** PUBLIC DISCLOSURE COPY **

Form **990**

Return of Organization Exempt From Income Tax

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

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

2016 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury

Paid

Preparer

Use Only

JAMES LARSON,

Firm's address

Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2016 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if applicable: CENTER FOR DEMOCRACY AND TECHNOLOGY Name change 52-1905358 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 200 202-637-9800 Final return 1401 K STREET NW 5,239,110. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amende return WASHINGTON, DC 20005 H(a) Is this a group return F Name and address of principal officer: NUALA O'CONNOR Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) L 4947(a)(1) or ℓ If "No," attach a list. (see instructions) J Website: ► WWW.CDT.ORG H(c) Group exemption number K Form of organization: X Corporation Other -L Year of formation: 1994 M State of legal domicile: DC Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1. Activities & Governance Check this box Image if the organization discontinued its operations or disposed of more than 25% of its net assets. 10 Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 28 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 16 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 4,073,093 4,886,927. Contributions and grants (Part VIII, line 1h) 0. 0. Program service revenue (Part VIII, line 2g) 1,828. -16,124. Investment income (Part VIII, column (A), lines 3, 4, and 7d) -100,881. 8,106. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,878,909. 3,974,040. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 14 3,435,146. 3,257,769. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 114,247. 236,801 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 1,430,440. 5,102,387. -1,128,347. 1,879,043. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,251,059. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -372,150. 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** 28 **End of Year** Assets | Balanc 2,154,822. 2,191,011. Total assets (Part X, line 16) 294,707. 703,046. Total liabilities (Part X, line 26) E CE 1,487,965. 1,860,115. Net assets or fund balances. Subtract line 21 from line 20 ... Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Signature of officer Sign NUALA O'CONNOR, PRESIDENT/CEO Here Type or print name and title Date Print/Type preparer's name Preparer's signature

Firm's name GELMAN, ROSENBERG & FREEDMAN

BETHESDA, MD 20814-2930

4550 MONTGOMERY AVE SUITE 650N

CPA

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

P01329561

52-1392008

Phone no. (301) 951-9090

Firm's EIN 🛌

	1990 (2016) CENTER FOR DEMOCRACY AND TECHNOLOGY 52-1905358 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	ADVOCATING FOR PUBLIC POLICIES THAT ADVANCE DEMOCRATIC VALUES IN THE
	DIGITAL AGE.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 778, 402 · including grants of \$) (Revenue \$
	PRIVACY & DATA:
	THE ROLE OF TECHNOLOGY IN OUR DAILY LIVES IS CHANGING RAPIDLY, AS IS
	ITS IMPACT ON INDIVIDUALS, COMMUNITIES, AND PUBLIC POLICY. CDT WORKS
	TO PROTECT INDIVIDUALS BY DEVELOPING PRIVACY STANDARDS AND SAFEGUARDS
	FOR DIGITAL INFORMATION AND DATA. WE IDENTIFY POLICY AND TECHNICAL
	SOLUTIONS FOR EMERGING ISSUES, AND ARE A CHAMPION FOR THE VOICE OF THE
	INDIVIDUAL IN UNREGULATED SPACES, BY CRAFTING AND IMPLEMENTING
	INNOVATIVE POLICY AND TECHNICAL SOLUTIONS.
4b	(Code:) (Expenses \$ 889,937 · including grants of \$) (Revenue \$)
	SECURITY & SURVEILLANCE:
	NEW TECHNOLOGIES HAVE GIVEN GOVERNMENTS UNPRECEDENTED MEANS TO ACCESS
	PERSONAL INFORMATION. IN ORDER TO ENSURE ALL PEOPLE CAN SEEK
	INFORMATION AND EXPRESS THEMSELVES FREELY, THERE MUST BE REASONABLE
	CHECKS AND BALANCES ON GOVERNMENTS' ABILITY TO ACCESS, COLLECT, AND
	STORE INDIVIDUALS' DATA. CDT ADVANCES THOUGHTFUL SOLUTIONS FOR
	GOVERNMENT SURVEILLANCE, CYBER SECURITY, AND OTHER ISSUES CONCERNING
	CIVIL LIBERTIES AND NEW TECHNOLOGIES.
4c	(Code:) (Expenses \$511,027. including grants of \$) (Revenue \$)
	FREE EXPRESSION AND GLOBAL HUMAN RIGHTS:
	CDT WORKS TO EXTEND THE HIGHEST LEVEL OF FREE SPEECH PROTECTIONS TO THE
	INTERNET AND TO KEEP NEW TECHNOLOGIES FREE OF GOVERNMENT CENSORSHIP AND
	CONTENT GATEKEEPERS. OUR TEAM ADVANCES POLICIES AND TECHNOLOGIES THAT
	INCREASE A FREE AND OPEN INTERNET ON BOTH A DOMESTIC AND GLOBAL STAGE.
	7
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 1,885,813 · including grants of \$) (Revenue \$
4e	4 OCE 170
	Form 990 (2016)
	· · · · · · · · · · · · · · · · · · ·

Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.	1000		14-14
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
8	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	_

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

complete Schedule G, Part III

Form 990 (2016) CENTER FOR DEMOCRA
Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			\Box
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	x	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		x
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·		24c		
- 4	any tax-exempt bonds?	24d		
		240		_
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	l		x
	Schedule L, Part I	25b		-^-
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? /f "Yes,"	l		😛
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			10000
	instructions for applicable filing thresholds, conditions, and exceptions):	100	1721	100
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	L	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If *Yes, * complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note. All Form 990 filers are required to complete Schedule O	38	x	
				(2016)

	t V Statements Regarding Other IRS Filings and Tax Compliance			age v					
1 00	Check if Schedule O contains a response or note to any line in this Part V								
			Ves	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 16	6.59	DE UNIO	100					
ь									
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
•	(gambling) winnings to prize winners?	1c	х	-					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	17.1	Table 1	1000					
	filed for the calendar year ending with or within the year covered by this return 2a 28	1000							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	Months:							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х					
	b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country:	1011	1200						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	13							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	225.0	X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	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 and partly for goods and services provided to the payor?	7a	Х	_					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	ļ					
C	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?								
d	If "Yes," indicate the number of Forms 8282 filed during the year	(A.5)		350					
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		-					
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	. 7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A	1000		ISE					
_	sponsoring organization have excess business holdings at any time during the year?	8		-					
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? N/A	1100000		1000					
a		9a							
40	• • •	9b	120000						
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	- 32							
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:	43							
''a	Gross income from members or shareholders N/A 11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)		-						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	13.	50000					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	10000	2000						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		2.5						
	ts the organization licensed to issue qualified health plans in more than one state? N/A	13a							
_	Note. See the instructions for additional information the organization must report on Schedule O.	Ties in	=43	fores					
b		1	3 4						
-	organization is licensed to issue qualified health plans		1	124					
c	Enter the amount of reserves on hand	17.5							
14a		14a		Х					
Ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b							

