See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
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**Exempt Organization Business Income Tax Return**

(And proxy tax under section 6033(e))

**For calendar year 2014 or other tax year beginning**

**Information about Form 990-T and its instructions is available at [www.irs.gov/form990t](http://www.irs.gov/form990t).**

**Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).**

---

**Part I - Unrelated Trade or Business Income**

<table>
<thead>
<tr>
<th>1a Gross receipts or sales</th>
<th>5,334</th>
</tr>
</thead>
<tbody>
<tr>
<td>1b Less returns and allowances</td>
<td>2,650</td>
</tr>
<tr>
<td>1c Balance</td>
<td>2,684</td>
</tr>
</tbody>
</table>

**Part II - Deductions Not Taken Elsewhere**

(See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

<table>
<thead>
<tr>
<th>14 Compensation of officers, directors, and trustees (Schedule K)</th>
<th>250</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Salaries and wages</td>
<td>256.</td>
</tr>
<tr>
<td>16 Repairs and maintenance</td>
<td>256.</td>
</tr>
<tr>
<td>17 Bad debts</td>
<td>256.</td>
</tr>
<tr>
<td>18 Interest (attach schedule)</td>
<td>256.</td>
</tr>
<tr>
<td>19 Taxes and licenses</td>
<td>256.</td>
</tr>
<tr>
<td>20 Charitable contributions (See instructions for limitation rules)</td>
<td>256.</td>
</tr>
<tr>
<td>21 Depreciation (attach Form 4562)</td>
<td>256.</td>
</tr>
<tr>
<td>22 Less depreciation claimed on Schedule A and elsewhere on return</td>
<td>22a</td>
</tr>
<tr>
<td>23 Depletion</td>
<td>22b</td>
</tr>
<tr>
<td>24 Contributions to deferred compensation plans</td>
<td>256.</td>
</tr>
<tr>
<td>25 Employee benefit programs</td>
<td>256.</td>
</tr>
<tr>
<td>26 Excess exempt expenses (Schedule I)</td>
<td>256.</td>
</tr>
<tr>
<td>27 Excess readership costs (Schedule J)</td>
<td>256.</td>
</tr>
<tr>
<td>28 Other deductions (attach schedule)</td>
<td>256.</td>
</tr>
<tr>
<td>29 Total deductions. Add lines 14 through 28</td>
<td>4,874</td>
</tr>
<tr>
<td>30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13</td>
<td>5,124</td>
</tr>
<tr>
<td>31 Net operating loss deduction (limited to the amount on line 30)</td>
<td>-3,660</td>
</tr>
<tr>
<td>32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30</td>
<td>-3,660</td>
</tr>
<tr>
<td>33 Specific deduction (Generally $1,000, but see line 33 instructions for exceptions)</td>
<td>1,000</td>
</tr>
<tr>
<td>34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32</td>
<td>-3,660</td>
</tr>
</tbody>
</table>

---

**Employee Identification number (Enter identification number (use instructions))**

| 30-0126510 |

**Unrelated business activity codes**

(See instructions)

| CENTER FOR AMERICAN PROGRESS |
| 1333 H STREET, NW, 10TH FLOOR |
| WASHINGTON, DC 20005 |

**Book value of all assets at end of year**

| 55,526,919 |

**Group exemption number**

(See instructions)

| X | 1 |

**Check organization type**

| X | 501(c) corporation |

**Telephone number**

| (202) 741-6276 |

**The books are in care of**

| TOREY CARTER |

---

**STATEDMENT 3**

SEE STATEMENT 1

---

**STATEDMENT 2**

SEE STATEMENT 4

---

**Received**

AUG 2 2015

OGDEN, UT

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**Form 990-T (2014)**

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**12320811 786783 CAPROGRESS 2014.03050 CENTER FOR AMERICAN PROGRESS CAPROGR1**

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**P 12**
Part III  Tax Computation

35  Organizations Taxable as Corporations. See instructions for tax computation.
   Controlled group members (sections 1561 and 1563) check here □ See instructions and:
   a. Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order):
      (1) $ □ (2) $ □ (3) $ □
      b. Enter organization's share of: (1) Additional 5% tax (not more than $11,750) $ □
         (2) Additional 3% tax (not more than $100,000) $ □
      c. Income tax on the amount on line 34 □

36  Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:
   □ Tax rate schedule or □ Schedule D (Form 1041) □

37  Proxy tax. See instructions

38  Alternative minimum tax □

39  Total, Add lines 37 and 38 to line 35c or 36, whichever applies □

Part IV  Tax and Payments

40a  Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) □
   b. Other credits (see instructions) □
   c. General business credit. Attach Form 3800 □
   d. Credit for prior year minimum tax (attach Form 8801 or 8827) □
   e. Total credits. Add lines 40a through 40d □

