0	65,179

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

(F)

Estimated

44,395

171,835

efil	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9349331912369			
SCHEDULE A (Form 990 or 990EZ)				Public (Charity Staturganization is a sect	ion 501(c)(3) o mpt charitable	organization or trust.	ort	2017		
		f the Treasury	▶ Infe	ormation abou	Attach to Form states Attach to Form states Attach to Form	990 or 990-EZ		ictions is at	Open to Public Inspection		
Nam	e of th	nie Service he organiza A FOUNDATIO			<u>www.irs.g</u>	<u>ov/form990</u> .		Employer identific			
INE VV A	APILINICA							52-2096845			
	rt I				us (All organization : it is (For lines 1 thro			See instructions.			
1	n ganiz		•		•	-		/A\/;\			
_		•		·	sociation of churches						
2					1)(A)(ii). (Attach Sch	•	•				
3	Ш	·	•	·	vice organization desc			•			
4			esearch orga and state _	nization operat	ed in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(iii). Ei	nter the hospital's		
5			ition operate (iv). (Comple		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descril	ped in section 170		
6		A federal, s	tate, or local	government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).			
7	✓			mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in		
8		A communi	ty trust desc	ribed in section	170(b)(1)(A)(vi)	(Complete Part I	I)				
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a		
10		An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)									
11		An organiza	ition organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).			
12		more public	ly supported:	organizations of	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se (ction 509(a)(2). See section 509(a			
а		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by			
b		Type II. A manageme	supporting on t of the sup	rganization sup porting organiza	ervised or controlled i ation vested in the sar						
С		Type III f	unctionally i		supporting organizatio lons) You must com				ted with, its		
d		Type III n	on-function integrated	ally integrate The organizatio	d. A supporting organi n generally must satis t IV, Sections A and	Ization operated fy a distribution i	in connection wi requirement and	th its supported organ	` '		
e		Check this	, box if the org	ianization receiv	ved a written determir	nation from the I		pe I, Type II, Type II	functionally		
f	Enter			ion-functionally Lorganizations	integrated supporting	organización					
g				-	ipported organization(s)		_			
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
						Yes	No				
Tota	l										

instructions

(b)(1)(A)(ix)

Page **2**

	(Complete only if you che III. If the organization f						լualıfy ——	y under Part
S	ection A. Public Support							
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017		(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	19,432,725	20,219,546	33,232,227	36,528,168	37,653	,997	147,066,663
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge						\top	
4	Total. Add lines 1 through 3	19,432,725	20,219,546	33,232,227	36,528,168	37,653	,997	147,066,663
	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							36,695,483
	amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							110,371,180
S	ection B. Total Support	•	·	<u> </u>	<u>'</u>			
	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d) 2016	(e) 2017		(f) Total
7	Amounts from line 4	19,432,725	20,219,546	33,232,227	36,528,168	37,653	,997	147,066,663
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	283,550	78,946	319,256	1,405,177	1,647,295		3,734,224
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	151,911						151,911
11	Total support. Add lines 7 through 10							150,952,798
12		etc (see instruction	ons)	•	•	12		64,399
13	First five years. If the Form 990 is f	or the organization	's first, second, thu	rd, fourth, or fifth	tax year as a sect	ion 501(c)(3) orgai	nızatıon,
	check this box and $\boldsymbol{stop\ here}\ \ldots\ .$							
S	ection C. Computation of Publi	c Support Perc	entage					
	Public support percentage for 2017 (li			olumn (f))		14		73 120 %
	Public support percentage for 2016 Sc					15		76 630 %
16 a	33 1/3% support test—2017. If the	e organization did r	not check the box o	on line 13, and line	e 14 is 33 1/3% or	more, check	this b	
b	and stop here. The organization qua 33 1/3% support test—2016. If the				and line 15 is 33 1/	3% or more,	check	this
17a	box and stop here. The organization 10%-facts-and-circumstances tes is 10% or more, and if the organization Part VI how the organization meets	t— 2017. If the orgon meets the "facts	ganization did not d -and-circumstance	theck a box on lings" test, check this	box and stop her	r e. Explain	l	▶□
b	organization 10%-facts-and-circumstances te 15 is 10% or more, and if the organi Explain in Part VI how the organizati	zation meets the "f	facts-and-circumsta	ances" test, check	this box and stop	here.	ıe	▶ □
18	supported organization Private foundation. If the organizat	ion did not check a	box on line 13, 16	a, 16b, 17a, or 17	7b, check this box	and see		▶ □