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

	Check if Schedule O contains a response or note to any line in this Part VI								
Sec	tion A. Governing Body and Management		I						
	Enter the number of voting members of the governing body at the end of the tax year		Yes	No					
1a	Dite the Hallbert of Young the moore of the governing body at the one of the tax your	4							
	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 0.		844	1899					
b	Enter the number of voting members included in line 1a, above, who are independent	1		III S					
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?								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6									
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			-					
	more members of the governing body?	7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	Simble Control	F353						
_	The governing body?	8a	X						
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		-						
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		_						
000	tott at 1 offoto (1115 occitor a requests information about policios flot requires by the internal florends occory		Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	110	590500	611					
12a	many and a second secon	12a	х	-					
	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	الكا							
Ų		12c	x						
42		13	X						
13	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	14	X						
14		14	10000	100					
15	Did the process for determining compensation of the following persons include a review and approval by independent			100					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	AP-	x						
	The organization's CEO, Executive Director, or top management official	15a	Α	v					
D	Other officers or key employees of the organization	15b	in the same	X					
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	8 3	100	File					
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	20.00	-	x					
	taxable entity during the year?	16a	100000	Λ					
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	401							
Coo	exempt status with respect to such arrangements?	16b	<u> </u>						
	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE O								
17		a alta A	lair						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avalial	HE						
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain in Schedule O)								
			_1_1						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	ום זוחמר	cial						
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records:								
	FRIEDMAN & ASSOCIATES, P.C 301-279-8900 401 N. WASHINGTON STREET, #920, ROCKVILLE, MD 20850								
		Form	2000	(20 16)					
832000	R 11-11-16			- 23 F 100 L					

Form 990 (2016)

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

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

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

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

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

(A) Name and Title	(B) Average	(do	(C) Position (do not check more than one box, unless person is both an				one	(D) Reportable	(E) Reportable	(F) Estimated amount of
	hours per week (list any hours for related organizations below line)	stee or director			irecto	Highest compensated employee	tee)	compensation from the organization (W·2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) NUALA O'CONNOR	40.00	x		,,,				260 656	٥	41 466
PRESIDENT & CEO	0.50	A		X		-	_	369,656.	0.	41,466
(2) DEIRDRE MULLIGAN	0.50	x		x				0.	0.	0
CHAIR	0.50	₽		Δ	-	⊢	\vdash	0.	U .	0
(3) DOUG LOWENSTEIN TREASURER	0.50	x		x				0.	0.	0
(4) JULIE BRILL	0.50	Α.		_		┢	H	0.	0.	U
DIRECTOR	0.30	x						0.	0.	0
(5) WILLIAM S. BERNSTEIN	0.50	Ĥ		\vdash	\vdash	\vdash	\vdash	0.	0.	
DIRECTOR	- 0.30	x						0.	0.	0
(6) CARL LANDWEHR	0.50			\vdash	\vdash	\vdash	\vdash	-	•	
DIRECTOR		x						0.	0.	0
(7) ANDREW PINCUS	0.50	Н				_				
DIRECTOR		x						0.	0.	0
(8) ERIKA ROTTENBERG	0.50	Г								
DIRECTOR		X						0.	0.	0
(9) MARK SEIFERT	0.50							'		
DIRECTOR		X				L		0.	0.	0
(10) DAVID VLADECK	0.50							_	_	_
DIRECTOR		X		<u> </u>			$oxed{oxed}$	0.	0.	0
(11) PORTIA WENZE-DANLEY	40.00									
C00	1000	<u></u>	_	X	_	_	\vdash	194,270.	0.	32,321
(12) LISA HAYES	40.00		ŀ			,,		212 420		10 770
VP OF PROGRAMS/STRATEGY	40.00	⊢		<u> </u>	L	X	<u> </u>	212,438.	0.	12,730
(13) CHRISTOPHER CALABRESE	40.00					X		202,742.	0.	37,321
VP OF POLICY (14) GREGORY NOJEIM	40.00	├	_		\vdash	Α.	\vdash	202,742.	0.	31,341
SENIOR COUNSEL & POLICY DIRECTOR	40.00	ł				X		184,207.	0.	33,177
(15) BRIAN WESOLOWSKI	40.00	\vdash		\vdash	\vdash	<u> </u>	_	104,207	0.	39,277
COMM DIR/CHIEF OF STAFF	70.00	1				x		167,746.	0.	15,535
(16) JOSEPH HALL	40.00	\vdash				+		20771200		
CHIEF TECHNOLOGIST		1				x		161,002.	0.	21,308
		-		\vdash	\vdash	 -				,

632007 11-11-16

\$100,000 of compensation from the organization
2

Total number of independent contractors (including but not limited to those listed above) who received more than

Form **990** (2016)

Form 990 (2016) CENTER
Part VIII Statement of Revenue

		Check if Schedule O contains a response or note to ar	ny line in this Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ats at	1 a	Federated campaigns1a				
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b				
O, E		Fundraising events 1c 659,72	5.			
# L		Related organizations 1d				
O.E		Government grants (contributions) 1e				
ë ë		All other contributions, gifts, grants, and				
至	'	similar amounts not included above 1f 4, 227, 20	2.			
;		Noncash contributions included in lines 1a-1f: \$				
S E	, ,	Total. Add lines 1a-1f	4,886,927.			
•	-	Business C			10000	n eksterne
	2 a		000			
Š	- 6					
Ser	ے ا					
EŞ	ے ا					
Ra	۔ ا					
Program Service Revenue	"	All other program service revenue				
	'					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	3	Total. Add lines 2a-2f				
	٦		536.			536.
	١,	other similar amounts) Income from investment of tax-exempt bond proceeds				330.
	4	· · · · · · · · · · · · · · · · · · ·	-			
	5	Royalties		In the State of th		
	١	(i) Real (ii) Person 11, 519 .	iai			
			THE RESERVE OF			
		()	11,519.			11,519.
		Net rental income or (loss)			Maria A Maria Principal Pa	11,013.
	7 a	Gross amount from sales of (i) Securities (ii) Other				
	Ι.	assets other than inventory 1,00	4.			
	4	Less: cost or other basis and sales expenses 17,66	A			
		THE PERSON NAMED IN COLUMN 1				
		Gain or (loss) -16,66				16 660
		3-17-7	▶ -16,660.			-16,660.
9	8 a	Gross income from fundraising events (not	HINDER STATE			
venue		including \$ 659,725. of				
		contributions reported on line 1c). See				
4		Part IV, line 18 a 222,50	0.			
Other Re		Less: direct expenses b 342,53			STIPPE I	100 037
		Net income or (loss) from fundraising events	▶ -120,037.			-120,037.
	9 a	Gross income from gaming activities. See				
		Part IV, line 19a				
		Less: direct expenses b		CHRISTIAN PARTIES CONT.		4
	ı	Net income or (loss) from gaming activities				
	10 a	Gross sales of inventory, less returns				i britanis
		and allowancesa				
		Less: cost of goods soldb				
	<u> </u>	Net income or (loss) from sales of inventory				
	<u> </u>	Miscellaneous Revenue Business C				77 606
		MISCELLANEOUS 90009				77,686.
	6	ADMIN REIMBURSEMENTS 90009	9 38,938.			38,938.
	۰ ا					
	•	All other revenue				
	€	Total. Add lines 11a-11d	116,624.		E-MARIE	A 040
_	12	Total revenue. See instructions.	▶ 4,878,909.	0.	0	
63200	9 11-1	1.18				Form 990 (2016)