41  Subtract line 40e from line 39 □

42  Other taxes. Check if from: □ Form 4255 □ Form 8611 □ Form 8697 □ Form 8696 □ Other (attach schedule) □

43  Total tax. Add lines 41 and 42 □

44a  Payments: A 2013 overpayment credited to 2014 □
   b. 2014 estimated tax payments □
   c. Tax deposited with Form 8868 □
   d. Foreign organizations: Tax paid or withheld at source (see instructions) □
   e. Backup withholding (see instructions) □
   f. Credit for small employer health insurance premiums (Attach Form 8941) □
   g. Other credits and payments: □ Form 2439 □ Form 4136 □ Other □

45  Total payments. Add lines 44a through 44g □

46  Estimated tax penalty (see instructions). Check if Form 2220 is attached □

47  Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed □

48  Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid □

49  Enter the amount of line 48 you want: Credited to 2015 estimated tax □
   □ Refunded □

Part V  Statements Regarding Certain Activities and Other Information (see instructions)

1  At any time during the 2014 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here □
   □ NO

2  During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferred to, a foreign trust? □
   □ NO

3  Enter the amount of tax-exempt interest received or accrued during the tax year □

Schedule A - Cost of Goods Sold. Enter method of inventory valuation □ LOWER OF COST OR MARKET

1  Inventory at beginning of year □
   2  Inventories at end of year □
   3  Subtotal □

4a  Additional section 263A costs (attach schedule) □
   b  Other costs (attach schedule) □

5  Total. Add lines 1 through 4a □

Sign Here

Signature of preparer Date □

CFO & SVP

Paid Preparer Use Only

Print/Type preparer's name □

Preparer's signature □

Date 08/11/15

Check □ if self-employed PTIN □

Paid Preparer Use Only

Firm's name □

Firm's EIN □

Firm's address □

Phone no. (202) 822-5000

May the IRS discuss this return with the preparer shown below (see instructions)? □ Yes □ No

12320811 786783 CAPROGRESS 2014.03050 CENTER FOR AMERICAN PROGRESS CAPROGR1
### Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

   (1) 
   (2) 
   (3) 
   (4) 

2. Rent received or accrued

   (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)
   (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)
   (c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part 1, line 6, column (A)

   (1) 
   (2) 
   (3) 
   (4) 
   Total 0. Total 0.

(b) Total deductions.

Enter here and on page 1, Part 1, line 6, column (B) 0.

### Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property

   (1) 
   (2) 
   (3) 
   (4) 

2. Gross income from or allocable to debt-financed property

   (1) 
   (2) 
   (3) 
   (4) 

3. Deductions directly connected with or allocable to debt-financed property

   (a) Straight line depreciation (attach schedule)
   (b) Other deductions (attach schedule)

   (1) 
   (2) 
   (3) 
   (4) 

Total dividends received deductions included in column 8 0. 

### Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization

   (1) 
   (2) 
   (3) 
   (4) 

2. Exempt Controlled Organizations

   (a) Net unrelated income (loss) (see instructions)
   (b) Total of specified payments made
   (c) Part of column 4 that is included in the controlling organization's gross income
   (d) Deductions directly connected with income in column 5

   (1) 
   (2) 
   (3) 
   (4) 

Nonexempt Controlled Organizations

7. Taxable Income

   (1) 
   (2) 
   (3) 
   (4) 

8. Net unrelated income (loss) (see instructions)

   (1) 
   (2) 
   (3) 
   (4) 

9. Total of specified payments made

   (1) 
   (2) 
   (3) 
   (4) 

10. Part of column 9 that is included in the controlling organization's gross income

   (1) 
   (2) 
   (3) 
   (4) 

11. Deductions directly connected with income in column 10

   (1) 
   (2) 
   (3) 
   (4) 

Totals 0. 0.

Enter here and on page 1, Part 1, line 8, column (A) Add columns 5 and 10

Enter here and on page 1, Part 1, line 8, column (B) Add columns 6 and 11
Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

1. Description of Income
2. Amount of Income
3. Deductions directly connected (attach schedule)
4. Set-asides (attach schedule)
5. Total deductions and set-asides (col 3 plus col 4)

(1)
(2)
(3)
(4)

Enter here and on page 1, Part I, line 9, column (A)
Enter here and on page 1, Part I, line 9, column (B)

Totals

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

1. Description of exploited activity
2. Gross unrelated business income from trade or business
3. Expenses directly connected with production of unrelated business income
4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7
5. Gross income from activity that is not unrelated business income
6. Expenses attributable to column 5
7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)

(1) AMERICANPROGR
(2) ESS.ORG

Enter here and on page 1, Part I, line 10, col (A)
Enter here and on page 1, Part I, line 10, col (B)
Enter here and on page 1, Part I, line 26