20

Р	art III Support Schedule for	Organization	s Described in	Section 509(a	a)(2)			
	(Complete only if you c					o quali	fy unde	r Part II. If
_	the organization fails to	qualify under t	the tests listed I	pelow, please co	omplete Part II.)			
Se	ection A. Public Support							
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 20)17	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")						\longrightarrow	
2	Gross receipts from admissions, merchandise sold or services							
	performed, or facilities furnished in							
	any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that are							
	not an unrelated trade or business							
4	under section 513 Tax revenues levied for the						-	
4	organization's benefit and either paid							
	to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
_	the organization without charge							
6	Total. Add lines 1 through 5							
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
Ь	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							
_	Add lines 7a and 7b						-	
8	Public support. (Subtract line 7c						-	
•	from line 6)							
Se	ction B. Total Support							
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 20	117	(f) Total
_	(or fiscal year beginning in) ▶	(4) 2013	(5) 2011	(0, 2013	(4) 2010	(0) 2.		(1) Total
9	Amounts from line 6							
0a	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and							
	income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from							
	businesses acquired after June 30, 1975							
С	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is							
	regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets							
	(Explain in Part VI)							
13	Total support. (Add lines 9, 10c,							
	11, and 12)	u Hara a sura di di			<u> </u>	5011	-)(2)	
L4	First five years. If the Form 990 is for	r the organization	is first, second, th	nira, fourth, or fift	n tax year as a sect	on 501(c)(3) org	_
e-	check this box and stop here ection C. Computation of Public S	Support Bores	ntage					▶□
<u> </u>	Public support percentage for 2017 (lin			column (f))		15		
15 16	Public support percentage from 2016 S							
		•	•			16		
	ection D. Computation of Investi Investment income percentage for 201			line 13 column (f))	1 4 - 1		
L7	investment income percentage for 201	is (iiiie toc, colul	iii (i) aivided by	mie 15, column (1	//	17		

Investment income percentage from 2016 Schedule A, Part III, line 17 18 19a 331/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is

not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

ightharpoons

Part I. complete Sections A and C. If you checked 12c of Part I. complete Sections A. D. and E. If you checked 12d of Part I. complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

			Yes	No
1	of the organization's supported organizations listed by name in the organization's governing documents? 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			
	ın section 509(a)(1) or (2)	2		

	they describe in the supported organization and accignated by diase or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied			

		~	l 1	
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		
С	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			

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
С	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	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or	4b	

	· ·			
С	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			
	If Tes, explain in Part v1 what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported			

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

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

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes."

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

amendment to the organizing document)

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below

6

7

8

10a

Scn	hedule A (Form 990 or 990-E2) 2017		P	Page 5
Pa	art IV Supporting Organizations (continued)			
			Yes	No
	1 Has the organization accepted a gift or contribution from any of the following persons?			
а	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11-		
L		11a 11b	-	
	 A family member of a person described in (a) above? 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	\vdash	
	Section B. Type I Supporting Organizations	110		
_	Section 5. Type 1 Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	Part e or		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) the operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such beneficiarried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization			
- 5	Section C. Type II Supporting Organizations		<u> </u>	Ь——
	/pe expressions enganement		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustee 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)	ees of 1		
_	Section D. All Type III Supporting Organizations			
	Section D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy Form 990 that was most recently filed as of the date of notification, and (iii) 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 is organization's investment policies and in directing the use of the organization's income or assets at all times during the year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard			
S	Section E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructions)		
	The organization satisfied the Activities Test Complete line 2 below			
	b The organization is the parent of each of its supported organizations. Complete line 3 below			
	c The organization supported a governmental entity Describe in Part VI how you supported a government entit	y (see ınstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those suppor 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	rted 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 involvement			
3	Parent of Supported Organizations Answer (a) and (b) below.	20		
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of ea the supported organizations? Provide details in Part VI. 	ch of 3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b		

Sched	dule A (Form 990 or 990-EZ) 2017			Page 6
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
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 Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	ntegrat	ed Type III supporting or	ganization (see

7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to widetails in Part VI) See instructions	hich the organization is respon	sive (provide	
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line			

8 Distributions to attentive supported organizations to wh details in Part VI) See instructions	iich the organization is respon	sive (provide	
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI)			

details in Part VI) See instructions	nen trie organization is respon	Sive (provide	
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			

Schedule A (Form 990 or 990-EZ) (2017)

b From 2013. **c** From 2014. **d** From 2015. e From 2016. f Total of lines 3a through e

instructions)

See instructions

31 and 4c 8 Breakdown of line 7

\$

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. **b** Excess from 2014. . . . c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

Additional Data

Software ID: Software Version:

EIN: 52-2096845

Name: NEW AMERICA FOUNDATION

Page 8

Schedule A (Form 990 or 990-EZ) 2017 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1,

Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test

SCHEDULE C (Form 990 or 990-

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493319123698

Department of the Treasury Internal Revenue Service

EZ)

