Form **990**

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

A	For the	e 2014 caien	dar year, or tax year begin	ning	, 2014,	and ending	9		,
В	Check if	applicable:	С				D	Employer id	dentification number
	Ado	dress change	American Council	on Carmany In	n C			13-18	89074
		-	14 East 60th Str	eet Suite 1000	10.		F	Telephone r	
		me change	New York, NY 100		,		-	·	
	Initi	ial return	New TOLK, NI 100	22 1000				(212)	826-3636
	Fina	l return/terminated							
	Am	ended return					G	Gross receip	pts \$ 5,659,777.
	Apr	olication pending	F Name and address of principa	officer: William R	. Harman	, Esq.	H(a) Is this a gro		
			Same As C Above			_	H(b) Are all subo	rdinates incl	
_	Tau			\d (insert no)	4047(a)(1) av	F07	If 'No,' attac	h a list. (see	e instructions)
<u> </u>		xempt status	X 501(c)(3) 501(c) () ◀ (insert no.)	4947(a)(1) or	527			
J	Web	site: ► WW	w.acgusa.org				H(c) Group exem	ption number	er ►
K	Form	of organization:	X Corporation Trust	Association Other ►	LY	ear of formation	on: 1952	M State	e of legal domicile: NY
Pa	ırt I	Summar	v						
	1 [Briefly descri	be the organization's missi	on or most significant ac	ctivities: Th	e Amer	ican Cour	ncil o	n Germany (ACG)
		is an in	dependent, nonpa	rtisan nonprofi					
ဦ			aders from busin						
<u>na</u>		Europe.	<u> </u>	<u> </u>	/_ <u>unu_</u>	<u></u>		<u> </u>	<u> </u>
ě		Check this bo	y ▶ if the organization	n discontinued its opera	tions or dispo	sed of mor	e than 25% c	of its net :	
Ĝ			oting members of the gover						3 29
୶୪	4 1	Number of in	dependent voting members	s of the governing body (Part VI. line	1h)		···· 	1 29
es			of individuals employed in						5 10
₹			of volunteers (estimate if						10
Activities & Governance			ed business revenue from F	3.					7a 0.
ď			business taxable income	• •					7b 0.
	, D	rect difficiated	business taxable income	110111 1 01111 330 1, 1111C 3-	T		Prior		Current Year
	١ ,	O a maturi be esti a ma	and grants (Dart \ /III line	16)					
<u>9</u>			and grants (Part VIII, line	•				72,719	
Ĕ		-	rice revenue (Part VIII, line					54,171	
Revenue			ncome (Part VIII, column (A	·				91,419	657,147.
Œ			e (Part VIII, column (A), lir		•				
			e – add lines 8 through 11					18,309	2,069,117.
	13 (Grants and si	imilar amounts paid (Part I	X, column (A), lines 1-3)		1	95,650	76,450.
	14	Benefits paid	to or for members (Part I)	(, column (A), line 4)					
	15	Salaries, othe	er compensation, employee	e benefits (Part IX, colur	nn (A), lines 5	5-10)	9:	22,105	988,883.
Expenses	162	Professional	fundraising fees (Part IX, o	rolumn (A) line 11e)				,_,	300,0001
ens			· ·	• • •					
- Š			sing expenses (Part IX, col			9,446.			
ш	17 (Other expens	ses (Part IX, column (A), lir	nes 11a-11d, 11f-24e)			9	64,011	1,044,561.
	18	Total expense	es. Add lines 13-17 (must e	equal Part IX, column (A	A), line 25)		2,0	81,766	
	19 F	Revenue less	expenses. Subtract line 1	8 from line 12				36,543	
ts or			'				Beginning of	•	
a je	20	Total assets ((Part X, line 16)					69,892	
Net Assets Fund Balan	21		s (Part X, line 26)				12,0	76,652	
₹ĕ			•						
			fund balances. Subtract li	ne 21 from line 20			12,3	93,240	12,102,552.
Pa	rt II	Signatur	e Block						
Unde	er penalti	ies of perjury, I de	eclare that I have examined this retairer (other than officer) is based on	urn, including accompanying sch	nedules and staten	nents, and to t	the best of my kno	owledge and	belief, it is true, correct, and
com	olete. De	claration of prepa	arer (other than officer) is based on	all information of which prepare	r has any knowled	ige.			
Sig	ın	Signatu	re of officer				Date		
He	re	Wil	liam R. Harman, E	Esq.			Treasur	er	
	. •		print name and title.	104.			TICASAL	CI	
			preparer's name	Preparer's signature		Date	Cha	ck if	: PTIN
_			·	1 '	£1-		Che	ш	
Pa			C. Ashenfarb	David C. Ashen	.iarb	1	self-	employed	P00535436
	epare		DOINIDE & HOIL						
US	e Onl	y Firm's addre	ess * <u>307 5th Ave,</u>	15th Floor			Firm	ı's EIN ► 1	13-4036703
			NEW YORK, NY	10016-6517			Pho	ne no. (2	212) 268-2800
May	the IF	RS discuss th	is return with the preparer		ructions)				X Yes No