Form 990 (2016) CENTER FOR DE Part IX Statement of Functional Expenses

Check if Schedule O contains a respon	se or note to any line in ((A)	this Part IX (B)		(D)
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part Vill.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1 Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22				
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members			1 10 12 28 18 18 2 10 10 10	
5 Compensation of current officers, directors,	627 712	200 242	200 250	47 111
trustees, and key employees	637,713.	308,343.	288,259.	41,111
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	2,190,386.	1,867,548.	148,347.	174,491
7 Other salaries and wages	2,130,300.	1,00/,340.	140,347.	1/4,431
Pension plan accruals and contributions (include contributions)	105,125.	95,402.	5,929.	3,794
section 401(k) and 403(b) employer contributions)	147,290.	125,063.	10,854.	11,373
9 Other employee benefits	177,255.	139,384.	24,016.	13,855
D Payroll taxes	111,233.	137,304.	24,010.	15,055
1 Fees for services (non-employees):				
a Management	187,462.	168,091.	11,768.	7,603
b Legal c Accounting	106,582.		106,582.	.,,,,,,
d Lobbying	200,0020			
e Professional fundralsing services. See Part IV, line 17	114,247.	THE SHOW IT STREET	CONCENTRATION IN	114,247
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25,				
column (A) amount, list line 11g expenses on Sch O.)	578,423.	570,995.	7,428.	
2 Advertising and promotion				
3 Office expenses	100,491.	69,685.	20,033.	10,773
4 Information technology	27,268.	20,946.	4,211.	2,111
5 Royalties				
6 Occupancy	614,878.	494,285.	79,620.	40,973
7 Travel	99,704.	88,280.	8,187.	3,237
8 Payments of travel or entertainment expenses				
for any federal, state, or local public officials			_	hat the
9 Conferences, conventions, and meetings	27,625.	9,219.	2,054.	16,352
0 Interest				
1 Payments to affiliates				
2 Depreciation, depletion, and amortization	87,366.	67,768.	12,644.	6,954
3 Insurance	15,009.	11,678.	2,175.	1,156
Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BOOKS/DUES/SUBS.	32,859.	27,687.	2,558.	2,614
CONTRIBUTIONS	1,001.	805.	151.	45
c MISCELLANEOUS	375.	-	375.	
d	1 1,1			
e All other expenses		_		
Total functional expenses. Add lines 1 through 24e	5,251,059.	4,065,179.	735,191.	450,689
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)				

	Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
		Beginning of year		End of year
1	Cash · non-interest-bearing	100.	1	243,507
2	Savings and temporary cash investments	824,881.	2	774,790
3	Pledges and grants receivable, net	920,000.	3	674,926
4	Accounts receivable, net	80,355.	4	79,633
5	Loans and other receivables from current and former officers, directors,		100	
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5_	
6	Loans and other receivables from other disqualified persons (as defined under			2 7
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		ESS U	
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	24,487.	9	67,901
10a	Land, buildings, and equipment: cost or other			
-	basis. Complete Part VI of Schedule D 10a 725,826.			
Ь	Less: accumulated depreciation 10b 420,404.	236,399.	10c	305,422
11	Investments · publicly traded securities		11	
12	Investments · other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	68,600.	15	44,832
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,154,822.	16	2,191,011
17	Accounts payable and accrued expenses	109,707.	17	127,018
18	Grants payable		18	
19	Deferred revenue	185,000.	19	80,000
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons		E-1 6	
22	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of	0		406 006
	Schedule D	0.	25	496,028
26	Total liabilities. Add lines 17 through 25	294,707.	26	703,046
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
	complete lines 27 through 29, and lines 33 and 34.	FF0 700		27 425
27	Unrestricted net assets	559,709.	27	27,435 1,460,530
28	Temporarily restricted net assets	1,300,406.	28	1,400,530
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other funds	1 060 115	32	1 407 069
33	Total net assets or fund balances	1,860,115.	33	1,487,965
34	Total liabilities and net assets/fund balances	2,154,822.	34	2,191,011

Check if Schedule O contains a response or note to any line in this Part XI 1 Total revenue (must equal Part VIII, column (A), line 12)
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 1 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2 Were the organization's financial statements compiled or reviewed by an independent accountant?
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Investment expenses 11 Accounting method used to prepare the Form 990:
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Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 7 Prior period adjustments 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990:
6 Donated services and use of facilities 7 Investment expenses 7 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 1, 487, 965. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990:
7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 0. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 1, 487, 965. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII
8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 0. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 1,487,965. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X
9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 1,487,965. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 1,487,965. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X
column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X
Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? Za X
Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? Za X
1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X
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If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X
2a Were the organization's financial statements compiled or reviewed by an independent accountant?
YEAR DESCRIPTION OF THE PROPERTY OF THE PROPER
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a
separate basis, consolidated basis, or both:
Separate basis Consolidated basis Both consolidated and separate basis
b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,
consolidated basis, or both:
Separate basis Consolidated basis Both consolidated and separate basis
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,
review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit
Act and OMB Circular A-133?
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit
or audits, explain why in Schedule O and describe any steps taken to undergo such audits
Form 990 (2016)

SCHEDULE A

Department of the Treesury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization Employer identification number CENTER FOR DEMOCRACY AND TECHNOLOGY 52-1905358 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 🔟 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. J Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed (i) Name of supported (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632021 09-21-16 Schedule A (Form 990 or 990-EZ) 2016

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Schedule A (Form 990 or 990-EZ) 2016 CENTER FOR DEMOCRACY AND TECHNOLOGY

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

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

Se	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and	,,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		12,000	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	membership fees received. (Do not		·				
	include any "unusual grants.")	4,123,309.	3,304,255.	4,367,118.	4,073,093.	4,429,595.	20,297,370.
2	Tax revenues levied for the organ-						-
	ization's benefit and either paid to		l i				
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to					l i	
	the organization without charge						
4	Total. Add lines 1 through 3	4,123,309.	3,304,255.	4,367,118.	4,073,093.	4,429,595.	20,297,370.
5	The portion of total contributions	Concessor of					
	by each person (other than a		Company of the Compan	The same of the same of			
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						6,608,733.
6	Public support. Subtract line 5 from line 4.	4-1-10-1-10-1-10-1					13,688,637,
	ction B. Total Support						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	4,123,309.	3,304,255.	4,367,118.	4,073,093.	4,429,595.	20,297,370.
8	Gross income from interest,						
_	dividends, payments received on	[
	securities loans, rents, royalties						
	and income from similar sources	52,576.	32,120.	31,038.	19,068.	12,055.	146,857.
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.)	53,714.	79,084.	76,247.	83.876.	116,624.	409,545.
11	Total support. Add lines 7 through 10	Recurring a	de la	150881100-00-0011			20,853,772.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First five years. If the Form 990 is for						
	organization, check this box and stop	n here		<u> </u>	•		
	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2016 (line 6, column (f) di	ivided by line 11, c	olumn (f))		14	65.64 %
	Public support percentage from 2015					15	64.08 %
16a	33 1/3% support test - 2016. If the d	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies						
ь	33 1/3% support test - 2015. If the c						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	tion			
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-	•	•	g and the same of
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the	_			- Co Co	•	
	organization meets the "facts and circ	cumstances" test.	The organization o	ualifies as a public	ly supported orga	nization	▶□
18	Private foundation. If the organizatio						
						dule A (Form 990	