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		Form 990, Part IV, Line 3, or Form 9		e 46 (Poli	tical Campaig	n Ac	ctivities), the	n
		nplete Parts I-A and B Do not complete 01(c)(3)) organizations Complete Parts		Do not co	mplete Part I-I	3		
	Section 527 organizations Complet		TA dia o below	D0 1101 00	implete i dit i-i	_		
		n Form 990, Part IV, Line 4, or Form 9						
		have filed Form 5768 (election under s						
		: have NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax						
	xy Tax) (see separate instruction		i) (see separate ii	isti uctioi	is joi roilli s	30-L	د, ۲۵۱۱ ۷ , ۱۱۱۱۱	E 33C
	Section 501(c)(4), (5), or (6) organiz							
	ne of the organization				Employer id	entif	fication num	ıber
NEW	V AMERICA FOUNDATION				52-2096845			
Par	t I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is	a sectio		niza	tion.	
1	Provide a description of the organ "political campaign activities")	ization's direct and indirect political can	npaign activities in	Part IV (s	ee instruction	s for	definition of	
2	Political campaign activity expend	itures (see instructions)			>	\$ _		
3	Volunteer hours for political camp	aign activities (see instructions)				_		
Par	t I-B Complete if the orga	nization is exempt under sectio	n 501(c)(3).					
1	Enter the amount of any excise ta	ex incurred by the organization under se	ection 4955		>	\$		
2	Enter the amount of any excise ta	ex incurred by organization managers ur	nder section 4955		•	\$ _		
3	If the organization incurred a sect	tion 4955 tax, did it file Form 4720 for t	hıs year?				☐ Yes	□ No
4a	Was a correction made?						☐ Yes	□ No
b	If "Yes," describe in Part IV							
Par	t I-C Complete if the orga	nization is exempt under sectio	n 501(c), exce	pt secti	on 501(c)(:	3).		
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	ion activiti	es 🕨	\$ _		
2	Enter the amount of the filing org function activities	anızatıon's funds contributed to other o	rganizations for se	ection 527	exempt	·		
_			5 4430 POL	. 47		ቅ.		
3	·	es Add lines 1 and 2 Enter here and or	1 Form 1120-POL,	line 1/b	•	\$.		
4	Did the filing organization file For	•					☐ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere se (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing orga olitical org	nization's fundanization, suc	ds A	lso enter the	
	(a) Name	(b) Address	(c) EIN	(d) Am	ount paid from	Т	(e) Amount	of political
	()	()		filing	organization's If none, enter -0-		contributions and promp directly deliv separate p organization enter -	s received otly and vered to a political If none,
1								
2								
3								
4								
5								
6								

1,000,000

5,029

250,000

1,000,000

80,297

250,000

1,000,000

158,148

250,000

1,000,000

134,008

250,000

Schedule C (Form 990 or 990-EZ) 2017

4,000,000

6.000.000

377,482

1,000,000

1,500,000

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

activity

Volunteers?

1

(b)

Amount

(a)

No

Yes

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? **b** If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

Supplemental Financial Statements

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

DLN: 93493319123698 OMB No 1545-0047

> Open to Public **Inspection**

(Form 990)

► Attach to Form 990. Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** NEW AMERICA FOUNDATION 52-2096845 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items 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 on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

Par		Organizations Main	ntaining Coll	ections of	Art, Hist	orical T	reas	ures, or	Other	Similar As	<u>sets (</u>	continued))
3	Using items	the organization's acquis (check all that apply)	ition, accession	, and other re	ecords, che	ck any o	f the fo	ollowing th	nat are a	significant u	se of its	s collection	1
а		Public exhibition			(d 🗆	Loar	or excha	nge prog	ırams			
b		Scholarly research			(e 🗌	Othe	er					
c		Preservation for future ge	enerations										
4	Provi Part)	de a description of the org	janization's coll	ections and e	xplaın how	they fur	ther th	e organiz	ation's ex	kempt purpos	se in		
5	Durin	ig the year, did the organi is to be sold to raise funds								ular	□ Ye	es 🗆	No
Pai	rt IV	Escrow and Custod Complete if the organ X, line 21.			on Form 9	90, Par	t IV, I	ıne 9, or	reporte	ed an amou	nt on I	orm 990	, Part
1a		e organization an agent, tr ded on Form 990, Part X?	rustee, custodia	in or other in	termediary	for contr	ibution	ns or othe	r assets	not	☐ Ye	es 🗸	No
b	If "Y∈	es," explain the arrangeme	ent in Part XIII	and complete	the follow	ing table				Ar	mount		
c	Begir	nning balance		•				F	1c		-		
d	Addıt	ions during the year						F	1d		-		
е	Dıstrı	butions during the year						Ī	1e				
f	Endır	ng balance							1f				_
2 a		he organization include an	amount on Fo	m 990, Part 1	X, line 21, i	for escro	w or ci	ustodial a	ccount lia	ability?	✓ Ye	es 🗆	— N-
b	If "Ye	es," explain the arrangeme	ent in Part XIII	Check here i	f the explar	nation ha	s beer	n provided	l ın Part :	KIII		_	
Pa	rt V	Endowment Funds.	. Complete ıf	the organiza	atıon ansv	vered "۱	′es" o	n Form 🤉	990, Par	t IV, line 10	٥.		
				(a)Current y	/ear (b) Prıor ye	ar	(c)Two ye	ars back	(d)Three year	rs back	(e)Four ye	ars back
1a	Beginn	ing of year balance											
b	Contrib	outions											
С	Net inv	estment earnings, gains,	and losses										
d	Grants	or scholarships											
е		expenditures for facilities ograms											
f	Admını	strative expenses											
g	End of	year balance											_
2	Provi	de the estimated percenta	ige of the curre	nt year end b	alance (line	≘ 1g, colu	ımn (a	i)) held as	5				
а	Board	d designated or quasi-endo	owment 🟲										
b	Perm	anent endowment 🕨											
С	Temp	orarily restricted endowm	ient ▶										
_		percentages on lines 2a, 21		d equal 100%	, 0								
3а		here endowment funds not nization by	t in the possess	sion of the or	ganization t	hat are l	neld ar	nd adminis	stered fo	r the		Yes	No
	(i) uı	nrelated organizations .										a(i)	
b		elated organizations .es" on 3a(ii), are the relate		s listed as red	ured on S	 chedule l	 R? .				-	a(ii) 3b	
4	Desci	ribe in Part XIII the intend	led uses of the	organization's	s endowme	nt funds							
Pa	rt VI	Land, Buildings, an											
	Descri	Complete If the organ	nization answ (a) Cost or oth (investme	er basıs (on Form 9 b) Cost or ot					m 990, Par depreciation		ne 10. (d) Book va	lue
12	Land			·									
		gs		-				+					
		nold improvements				7 (88,777	1		1,072,665			6,016,112
				-			81,154	+		209,569			271,585
		nent					.01,134	1		203,303			2/1,303
		Innes 1a through 1e (Colu	mn (d) must se	ual Form 900	Dart V a	dumn (P) line	10(c)					6.287.697
·VLC		mosa za ciliuduni 16 (COIU)	aaa tuu must et		,, ган Л. СС	nunni (D	,, IIII'C	+U(L// .		-			0 /8/ 69