Totals

Schedule J - Advertising Income

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical
2. Gross advertising income
3. Direct advertising costs
4. Advertising gain or (loss) (col 2 minus col 3). If a gain, compute cols. 5 through 7
5. Circulation income
6. Readership costs
7. Excess readership costs (column 6 minus column 5, but not more than column 4)

(1)
(2)
(3)
(4)

Totals (carry to Part II, line (5))

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

1. Name of periodical
2. Gross advertising income
3. Direct advertising costs
4. Advertising gain or (loss) (col 2 minus col 3). If a gain, compute cols. 5 through 7
5. Circulation income
6. Readership costs
7. Excess readership costs (column 6 minus column 5, but not more than column 4)

(1)
(2)
(3)
(4)

Totals from Part I

Enter here and on page 1, Part I, line 11, col (A)
Enter here and on page 1, Part I, line 11, col (B)
Enter here and on page 1, Part II, line 27

Totals, Part II (lines 1-5)

Schedule K - Compensation of Officers, Directors, and Trustees

1. Name
2. Title
3. Percent of time devoted to business
4. Compensation attributable to unrelated business

(1)
(2)
(3)
(4)

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

0.
## FORM 990-T CONTRIBUTIONS STATEMENT 1

<table>
<thead>
<tr>
<th>DESCRIPTION/KIND OF PROPERTY</th>
<th>METHOD USED TO DETERMINE FMV</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTRIBUTION CARRYOVER</td>
<td>N/A</td>
<td>497,632</td>
</tr>
<tr>
<td>CHARITABLE CONTRIBUTIONS 2014</td>
<td>N/A</td>
<td>2,347,604</td>
</tr>
<tr>
<td>TOTAL TO FORM 990-T, PAGE 1, LINE 20</td>
<td></td>
<td>2,845,236</td>
</tr>
</tbody>
</table>

## FORM 990-T OTHER DEDUCTIONS STATEMENT 2

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>TAX RETURN PREPARATION FEES</td>
<td>1,500.</td>
</tr>
<tr>
<td>SHIPPING</td>
<td>2,407.</td>
</tr>
<tr>
<td>SALARIES AND WAGES</td>
<td>967.</td>
</tr>
<tr>
<td>TOTAL TO FORM 990-T, PAGE 1, LINE 28</td>
<td>4,874.</td>
</tr>
<tr>
<td>Category</td>
<td>Amount</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT</td>
<td></td>
</tr>
<tr>
<td>CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS</td>
<td></td>
</tr>
<tr>
<td>FOR TAX YEAR 2009</td>
<td></td>
</tr>
<tr>
<td>FOR TAX YEAR 2010</td>
<td></td>
</tr>
<tr>
<td>FOR TAX YEAR 2011</td>
<td></td>
</tr>
<tr>
<td>FOR TAX YEAR 2012</td>
<td>497,632</td>
</tr>
<tr>
<td>FOR TAX YEAR 2013</td>
<td></td>
</tr>
<tr>
<td>TOTAL CARRYOVER</td>
<td>497,632</td>
</tr>
<tr>
<td>TOTAL CURRENT YEAR 10% CONTRIBUTIONS</td>
<td>2,845,236</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS AVAILABLE</td>
<td>3,342,868</td>
</tr>
<tr>
<td>TAXABLE INCOME LIMITATION AS ADJUSTED</td>
<td>0</td>
</tr>
<tr>
<td>EXCESS 10% CONTRIBUTIONS</td>
<td>3,342,868</td>
</tr>
<tr>
<td>EXCESS 100% CONTRIBUTIONS</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL EXCESS CONTRIBUTIONS</td>
<td>3,342,868</td>
</tr>
<tr>
<td>ALLOWABLE CONTRIBUTIONS DEDUCTION</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTION DEDUCTION</td>
<td>0</td>
</tr>
</tbody>
</table>
### NET OPERATING LOSS DEDUCTION

<table>
<thead>
<tr>
<th>TAX YEAR</th>
<th>LOSS SUSTAINED</th>
<th>LOSS PREVIOUSLY APPLIED</th>
<th>LOSS REMAINING</th>
<th>AVAILABLE THIS YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/31/13</td>
<td>1,839.</td>
<td>0.</td>
<td>1,839.</td>
<td>1,839.</td>
</tr>
</tbody>
</table>

NOL CARRYOVER AVAILABLE THIS YEAR: 1,839.

### EXPENSES DIRECTLY CONNECTED WITH PRODUCTION OF UNRELATED BUSINESS INCOME

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>ACTIVITY NUMBER</th>
<th>AMOUNT</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADVERTISING EXPENSES</td>
<td></td>
<td>4,543.</td>
<td>4,543.</td>
</tr>
<tr>
<td>- SUBTOTAL</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL OF FORM 990-T, SCHEDULE I, COLUMN 3</td>
<td></td>
<td>4,543.</td>
<td></td>
</tr>
</tbody>
</table>