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						,
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
_	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
Ū	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5			<u> </u>			
	Amounts included on lines 1, 2, and						
7 2	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)			District Control	Wat Payed State	VALUE OF THE STATE OF	
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 6	, , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	23			11		
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						49
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
13	assets (Explain in Part VI.)						
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth t	ax year as a section	n 501(c)(3) organiz	ation.
	check this box and stop here	-			-		
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2016 (olumn (f))		15	96
16	Public support percentage from 2015					16	96
	ction D. Computation of Inves						
17	Investment income percentage for 20			ne 13, column (fi)	SECOND SECOND COMP	17	%
18	Investment income percentage from	2.00				18	%
	33 1/3% support tests - 2016. If the						
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2015. If the						
**	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization						AND THE RESERVE OF THE PERSON NAMED IN COLUMN TO PERSON NAMED IN COLUM
	23 09-21-15						or 990-EZ) 2016

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of 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 Organiza	tions

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (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 organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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10b 990 or 99	M-F7	2016

		<u>-190535</u>	8 Pa	ige 5
Pai	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			-
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	2002		
	below, the governing body of a supported organization?	11a	_	
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above?// 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations		l	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	50000		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,	1 60	85	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		17.53	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	100000	
2	Did the organization operate for the benefit of any supported organization other than the supported		1	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	SCHOOLSES.	1	72017
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	-	1000	
-	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1200		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	2000		
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).			
Sec	tion 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	1200		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1000		1133
	year, (ii) a copy of the 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	1000000	
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		DESCRIPTION OF
3	By reason of the relationship described in (2), did the organization's supported organizations have a	5 (A. U.)		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		10000	
<u></u>	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations	1		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see Instruction	nsj.		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	, iontructions	.1	
C	-	: IIISIIUUIIOIIS	Yes	No
2	Activities Test. Answer (a) and (b) below.	100000	162	IAO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify		100	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-	-	
	that these activities constituted substantially all of its activities.		-	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		SU.	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1 32		
	reasons for the organization's position that its supported organization(s) would have engaged in these	C4-	5.00	
_	activities but for the organization's involvement.	2b	4000	E0 0
3	Parent of Supported Organizations. Answer (a) and (b) below.		975	
а		0-		
	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a	THE COLUMN	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01	Section 2	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	00 57	20-0
63202	5 09-21-16 Schedule A (Fo	1111 AAN OL 8	9U-EZ	2016

	tule A (Form 990 or 990-EZ) 2016 CENTER FOR DEMOCRACY AN			52-1905358 Page 6
Par				D (18) D (1) 0
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	_		Part VI.) See instructions.
Section	other Type III non-functionally integrated supporting organizations must co on A - Adjusted Net Income	mpiete	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		-
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
	Portion of operating expenses paid or incurred for production or	Ť		
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		-
-	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see		THE RESERVE OF THE PARTY OF THE	
	instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d	DESCRIPTION AND ADDRESS.	
	Discount claimed for blockage or other	00000	TO THE TAX BY BY	
	factors (explain in detail in Part VI):			
	Acquisition indebtedness applicable to non-exempt-use assets	2		
	Subtract line 2 from line 1d	3	E:	
	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
***	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by .035	6		
	Recoveries of prior-year distributions	7		
_	Minimum Asset Amount (add line 7 to line 6)	8		1.1
Section	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
_	Enter 85% of line 1	2		li e
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6	ACCEPANIE NO VISE	
7	Check here if the current year is the organization's first as a non-functional	lv integr	ated Type III supporting ord	ganization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions).

Schedule A (Form 990 or 990-EZ) 2016

b Excess from 2013c Excess from 2014d Excess from 2015e Excess from 2016

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12; Part IV, 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.)
SCHEDULE A, LIST OF UNUSUAL GRANTS RECEIVED:
DESCRIPTION: CY PRES AWARD
DATE: 08/12/16 AMOUNT: 408204.
DESCRIPTION: CY PRES AWARD
DATE: 04/06/16 AMOUNT: 17375.
DESCRIPTION: CY PRES AWARD
DATE: 10/19/16 AMOUNT: 31753.
3

** PUBLIC DISCLOSURE COPY **

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

Employer identification number

CE	ENTER FOR DEMOCRACY AND TECHNOLOGY	52-1905358
Organization type (check of	one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ale. See instructions.
General Rule		
-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	· · · · · · · · · · · · · · · · · · ·
Special Rules		
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1. Complete Parts I and II.	or 16b, and that received from
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ cruelty to children or animals. Complete Parts I, II, and III.	0.3127
For an organization year, contributions is checked, enter the purpose. Don't contributions is checked, enter the purpose.	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from sections contributions totaled makes the total contributions that were received during the year for an exclusively religious mplete any of the parts unless the General Rule applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box i, charitable, etc., received nonexclusively
but it must answer "No" on certify that it doesn't meet t	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	orm 990-PF, Part I, line 2, to
LHA For Paperwork Redu	iction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule I	B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

CENTE	R FOR DEMOCRACY AND TECHNOLOGY	52	2-1905358
Part I	Contributors (See instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AMAZON.COM 126 C STREET, SE WASHINGTON, DC 20003	\$135,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	APPLE INC. 1 INFINITE LOOP CUPERTINO, CA 95014	\$\$	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ABOUDI V T-MOBILE C/O ALSTON & BIRD LLP 950 F STREET WASHINGTON, DC 20004	\$\$39,957.	Person X Payrol! Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ANONYMOUS FOUNDATION	\$660,000.	Person X Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	FACEBOOK, INC. 1155 F STREET, NW WASHINGTON, DC 20005	\$ 180,931.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	FOUNDATION TO PROMOTE OPEN SOCIETY 224 W. 57TH ST. NEW YORK, NY 10019-3212	\$350,000.	Person X Payroll
623452 10-1	Large to the state of the state	Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