	Form 990) 2017 Investments—Other Securities. Complete if the organ	uzation an	swered "Ves"	" on Form 990 Part	IV line 11h
	See Form 990, Part X, line 12.		T Tes		
	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of value Cost or end-of-year management	
(1) Financial (2) Closely-h (3)Other	derivatives				
(A)					
В)					
(C)					
D)					
E)					
F)					
(G)					
H)					
	(b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 99	0, Part IV,	line 11c. Se	e Form 990, Part X,	line 13.
	(a) Description of investment) Book valu		(c) Method of value Cost or end-of-year management	
(1)				/ •	
(2)			1		
(3)					
4)					
5)					
6)					
(7)					
(6) (7) (8)					
(7) (8) (9) Fotal. (Column	a (b) must equal Form 990, Part X, col (B) line 13)				
(7) (8) (9) (Fotal. (Column	O (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answered 'Yes' on (a) Description	Form 990,	Part IV, line 1.	1d See Form 990, Part	X, line 15 (b) Book value
(7) (8) (9) (otal. (Column Part IX	Other Assets. Complete if the organization answered 'Yes' on	Form 990,	Part IV, line 1.	1d See Form 990, Part	
7) 8) (9) Fotal. (Column Part IX	Other Assets. Complete if the organization answered 'Yes' on	Form 990,	Part IV, line 1	1d See Form 990, Part	
(7) (8) (9) (1) (1) (2)	Other Assets. Complete if the organization answered 'Yes' on	Form 990,	Part IV, line 1.	1d See Form 990, Part	
7) 8) 9) Fotal. (Column Part IX 1) 2) 3)	Other Assets. Complete if the organization answered 'Yes' on	Form 990,	Part IV, line 1	1d See Form 990, Part	
7) 8) 9) Fotal. (Column Part IX 1) 2) 3) 4)	Other Assets. Complete if the organization answered 'Yes' on	Form 990,	Part IV, line 1:	1d See Form 990, Part	
7) 8) 9) Fotal. (Column Part IX 1) 2) 3) 4)	Other Assets. Complete if the organization answered 'Yes' on	Form 990,	Part IV, line 1:	1d See Form 990, Part	
7) 8) 9) Fotal. (Column Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered 'Yes' on	Form 990,	Part IV, line 1	1d See Form 990, Part	
7) 8) 9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered 'Yes' on	Form 990,	Part IV, line 1	1d See Form 990, Part	
(7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered 'Yes' on	Form 990,	Part IV, line 1	1d See Form 990, Part	
(7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (Fotal. (Column	Other Assets. Complete if the organization answered 'Yes' on (a) Description (a) Description				(b) Book value
(7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (Fotal. (Column Part X	Other Assets. Complete if the organization answered 'Yes' on (a) Description (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25.	· · · · · · · · · · · · · · · · · · ·	Form 990, Pa		(b) Book value
(7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (8) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (8) (9) (9) (1) (1) (1) (1) (2) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (8) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description	· · · · · · · · · · · · · · · · · · ·			(b) Book value
7) 8) 9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1. 1) Federal in	Other Assets. Complete if the organization answered 'Yes' on (a) Description (a) Description mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description of liability income taxes	· · · · · · · · · · · · · · · · · · ·	Form 990, Pa	art IV, line 11e or 1:	(b) Book value
7) 8) 9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X L. 1) Federal in DEFERRED F REPAID REN	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description of liability income taxes RENT	· · · · · · · · · · · · · · · · · · ·	 Form 990, Pa Book value		(b) Book value
8) 9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1. 1) Federal in DEFERRED F PREPAID REN 3)	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description of liability income taxes RENT	· · · · · · · · · · · · · · · · · · ·	Form 990, Pa Book value		(b) Book value
7) 8) 9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal in DEFERRED F PREPAID REN 3) 4)	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description of liability income taxes RENT	· · · · · · · · · · · · · · · · · · ·	Form 990, Pa Book value		(b) Book value
(7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (2) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description of liability income taxes RENT	· · · · · · · · · · · · · · · · · · ·	Form 990, Pa Book value		(b) Book value
(7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (1) (2) (3) (4) (5) (6) (6)	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description of liability income taxes RENT	· · · · · · · · · · · · · · · · · · ·	Form 990, Pa Book value		(b) Book value
(7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) Federal in DEFERRED FOREPAID RENERATION REN	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description of liability income taxes RENT	· · · · · · · · · · · · · · · · · · ·	Form 990, Pa Book value		(b) Book value
(7) (8) (9) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) Federal in DEFERRED FOREPAID REN (3) (4) (5) (6) (7) (8)	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description of liability income taxes RENT	· · · · · · · · · · · · · · · · · · ·	Form 990, Pa Book value		(b) Book value
(7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) Federal in DEFERRED FOREPAID RENERATION REN	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answere See Form 990, Part X, line 25. (a) Description of liability income taxes RENT	· · · · · · · · · · · · · · · · · · ·	Form 990, Pa Book value		(b) Book value