CENTER FOR DEMOCRACY AND TECHNOLOGY

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	K TOK DEMOCRACI AND IECHNOLOGI	32	-1302220
Part I	Contributors (See instructions). Use duplicate copies of Part I i	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	GOOGLE 1101 NEW YORK AVENUE, NW WASHINGTON, DC 20005	s584,911.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	KASPERSKY LABS 500 UNICORN PARK, 3RD FLOOR WOBURN, MA 01801	\$120,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	MICROSOFT CORPORATION 1401 I STREET, NW WASHINGTON, DC 20005	s250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	MOZILLA CORP 1981 LANDINGS DRIVE MOUNTAIN VIEW, CA 94043	s 237,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	FORD FOUNDATION 320 EAST 43RD STREET NEW YORK, NY 10017	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
023452 10-18	R-16	\$Schedule 8 (Form	Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2016)

Employer identification number

CENTER FOR DEMOCRACY AND TECHNOLOGY

52-1905358

Part II	Noncash Property (See instructions). Use duplicate copies of Part II	if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - \$	
(a) No. from Part !	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_ _ _ _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
623453 10-18		Schedule R (Form S	90, 990-EZ, or 990-PF) (2018

623454 10-18-18

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Department of the Treasury Internal Revenue Service

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.lrs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

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

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

Section Name of org		tions: Complete Part III.		I Ema	loyer identification number
ivaine of org		EOD DEWOODAGY AN	ID MEGIBIOI OC		52-1905358
Part I-A	CENTER Complete if the ore	FOR DEMOCRACY AN panization is exempt une	der costion 501/o	or is a spation 527 a	32-1303336
Fait I-A	Combiere ii me ori	anization is exempt un	dal saction sorte) or is a section ser t	л уаптеацоп.
		. %	. 1000		
1 Provide	a description of the organia	ation's direct and indirect politi	cal campaign activities	in Part IV.	
2 Politica	I campaign activity expendit	ures			
3 Volunte	er hours for political campa	gn activities			
				100	
Part I-B		janization is exempt une			
1 Enter ti	ne amount of any excise tax	incurred by the organization un	der section 4955		<u> </u>
2 Enter ti	ne amount of any excise tax	incurred by organization manag	jers under section 495	5	
		n 4955 tax, did it file Form 4720			
4a Was a	correction made?				Yes No
b If "Yes,	" describe in Part IV.	ta Nila Talia E			3.11
		janization is exempt une		· · · · · · · · · · · · · · · · · · ·	
1 Enter ti	he amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities	<u> </u>
2 Enter ti	he amount of the filing organ	ization's funds contributed to o	ther organizations for s	section 527	
exemp	t function activities				<u> </u>
		. Add lines 1 and 2. Enter here			
line 17	b			▶ 9	S
4 Did the	filing organization file Form	1120-POL for this year?			Yes No
		nployer identification number (E			
made p	ayments. For each organiza	tion listed, enter the amount pa	id from the filing organ	ization's funds. Also enter t	he amount of political
contrib	utions received that were pr	omptly and directly delivered to	a separate political or	ganization, such as a separa	ate segregated fund or a
politica	laction committee (PAC), If	additional space is needed, pro	vide information in Par	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	• •	, ,	''	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization.
					If none, enter -0
	-				
			+		

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

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Schedule C (Form 990 or 990-EZ) 2016 C Part II-A Complete if the orga	ENTER FOR I	DEMOCRACY AN	D TECHNOLO	3Y 52-1	905358 Page 2
	nization is exen	npt under section	501(c)(3) and file	ed Form 5768 (el	ection under
section 501(h)).					
	•	ated group (and list in P	art IV each affiliated	group member's nam	e, address, EIN,
expenses, and share		·			
B Check if the filing organization	on checked box A an	d "limited control" provi	sions apply.		
	on Lobbying Expen tures" means amou	ditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	rice nublic opinion (a	rass roots Inhbying)		1,247.	
b Total lobbying expenditures to influe				18,729.	
c Total lobbying expenditures (add line	-	Chief		19,976.	
d Other exempt purpose expenditures		******************************		5,231,083.	
e Total exempt purpose expenditures				5,251,059.	
f Lobbying nontaxable amount. Enter				412,553.	
If the amount on line 1e, column (a) or		ying nontaxable amou			DECEMBER OF THE PARTY OF THE PA
Not over \$500,000		he amount on line 1e.			
Over \$500,000 but not over \$1,000,	000 \$100,000) plus 15% of the exces	s over \$500,000.		
Over \$1,000,000 but not over \$1,50		0 plus 10% of the exces	s over \$1,000,000		
Over \$1,500,000 but not over \$17,0		0 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000	\$1,000,0	00.			
	1				
g Grassroots nontaxable amount (enter	er 25% of line 1f)			103,138.	
h Subtract line 1g from line 1a. If zero				0.	
i Subtract line 1f from line 1c. If zero				0.	
If there is an amount other than zero		ine 1i, did the organizati	on file Form 4720	Г	
reporting section 4911 tax for this ye		***************************************		L	Yes No
(Some organizations that	nt made a section 50	raging Period Under se 21(h) election do not ha te instructions for line	ive to complete all o	of the five columns b	elow.
	Lobbying Expen	ditures During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	392,699.	402,644.	405,119.	412,553.	1,613,015.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,419,523.
c Total lobbying expenditures	71,256.	52,216.	55,454.	19,976.	198,902.
d Grassroots nontaxable amount	98,175.	100,661.	101,280.	103,138.	403,254.
e Grassroots ceiling amount	MANUFACTURE OF THE PARTY OF THE	Electronic silence			=======================================
(150% of line 2d, column (e))					604,881.
f Grassroots lobbying expenditures	10,686.	11,206.	2,703.	1,247.	25,842.

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 CENTER FOR DEMOCRACY AND TECHNOLOGY 52-1905358 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description (a)		(b)	
of the lobbying activity.	Yes	No	Amo	ount
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		4 22 20 1		
or referendum, through the use of:	THE SECOND			
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? I Other activities?				
j 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)?			1.555	
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			100000	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(5), or se	ection	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from t				
Part III-B Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is
Dues, assessments and similar amounts from members	7	1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		4		
expenses for which the section 527(f) tax was paid).		- 12.5		
a Current year		2a		
b Carryover from last year				
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
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)	n.am	5		
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 instructions); and Part II-B, line 1. Also, complete this part for any additional information.	p list); Part I	I-A, lines 1 a	and 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
2 - 40000000				
2 2 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3				
		AND THE PERSON	10 6	
	Schedu	ule C (Form	990 or 99	0-EZ) 2016

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Name of the organization **Employer identification number** CENTER FOR DEMOCRACY AND TECHNOLOGY 52-1905358 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. 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 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? 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? Part If 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 a 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 Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 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 tax 3 Number of states where property subject to conservation easement is located 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) 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. 1a 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. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2016