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements . . .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990. Part VIII, line 7b . . .

Add lines **4a** and **4b**

Supplemental Information

Amounts included on line 1 but not on Form 990, Part IX, line 25

Donated services and use of facilities . .

Prior year adjustments

Other (Describe in Part XIII)

Add lines 2a through 2d . .

Return Reference

Page 4

39,285,946

36,069,449

36,069,449

36.069.449

Schedule D (Form 990) 2017

2e

3

4c

5

Schedule D (Form 990) 2017

Part XI

1

1

2

C

d

3

4

b

5

Part XIII

See Additional Data Table

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

2a 2b

2c

2d

4a 4b

Explanation

Schedule D (Form 990) 2017	Page 5
Part XIII Supplemental Information (conti	
Return Reference	Explanation
	Schedule D (Form 990) 2017

Additional Data

Software Version:

EIN: 52-2096845 Name: NEW AMERICA FOUNDATION

Supplemental Information

Return Reference

Software ID:

Explanation

PART IV, LINE 2B TENANT ESCROW \$89,471

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	NEW AMERICA IS A 501(C)(3) ORGANIZATION, EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE NEW AMERICA IS, HOWEVER, SUBJECT TO TAX ON BUSINESS INCOM E UNRELATED TO ITS EXEMPT PURPOSE NEW AMERICA BELIEVES THAT IT HAS APPROPRIATE SUPPORT FO R ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS OR THAT WOULD HAVE AN EFFECT ON ITS TAX-EXEMPT STATIL

S THERE ARE NO UNRECOGNIZED TAX BENEFITS OR LIABILITIES THAT NEED TO BE RECORDED

Supplemental Information

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	LOSS ON FOREIGN CURRENCY EXCHANGE -26,867

efil	efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493319123698							
	HEDULE F rm 990)	tatement o	f Activities	Outside the Un	ited Sta	ates	OMB No 1545-0047	
(I-O		Complete If the orga		Yes" to Form 990, Part IV, to Form 990.	lıne 14b, 15,	or 16.	2017	
							Open to Public Inspection	
Nam	e of the organization				E	mployer iden	tification number	
IVIE VV	AMERICA FOUNDATION				5	2-2096845		
Pa	General Informa Form 990, Part IV		es Outside the	United States. Comple	ete if the o	rganızatıon a	nswered "Yes" to	
1	For grantmakers. Does to other assistance, the gran	_			5			
	to award the grants or ass	• .	the grants or assi	starice, and the selection	i ciiteila us	eu	☐ Yes ☐ No	
2	For grantmakers. Descri outside the United States	be in Part V the o	rganızatıon's proce	edures for monitoring the	e use of its	grants and oth	ner assistance	
3	Activites per Region (The fo	ollowing Part I, line	3 table can be dupl	ıcated ıf addıtıonal space ı	s needed)			
	(a) Region	(b) Number of offices in the region		(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program se specif	r listed in (d) is a ervice, describe fic type of s) in region	(f) Total expenditures for and investments in region	
(1)	EUROPE (INCLUDING ICELAN GREENLAND)	ID &	0 3	PROGRAM SERVICES	PROJECT MAND TECHN			
(2)					SOLLOKI			
(3)								
(4)								
(5)								
	Sub-total Total from continuation shee Part I	ts to	0 3	3			314,348	
	Totals (add lines 3a and 3b)		0 3				314,348	

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2017

(12) (13) (14) (15) (16)

(17) (18) Page **3**

Schedule F (Form 990) 2017

` ,							· - g		
Part IIII Grants and O	ther Assistance to	Individuals	Outside the Unite	ed States. Complete if	the organization an	swered "Yes" to Form 9	990, Part IV, line 16.		
Part III can be	Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
(1)									
(2)									

(3)

(4) (5)

(6) (7) (8) (9) (10) (11)

Sche	dule F (Form 990) 2017		Page 4
Pai	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	□Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	☑ 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	☐ Yes	☑ No
	Schedul	le F (Form 9	90) 2017

chedule F (Form 990) 2017				
Part V	Provid amour metho	lemental Information le the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; nts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting od); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide dditional information (see instructions).		
Return Reference		Explanation		
PART I, LINE 3		ACCOUNTING METHOD ACCRUAL BASIS TOTAL INVESTMENTS FOR REGION \$0 TOTAL EXPENDITURES FOR REGION \$314,348		

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -					DLN: 93493319123698
Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 .						OMB No 1545-0047 2017 Open to Public Inspection	
Name of the organization NEW AMERICA FOUNDATION						' '	entification number
Part I General Informa						52-209684	
	o award the grants anization's procedur Assistance to Dom	or assistance?	e of grant funds in the Un Id Domestic Governme	ited States			✓ Yes No V, line 21, for any recipient
(a) 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	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assistan	
(1) RESOURCES LEGACY FUND 555 CAPITAL MALL SUITE 1095 SACRAMENTO, CA 95814	95-4703838	501(C)(3)	19,150				TRANSFER OF FORMER NEW AMERICA PROGRAM
(2) FOREIGN POLICY INTERRUPTED INC (ELMIRA BAYRASLI) 101 PROSPECT PARK SW APARTMENT 3C BROOKLYN, NY 11218	83-0919481	501(C)(3)	25,000				TO SUPPORT FPI'S FELLOWS PROGRAM
2 Enter total number of sector3 Enter total number of other		_				>	2
For Paperwork Reduction Act Notice	e. see the Instruction	ns for Form 990.		Cat No. 50059	5P		Schedule I (Form 990) 2017

Schedule I (Form 990) 2017

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

NEW AMERICA REQUIRES REGULAR REPORTING TO SUBSTANTIATE THE WORK SUPPORTED BY THE GRANT

(7)

Part IV

PART I, LINE 2

Return Reference

Explanation

efil	e GRAPHIC p	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9331	9123	698
Sch	nedule J	С	ompensati	ion Information	OM	IB No	1545-0	0047
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. Information about Schedule J (Form 990) and its instructions is at				2017 Open to Public		
•	tment of the Treasurv al Revenue Service	P Information a		gov/form990.	13 40		ectio	
	me of the organiz V AMERICA FOUNDA				Employer identificat	ion nu	ımber	
IVLV	V AMERICA I GONDA	TION			52-2096845			
Pa	rt I Questi	ons Regarding Compens	ation					
1a				f the following to or for a person liste by relevant information regarding the			Yes	No
	☐ First-class	s or charter travel		Housing allowance or residence for	personal use			
		companions		Payments for business use of perso	•			
	☐ Tax idem	nıfıcatıon and gross-up paymen	ts 🗆	Health or social club dues or initiati	on fees			
	Discretion	nary spending account		Personal services (e g , maid, chau	ffeur, chef)			
b		xes in line 1a are checked, did all of the expenses described ab		ollow a written policy regarding payn nplete Part III to explain	nent or reimbursement	1 b		
2	Did the organiz	ation require substantiation pric	or to reimbursing o	or allowing expenses incurred by all		2		
	directors, truste	ees, officers, including the CEO/	Executive Director	r, regarding the items checked in line	e 1a?			
3	organization's C	EO/Executive Director Check a	all that apply Dor	ed to establish the compensation of t not check any boxes for methods CEO/Executive Director, but explain				
	✓ Compens	ation committee		Written employment contract				
	☐ Independ	ent compensation consultant	lacksquare	Compensation survey or study				
	☐ Form 990	of other organizations	✓	Approval by the board or compensa	tion committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-co	ntrol payment?			4a		No
b	Participate in, o	r receive payment from, a supp	olemental nonqual	ıfıed retırement plan?		4b		No
c	•	r receive payment from, an equ		_		4c		No
	If "Yes" to any	of lines 4a-c, list the persons ar	nd provide the app	plicable amounts for each item in Par	t III			
	Only 501(c)(3	s), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Secti contingent on the revenues of		the organization pay or accrue any				
а	The organizatio	n [?]				5a		No
b	Any related org					5b		No
	•	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Secti contingent on the net earnings o		the organization pay or accrue any				
a	The organizatio					6a		No
b	Any related org					6b		No
7	•	6a or 6b, describe in Part III	on Alline 4 - July	the enganisation provide and a second				
7		ed on Form 990, Part VII, Secti escribed in lines 5 and 6? If "Ye		the organization provide any nonfixe rt III	u	7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		No
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also foll	ow the rebuttable	presumption procedure described in	Regulations section	9		140
For F	Panerwork Redi	uction Act Notice, see the In	structions for Fo	orm 990. Cat No. 5	50053T Schedule J	(Form	1990)	2017