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		FOR DEMOCR							<u>05358</u>	
Pai	t III Organizations Maintaining C									
3	Using the organization's acquisition, access	on, and other record	ds, che	ck any of	the following tha	ıt are a si	gnificaπt ι	use of its	collection i	tems
	(check all that apply):		_	,						
а	Public exhibition	C	, <u> </u>		exchange progra	ams				
b	Scholarly research	e	, L	Other_						
C	Preservation for future generations									
4	Provide a description of the organization's co							se in Par	t XIII.	
5	During the year, did the organization solicit of							_	_	_
	to be sold to raise funds rather than to be m								Yes	No_
Pai	t IV Escrow and Custodial Arran		ete if th	e organiz	zation answered	"Yes" on	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other interme	diary fo	r contribi	utions or other as	sets not	included		7	
	on Form 990, Part X?							ــاـــا	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:						
									Amount	
C	Beginning balance	*****					1c			
d	Additions during the year						1d			
•	Distributions during the year						. 1e			
f	Ending balance						11	,	,	
	Did the organization include an amount on F								∠ Yes	U No
	If "Yes," explain the arrangement in Part XIII.								5-916-916-9	
Pa	t V Endowment Funds. Complete	if the organization ar	nswere	d "Yes" c						
	0.401	(a) Current year	(b)	Prior yea	r (c) Two year	rs back {	d) Three y	ears back	(e) Four ye	ears back
1a	Beginning of year balance									
b	Contributions									
C	Net investment earnings, gains, and losses						5.5			
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	ce (line	1g, colur	nn (a)) heid as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	<u>%</u>								
С	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
За	Are there endowment funds not in the posse	ession of the organiz	ation th	hat are he	eld and administe	ered for th	ne organiz	ation .		
	by:								Y	es No
	(i) unrelated organizations								3a(i)	
	(li) related organizations									
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	ired on	Schedul	e R?				3b	
4	Describe in Part XIII the intended uses of the		owmen	t funds.				12-5-036-036-0		
Pa	rt VI Land, Buildings, and Equipn	nent.								
	Complete if the organization answere	d "Yes" on Form 99	0, Part	IV, line 1	1a. See Form 990), Part X,	line 10.			
	Description of property	(a) Cost or o	other	1 ' '	Cost or other		cumulate	d	(d) Book v	value
		basis (investi	ment)	b	asis (other)	dep	reciation			
1a	Land							Shift)		
b	Buildings						7			
С	Leasehold improvements									
d	Equipment				445,700.		16,4			,201.
е	Other	Control of the Contro			280,126.	1	.03,9	J5.		,221.
	I. Add lines 1a through 1e. (Column (d) must e		t X, colu	ımn (B), I	ine 10c.)				305	,422.

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016

(4)(5) (6)(7)(8)

496,028.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII 🛣

Schedule D (Form 990) 2016 CENTER FOR DEMOCRACY AND TECHNOLOGY	52-1	1905358 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	leturn	4
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		£ 000 10C
1 Total revenue, gains, and other support per audited financial statements	1	5,238,106.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b		
242 527	200	
d Other (Describe in Part XIII.) e Add lines 2a through 2d	28	342,537.
3 Subtract line 2e from line 1	3	4,895,569.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1000	-,000,000
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.) 4b -16,660.		
c Add lines 4a and 4b	4c	-16,660.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,878,909.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	m.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	5,610,256.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25;		
a Donated services and use of facilities 2a		
b Prior year adjustments		
c Other losses 2c		
d Other (Describe in Part XIII.) 2d 359,197.		350 107
e Add lines 2a through 2d	2e	359,197.
3 Subtract line 2e from line 1	3	5,251,059.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a b. Other (Describe in Part XIII.)		
S Carlot (Secondo art art and	4c	0.
c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,251,059.
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line	4: Part	X. line 2: Part XI.
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	.,	
PART X, LINE 2:		
FOR THE YEAR ENDED DECEMBER 31, 2016, CDT HAS DOCUMENTED ITS	CON	SIDERATION
AD DIED ICE 540 10 THEOLY MIND BROWTHE CUITABLE TOD		ADDITION OF THE PARTY OF THE PA
OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR	REF	ORTING
INICEDMATNMY THE THICKNE MAYER AND USE DEMERMINED MUST NO MATER	TAT.	TIMODDEN THE
UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATER	TAL	UNCERTAIN
TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE I	או ייני	រដ
TAX POSITIONS QUALIFITION ETIMEN RECOGNITION ON DISCHOSURE I	.14 11	115
FINANCIAL STATEMENTS.		
IMMCIAL DIRIBIDATO.		<u></u>
PART XI, LINE 2D - OTHER ADJUSTMENTS:		
FUNDRAISING EVENT EXPENSES SHOWN AS EXPENSE ON THE		
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON		342,537.
FORM 990, PART VI, LINE 8B.		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Form 990, Part IV, line 14b, 15, or 16.

Department of the Treasury Internal Revenue Service

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

Open to Public inspection

OMB No. 1545-0047

Name of the organization					Employer Identi	ncation number				
CENTER FOR DEMO	52-1905358									
			tside the United States. Comple	ete if the organ						
Form 990, Part I\	/, line 14b.									
			ds to substantiate the amount of its gr							
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or ass	istance?	Yes L No				
O. For example on Door	uiba ia Dant V tha	o-contration's	procedures for monitoring the use of it	e ampte and a	ther assistance ou	teida tha				
 For grantmakers. Desc United States. 	noe in Part V the	e organization s	procedures for monitoring the use of it	s grants and o	arer assistante ou	iside ii le				
	he following Part	t I, line 3 table c	an be duplicated if additional space is	needed.)						
(a) Region	(a) Region (b) Number of (c) Number of (d) Activities conducted in the region (e) If activity listed in (d)									
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		is a program service,					
	in the region	independent contractors	gram services, investments, grants to recipients located in the region)		specific type (s) in the region	for and investments				
TOTAL ATTACAMENT		in the region	Toopions tooltos in the region,	0.00.710		in the region				
EUROPE (INCLUDING ICELAND & GREENLAND)										
- ALBANIA, ANDORRA,				MEETINGS, O	ONFERENCES,					
AUSTRIA, BELGIUM	0	3	PROGRAM SERVICE ACTIVITIES	EU ACTIVITY		374,347.				
		ŀ		1						
		 								
	<u> </u>									
	 		-							
]						
<u> </u>										
3 a Sub-total	- 0	3		D		374,347.				
b Total from continuation										
sheets to Part I		0				0.				
c Totals (add lines 3a				Markin						
	1 0	d a				374 347				

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

Schedule F (Form 990) 2016

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

2 Enter total number of the IRS, or for which					1 (a) Name of organization
recipient organization					(b) IRS code section and EIN (if applicable)
ns listed a					(c)
above that are vided a section					(c) Region
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter					(d) Purpose of grant
e foreign country					(e) Amount of cash grant
recognized as tax-e					(f) Manner of cash disbursement
as tax-exempt by					(g) Amount of noncash assistance
					(h) Description of noncash assistance
					(i) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2016