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 on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC (C) Retirement (D) Nontaxable (E) Total of (F) and other benefits columns Compensation in compensation deferred (B)(i)-(D) column (B) (i) Base (ii) (iii) Other reported as compensation compensation Bonus & incentive reportable deferred on prior compensation compensation Form 990 See Additional Data Table

I					
				Schedule J (F	orm 990) 2017

Schedule J (Form 990) 2017	Page 3
Part III Supplemental Inform	nation
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
Return Reference	Explanation
·	ANY BONUS GIVEN TO AN EXECUTIVE IN 2017 WAS IN RECOGNITION OF EXEMPLARY SERVICE TO THE ORGANIZATION ANY BONUS PAYMENTS TO THE PRESIDENT AND CHIEF EXECUTIVE OFFICER (CEO) ARE DETERMINED AND APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS BONUS PAYMENTS PAID TO EXECUTIVES ARE DETERMINED AND APPROVED BY THE PRESIDENT AND CEO ALL BONUS PAYMENTS ARE BASED ON PERFORMANCE EVALUATIONS AND NOT GROSS OR NET REVENUE

Schedule J (Form 990) 2017

4KEVIN CAREY

DIRECTOR, EDUCATION POLICY PROGRAM

5SUZANNE DIMAGGIO

PROGRAM DIRECTOR

6KEVIN BANKSTON

INSTITUTE

7PETER SINGER

DIRECTOR, OPEN TECH

SENIOR FELLOW AND STRATEGIST

8ELANA BROITMAN

9MARK SCHMITT

10SHARON BURKE

11MEREDITH HANLEY

DIRECTOR, DEVELOPMENT

SENIOR ADVISOR

DIRECTOR, NEW AMERICA

DIRECTOR OF STUDIES

(i)

(11)

(1)

(11)

(1)

(II)

(ı)

(11)

(11)

(i)

(11)

(ı)

(II)

(1)

(11)

(i) Base Compensation

209,828

231,215

221,332

220,584

208,700

202,434

172,925

171,835

Software ID:

Software Version:

(ii)

Bonus & incentive

compensation

EIN: 52-2096845

Name: NEW AMERICA FOUNDATION

(iii)

Other reportable

compensation

Form 990, Schedule J,	Part II - Officers, Directors, Trustees, Key Employees, and	Highest Compensated	d Employees
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable

1ANNE-MARIE SLAUGHTER PRESIDENT & CHIEF EXECUTIVE OFFICER	(1)	480,776	o	24,000	30,330	2,711	537,817	0
	(11)	0	0	0	0	0	0	0
1TYRA MARIANI EXECUTIVE VICE	(1)	299,917	20,000	o	24,266	15,339	359,522	0
PRESIDENT	(11)	0'	0	0	o	o	0	0
2 CECILIA MUNOZ APR-DEC	(1)	204,813	0	0	0	6,948	211,761	0
2017 VICE PRESIDENT	(11)	0	0	0	0	0	o	0
3PETER BERGEN VP, DIR OF NATIONAL FELLOWS & INT'L	(1)	244,861	o	o	30,028	37,055	311,944	0
	(u)	(0'	0	1 0	0	0	0	0

other deferred

compensation

35,039

26,963

25,393

22,048

23,507

28,124

20,237

benefits

10,540

27,936

12,810

1,747

25,866

2,603

37,055

24,158

(E) Total of columns

(B)(i)-(D)

255,407

286,114

259,535

244,379

234,566

228,544

238,104

216,230

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493319123698 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.qov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** NEW AMERICA FOUNDATION 52-2096845 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles 7 Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 1 85,154 FAIR MARKET VALUE 10 Securities—Closely held stock . **11** Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution-Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles 19 Food inventory . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ▶ (______) 26 Other ▶ (______) 27 Other ▶ (______) 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Νo b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Nο 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2017) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2017)	Page 2
	tion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part umber of contributions, the number of items received, or a combination of both. Also complete
Return Reference	Explanation
PART I, COLUMN (B)	THE NUMBER OF CONTRIBUTIONS
	Schedule M (Form 990) (2017)

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SCHEDUL (Form 990 or EZ)	990-	Supplemental Information to Form 990 or 9 Complete to provide information for responses to specific question form 990 or 990-EZ or to provide any additional information Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instruction www.irs.gov/form990.			ons on n.	OMB No 1545-0047 2017 Open to Public Inspection
Name of the org NEW AMERICA FOL 990 Schedule	JNDATION	nental Informatio	n		Employer identif	fication number
Return Reference				Explanation		
FORM 990, PART VI, SECTION A, LINE 1	THE BOARD OF DIRECTORS MAY ELECT OR APPOINT ONE OR MORE COMMITTEES (INCLUDING BUT NOT LIMI TED TO AN EXECUTIVE COMMITTEE) AND MAY DELEGATE TO ANY SUCH COMMITTEE OR COMMITTEES ANY OR ALL OF THEIR POWERS, PROVIDED THAT ANY COMMITTEE TO WHICH THE POWERS OF THE DIRECTORS ARE DELEGATED SHALL CONSIST SOLELY OF DIRECTORS UNLESS THE DIRECTORS OTHERWISE DETERMINE, AN EXECUTIVE COMMITTEE ELECTED BY THE DIRECTORS SHALL HAVE THE POWER TO ACT FOR THE FULL BOA RD OF DIRECTORS ON ALL MATTERS BETWEEN MEETINGS OF THE DIRECTORS EXCEPT FOR SUCH MATTERS A S MAY BE PROVIDED BY LAW OR THE ARTICLES OF INCORPORATION					

Return Explanation
Reference

990 Schedule O. Supplemental Information

FORM 990, THE FORM 990 IS REVIEWED BY MANAGEMENT AND THE AUDIT/FINANCE COMMITTEE, AND A COPY IS SENT TO THE FULL BOARD BEFORE IT IS SIGNED BY A MEMBER OF THE EXECUTIVE TEAM AND FILED WITH TH SECTION B, I LINE 11B

Return Explanation Reference

THE POLICY AND ITS APPLICATION ARE REVIEWED ANNUALLY FOR THE INFORMATION AND GUIDANCE OF O

990 Schedule O, Supplemental Information

FORM 990.

PART VI, SECTION B, LINE 12C

INTEREST POLICY DISCLOSURE STATEMENT UPON HIS OR HER EMPLOYMENT, AND ON AN ANNUALLY THEREAFTER

FFICERS, STAFF MEMBERS, FELLOWS, AND BOARD MEMBERS, EACH OF WHOM HAS A CONTINUING RESPONSI BILITY TO (A) SCRUTINIZE HIS OR HER TRANSACTIONS AND OUTSIDE BUSINESS INTERESTS AND RELATI ONSHIPS FOR POTENTIAL CONFLICTS AND (B) MAKE SUCH DISCLOSURES AS DESCRIBED HEREIN EACH NE W AMERICA OFFICER, STAFF MEMBER, AND FELLOW ARE ASKED TO COMPLETE AND SIGN A CONFLICT OF I NTEREST POLICY DISCLOSURE STATEMENT UPON HIS OR HER EMPLOYMENT, AND ON AN ANNUAL BASIS THE REAFTER EACH NEW AMERICA BOARD MEMBER IS BE ASKED TO COMPLETE AND SIGN SUCH A STATEMENT UPON HIS OR HER ELECTION OR REELECTION TO THE BOARD, AND ANNUALLY THEREAFTER

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE PRESIDENT/CHIEF EXECUTIVE OFFICER (CEO)'S COMPENSATION IS REVIEWED AND DETERMINED BY T HE BOARD OF DIRECTORS ANNUALLY NEW AMERICA COMPLETES A COMPENSATION STUDY WHICH INCLUDES THE CEO (AND OTHER C LEVEL SALARIES) EVERY 2-3 YEARS THE ORGANIZATION IS SCHEDULED TO BEG IN ANOTHER COMPENSATION STUDY IN 2019 MINUTES FORM THE EXECUTIVE COMMITTEE MEETINGS REFLE CT THE DISCUSSIONS AND DECISIONS, ANY CHANGES, AS WELL AS STATUS UPDATES ARE REPORTED AT, AND RECORDED IN THE MINUTES FOR THE MAIN BOARD MEETING ALL STAFF SALARIES ARE DETERMINED BY HUMAN RESOURCES IN CONSULTATION WITH THE RESPECTIVE PROGRAM DIRECTORS AND REVIEWED AND APPROVED BY THE SENIOR LEADERSHIP TEAM AND/OR THE PRESIDENT/CEO THE MOST RECENT PROCESS W AS DONE IN MAY 2018

Return Explanation
Reference

990 Schedule O. Supplemental Information

FORM 990, THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE P UBLIC UPON REQUEST AND ON THE WEBSITE GUIDESTAR ORG THE CONFLICT OF INTEREST POLICY IS AV SECTION C, AILABLE ON NEW AMERICA'S WEBSITE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	CONSULTANTS PROGRAM SERVICE EXPENSES 2,427,418 MANAGEMENT AND GENERAL EXPENSES 558,131 FUNDRAISING EXPENSES 60,000 TOTAL EXPENSES 3,045,549 FELLOWS PROGRAM SERVICE EXPENSES 2,757,251 MANAGEMENT AND GENERAL EXPENSES 5,000 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,762,251 PAYROLL PROCESSING FEES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 58,008 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 58,008 OTHER PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 17,273 MANAGEMENT AND GENERAL EXPENSES 121,823 FUNDRAISING EXPENSES 2,045 TOTAL EXPENSES 141,141

990 Schedule O, Supplemental Information Return Explanation Reference

FORM 990, PART XI, LINE 9