Page 3

Schedule F (Form 990) 2016 CENTER FOR DEMOCRACY AND TECHNOLOGY 52-1905358

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

(a) Type of grant or assistance Part III can be duplicated if additional space is needed. (b) Region (c) Number of (d) Amount of recipients cash grant (e) Manner of cash disbursement (f) Amount of noncash assistance (g) Description of noncash assistance Schedule F (Form 990) 2016 (h) Method of valuation (book, FMV, appraisal, other)

Schedu	ule F (Form 990) 2016 CENTER FOR DEMOCRACY AND TECHNOLOGY	52-1905358	Page 4
Part	V 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	X 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	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X 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	X 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	X 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	X No

Schedule F (Form 990) 2016

Schedule F	(Form 990) 2016	CENTER FOR	DEMOCRACY	AND TECHNOL	OGY	52-1905358	Page 5
Part V	Supplementa				•		
			I. line 2 (monitorina	of funds); Part I, line 3,	column (f) (accounting	method, amounts of	
				ounting method); Part III			9
				ete this part to provide a			"
	(estimated numbi	ei oi iecipiciita), as apt	nicabie. Also compi	ste tris part to provide a	ny additional informat	ion. See mistractions.	
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57 571	and the second						
							-
				50500 - FM - 1 445	FIGURE		
32075 09-21-	16					Schedule F (Form 9	990) 201

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

2016

Open to Public inspection

Name of the organization						ntification number
	FOR DEMOCRACY AND				52-1905	
Fundraising Activities required to complete this pa	 Complete if the organization answ rt. 	ered "\	'es" o	n Form 990, Part IV, I	ine 17. Form 990-E2	! filers are not
Indicate whether the organization rai A Mail solicitations Internet and email solicitation C M Phone solicitations In-person solicitations In-person solicitations In the organization have a written key employees listed in Form 990, Fire Yes, I list the 10 highest paid indicompensated at least \$5,000 by the	e X Solicit s f Solicit g X Specia or oral agreement with any individua Part VII) or entity in connection with ividuals or entities (fundraisers) purs	ation of ation of al fundra al (inclu profess	non-g gover aising ding o ional t	overnment grants nment grants events fficers, directors, trus fundraising services?	stees, or XX Yes	
(i) Name and address of individual or entity (fundraiser)	(II) Activity	or cor	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
CALVO CONSULTING LLC	FUNDRAISING	Yes	No X	0.	31,463.	-31,463.
DARCY SCOTT MARTIN	FUNDRAISING	\top	х	0.	26,800.	26,800.
RACHEL DELLON CONSULTING -	FUNDRAISING		х	0.	50,778.	-50,778.
Total			•	:	109,041.	-109,041.
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	utions	or has been notified	it is exempt from re	gistration
AZ, CA, CT, FL, IL, MD, MA,	MS, NH, NY, TX, VA, WA					
	2		_			
					4	
No Establis						
	8//92892	110-11-2			17.000	
	1027				80	
			90.		2000	

SEE PART IV FOR CONTINUATIONS
632081 09-12-16

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

Pa		Fundraising Events. Complete if the of fundraising event contributions and gr	ne organization answered	d "Yes" on Form 990, Pa	rt IV, line 18, or reported	
		or turidizing every contributions and ge	(a) Event #1 2016 TECHPROM	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
ē			(event type)	(event type)	(total number)	COI. (C))
Revenue	1	Gross receipts	882,225.			882,225.
	2	Less: Contributions	659,725.			659,725.
	3	Gross income (line 1 minus line 2)	222,500.			222,500.
	4	Cash prizes				
Se	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
irect E	7	Food and beverages	164,710.			164,710.
٥	8	Entertainment				96,625. 81,202.
	10	Other direct expenses Direct expense summary. Add lines 4 throug				342,537.
	11					-120,037.
Pε		III Gaming. Complete if the organization	answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.		30		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				=
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes% No	Yes %	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)		.	
	8	Net gaming income summary. Subtract line 7	from line 1 column (d)			
		The garing moone summary coorder line (TOTAL IN COLUMN (U)			
а	ls t	ter the state(s) in which the organization condu the organization licensed to conduct gaming a No," explain:	ctivities in each of these			Yes No
		ere any of the organization's gaming licenses n		· ·	year?	Yes No
	_					
6320	32 09	9-12-16			Schedule G (Fo	rm 990 or 990-EZ) 2016

Sch	edule G (Form 990 or 990-EZ) 2016 CENTER FOR DEMOCRACY AND TECHNOLOGY 52-3	L905358	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No.
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:	103	140
	The organization's facility	13a	%
	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100	- 70
17	Titles the name and address of the person who prepares the organization's gaining/special events books and records.		
	Name		
	Address >		··· -
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No No
ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party ►\$		
C	If "Yes," enter name and address of the third party:		
	Name		
	Address >		
16	Gaming manager information:		
	Name Name		
	Gaming manager compensation ▶ \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
_	retain the state gaming license?	Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, li	nes 9, 9b, 10	b. 15b.
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions		
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISER	s:	
(I) NAME OF FUNDRAISER: CALVO CONSULTING LLC		
(I) ADDRESS OF FUNDRAISER:		
<u>(I</u>) NAME OF FUNDRAISER: DARCY SCOTT MARTIN		
/ T	\ ADDRECT OF FINIDATORD.		
<u>(1</u>) ADDRESS OF FUNDRAISER:		
<u>(I</u>) NAME OF FUNDRAISER: RACHEL DELLON CONSULTING		
63300	2 /0.12.18 Schodule & /Earm	000 000	E71 20146

Schedule G (Form 990 or 990-l	EZ) CENTER FOR	DEMOCRACY AND	TECHNOLOGY	52-1905358 Page
Schedule G (Form 990 or 990- Part IV Supplementa	I Information (continued)			
(I) ADDRESS OF	FINIDD X T CFD.			
1/ ADDRESS OF	PONDRAIDER:			
N. S.	-			
				Age -
				1.77
				211000
	10			<u>*</u>
5329	124	107601-0	850-37543	
			-	
	(1)	100		
4 10 10 W.S		191		2000
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		78	- Fig	52 542.
			 	Cahadula C (Farm 000 au 000 E

SCHEDULE J (Form 990)

Compensation Information

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

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

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number 52-1905358

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			11931
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			1
	First-class or charter travel Housing allowance or residence for personal use	E/3-5	1.00	232
	Travel for companions Payments for business use of personal residence		333	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		75.5	146
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)	530	0	100
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	42	200	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Contract of	-
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		kel	Envio
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
		2000	100	Bolle
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	5.21		
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to		10.3	
	establish compensation of the CEO/Executive Director, but explain in Part III.			199
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study		1	
	Form 990 of other organizations X Approval by the board or compensation committee			
				-
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			128
•	organization or a related organization:			
я	Receive a severance payment or change-of-control payment?	4a		Х
b		4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
•	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		10	20.5
				120
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	1 3		- 3
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			Hos
-	contingent on the revenues of:	1		
а	The organization?	5a		Х
	Any related organization?	5b		X
-	If "Yes" on line 5a or 5b, describe in Part III.		1000	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	4		
•	contingent on the net earnings of:	1000		
а	The organization?	6a		X
	Any related organization?	6b		X
_	If "Yes" on line 6a or 6b, describe in Part III.	1/25/3	UPST	
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
•	not described on lines 5 and 6? If "Yes," describe in Part III	7	х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	TOW	13.	
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	do and	57944	
-	Regulations section 53.4958-6(c)?	9	-	Name of
	regarder a section 90-7000 defi	<u> </u>		

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

Schedule J (Form 990) 2016

Schedule J (Form 990) 2016 CENTER FOR DEMOCRACY AND 'L'ECHNOLOGY 52-1905556

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

For each individual whose compensation must be reported 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 aren't 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.

		_				9	
						1	(8)
							(0)
						113	
							(1)
							(ii)
						Ī	(0)
						-1	(ii)
						=	3
						_	(11)
		:				_	0
							(ii)
						_	(3)
							(ii)
							0
							(3)
						_	(9)
0.	0.	0.	0.	0.	0.	0.	CHIEF TECHNOLOGIST (II)
0.	182,310.	11,696.	9,612.	0.	1,522.	159,480.	(7) JOSEPH HALL
0.	0.	0.	0.	0.	0.	0.	COMM DIR/CHIEF OF STAFF (ii)
0.	183,281.	5,562.	9,973.	0.	1,522.	166,224.	(6) BRIAN WESOLOWSKI (I)
0.	0.	0.	0.	0.	0.	0.	SENIOR COUNSEL & POLICY DIRECTOR (ii)
0.	217,384.	21,931.	11,246.	0.	1,522.	182,685.	(5) GREGORY NOJEIM (I)
0.	0.]	0.	-0	0.	0.	0.	VP OF POLICY (II)
0.	240,063.	25,120.	12,201.	0.	1,522.	201,220.	(4) CHRISTOPHER CALABRESE (I)
0.	0.	0.	1.0	0.	0.	0.	VP OF PROGRAMS/STRATEGY (II)
0.	225,168.	0.	12,730.	0.	1,536.	210,902.	(3) LISA HAYES (i)
0.	0.	0.	.0	0.	0.	.0	COO (II)
0.	226,591.	20,693.	11,628.	0.	1,522.	192,748.	(2) PORTIA WENZE-DANLEY (i)
0.	0.	0.	0.	0.	0.	0.	PRESIDENT & CEO (II)
0.	411,122.	18,777.	22,689.	0.	0.	369,656.	(1) NUALA O'CONNOR (I)
on prior Form 990			compensation	reportable compensation	incentive compensation	compensation	(A) Name and Title
in column (B)			other deferred		fill Donie &	(ii) Basa	
(F) Compensation	(E) Total of columns	(D) Nontaxable	(C) Retirement and	SC compensation	(B) Breakdown of W-2 and/or 1099-MISC compensation	(B) Breakdown of	

632112 09-09-16

Schedule J (Form 990) 2016	
to the phase and active to the control of the contr	
	COA. (COA.)
	EMMA LIANSO - \$1,522
	JOSEPH HALL - \$1,522
	BRIAN WESOLOWSKI - \$1,522
	GREGORY NOJEIM - \$1,522
	PORTIA WENZE-DANLEY - \$1,522
522	CHRISTOPHER CALABRESE - \$1,5
	LISA HAYES - \$1,536
SECTION A:	WHO ARE REPORTED ON PART VII,
BONUS COMPENSATION TO THE FOLLOWING INDIVIDUALS	THE ORGANIZATION PROVIDED BOI
	PART I, LINE 7:
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	Part III Supplemental Information Provide the information, explanation, or descriptions requ

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Tressury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2016

OMB No. 1545-0047

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

Open to Public Inspection

Name of the organization Employer identification number CENTER FOR DEMOCRACY AND TECHNOLOGY 52-1905358 FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ARCHITECTURE EXPENSES \$ 423,356. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EU CONSULTANTS INCLUDING GRANTS OF \$ 0. EXPENSES \$ 370,337. REVENUE \$ 0. INTERNATIONAL HUMAN RIGHTS REVENUE \$ 0. EXPENSES \$ 346,784. INCLUDING GRANTS OF \$ 0. COMMUNICATIONS EXPENSES \$ 331,634. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. OPEN INTERNET EXPENSES \$ 197,073. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. COPYRIGHT INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EXPENSES \$ 115,426. DIGITAL FOURTH INCLUDING GRANTS OF \$ 0. **EXPENSES \$ 30,607.** REVENUE \$ 0. INEQUALITY **EXPENSES \$ 21,872.** INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

EDUCATION FOUNDATION

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

Schedule O (Form 990 or 990-EZ) (2016)

832211 08-25-16

CIRCUMSTANCES WHICH MAY PRESENT OR CONTRIBUTE TO A CONFLICT OF INTEREST AS

632212 08-25-16

Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization

CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number 52-1905358

DEFINED IN THIS POLICY.

IF THE BOARD OR COMMITTEE HAS A REASONABLE CAUSE TO BELIEVE THAT AN

INTERESTED PERSON HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF

INTEREST, IT TAKES APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

FORM 990, PART VI, SECTION B, LINE 15A:

COMPENSATION DECISIONS REGARDING THE CEO ARE REVIEWED AND VOTED ON BY THE BOARD OF DIRECTORS. THE BOARD USES COMPARABILITY DATA AND THE DECISIONS ARE DOCUMENTED. THE MOST RECENT REVIEW WAS COMPLETED IN DECEMBER 2016.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND

OK, OR, PA, RI, SC, TN, TX, UT, VA, WA, WV, WI, ME, OH

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND ITS ANNUAL AUDITS

AVAILABLE ON ITS WEBSITE AND UPON REQUEST. IN ADDITION, THE 990 IS ALSO

AVAILABLE ON ITS WEBSITE AND UPON REQUEST. THE CONFLICT OF INTERST POLICY

IS AVAILABLE TO THE PUBLIC UPON REQUEST.

THE ORGANIZATION MAKES ITS ANNUAL AUDITS AVAILABLE ON ITS WEBSITE AND UPON REQUEST. IN ADDITION, THE 990 IS ALSO AVAILABLE ON ITS WEBSITE AND UPON REQUEST.

AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST. IT
MAKES ITS ANNUAL AUDITS AVAILABLE ON ITS WEBSITE AND UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

632212 08-25-16

Schedule O (Form 990 or 990-EZ) (2016)

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization CENTER FOR DEMOCRACY AND TECHNOLOGY	Employer identification number 52-1905358
INTERNATIONAL PROGRAM WORK:	32 2303330
PROGRAM SERVICE EXPENSES	359,354.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	359,354.
U.S. PROGRAM WORK:	
PROGRAM SERVICE EXPENSES	211,392.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	211,392.
SUPPLIER FEES:	
PROGRAM SERVICE EXPENSES	249.
MANAGEMENT AND GENERAL EXPENSES	7,195.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	7,444.
COMMUNICATIONS:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	233.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	233.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	578,423.