	1 990 (American Co	unci.	<u>L on German</u>	y, Inc.			13-1	88907	4	Page 2
Pai	rt III		ment of Progra		•							7.7
						to any line in this Pa	art III					X
1	-	-	e the organization	's miss	ion:							
	<u>See</u>	<u>Sched</u>	<u>lule 0</u>									
2						services during the ye						Ī
											Yes X	No
			ibe these new serv								_	•
3	Did th	ne organi	zation cease cond	ucting,	or make significa	nt changes in how it	t conducts, a	any program se	rvices?		Yes X	No
	If 'Yes	s,' descri	ibe these changes	on Sch	iedule O.							
4	Descr	ribe the c	organization's prog	ram se	rvice accomplish	ments for each of its ed to report the amo	three larges	st program serv	ices, as m	easured	by expen	ses.
	Section and re	on 501(c, evenue)(3) and 501(c)(4) if any, for each pro	organız Saram 9	zations are require service reported	ed to report the amo	unt of grants	s and allocation	is to other	s, the to	tai expens	ses,
	ana n	ovonao,	ir driy, for oddir pro	ograii i	sorvice reported.							
1.	(Code	· ·) (Evpopeoe	¢	1 766 750	including grants of	¢) (Povonuo	Ċ	11 -	740)
4 6								_			•	748.
	<u>See</u>	<u>Scheo</u>	<u>lule_0</u> _							. – – –		
41	(Code	e:) (Expenses	\$		including grants of	\$) (Revenue	\$)
	•			-			· -					·
4 ((Code	e:) (Expenses	\$		including grants of	\$)(Revenue	\$)
		·			_		·	<u>.</u>				
										. – – – -		
4 (n services. (Descri	be in S	•							
	(Expe	enses	\$		including grant) (Revenue \$)	
4 6	• Total	program	service expenses	•	1,766,	758.						

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

Form 990 (2014) American Council on Germany, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22	Х	
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? <i>If 'Yes,' complete Schedule J.</i>	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
k	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
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? <i>If</i> 'Yes', <i>complete Schedule L, Part II.</i>	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ł	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		Х
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		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ł	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

BAA Form **990** (2014)

Form 990 (2014) American Council on Germany, Inc. Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V......

	Check if Schedule O contains a response or note to any line in this Part V				. []
				Yes	No
	inter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a {	3		
bΕ	inter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b)		
c D	old the organization comply with backup withholding rules for reportable payments to vendors gambling) winnings to prize winners?	and reportable gaming	1 c	X	
2 a E	Inter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- nents, filed for the calendar year ending with or within the year covered by this return	2a 10	1		
	at least one is reported on line 2a, did the organization file all required federal employment		2 b	Х	
	lote. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see ins				
	oid the organization have unrelated business gross income of \$1,000 or more during the year	•	3 a		Χ
b If	'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule 0</i>		3 b		
4a A	t any time during the calendar year, did the organization have an interest in, or a signature or nancial account in a foreign country (such as a bank account, securities account, or other fir	or other authority over, a nancial account)?	4 a	Х	
	'Yes,' enter the name of the foreign country: Germany	,			
	ee instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Fin	, ,			
	las the organization a party to a prohibited tax shelter transaction at any time during the tax	-			X
	old any taxable party notify the organization that it was or is a party to a prohibited tax shelte		5 b		Х
c If	'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6a D s	loes the organization have annual gross receipts that are normally greater than \$100,000, are olicit any contributions that were not tax deductible as charitable contributions?	d did the organization	6 a		Х
	'Yes,' did the organization include with every solicitation an express statement that such color tax deductible?		6 b		
7 C	organizations that may receive deductible contributions under section 170(c).				
a D	old the organization receive a payment in excess of \$75 made partly as a contribution and partives provided to the payor?	artly for goods and	7 a	X	
	'Yes,' did the organization notify the donor of the value of the goods or services provided?.		7 a		
	id the organization sell, exchange, or otherwise dispose of tangible personal property for wh		7.5		
F	orm 8282?		7 c		Х
	'Yes,' indicate the number of Forms 8282 filed during the year	7 d			37
	tid the organization receive any funds, directly or indirectly, to pay premiums on a personal because it is a second of the contract of the co		7 e		X
	tid the organization, during the year, pay premiums, directly or indirectly, on a personal bene		7 f		Λ
a	the organization received a contribution of qualified intellectual property, did the organizations required?		7 g		
F	the organization received a contribution of cars, boats, airplanes, or other vehicles, did the orm 1098-C?		7 h		
	ponsoring organizations maintaining donor advised funds. Did a donor advised fund main rganization have excess business holdings at any time during the year?		8		
	ponsoring organizations maintaining donor advised funds.				
	id the sponsoring organization make any taxable distributions under section 4966?		9 a		
	id the sponsoring organization make a distribution to a donor, donor advisor, or related pers				
	ection 501(c)(7) organizations. Enter:				
a Ir	nitiation fees and capital contributions included on Part VIII, line 12	10a			
b G	cross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 S	ection 501(c)(12) organizations. Enter:				
a G	cross income from members or shareholders	11 a			
b G	aross income from other sources (Do not net amounts due or paid to other sources gainst amounts due or received from them.)	11 b			
2a S	ection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	Form 1041?	12a		
b If	'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
	ection 501(c)(29) qualified nonprofit health insurance issuers.				
	s the organization licensed to issue qualified health plans in more than one state?		13a		
	lote. See the instructions for additional information the organization must report on Schedule	O.			
	inter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
	inter the amount of reserves on hand	13c			
	old the organization receive any payments for indoor tanning services during the tax year?			1	X
b lf	'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	chedule O	14b	agn /	(001.1:
				· uun /	

Form 990 (2014) American Council on Germany, Inc. 13-1889074 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...... Section A. Governing Body and Management Yes Nο 29 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent..... 29 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee?..... Χ 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Χ Did the organization have members or stockholders?..... 6 7 a 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?... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b Χ X **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13..... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ 12b to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule . O Χ 12 c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... 14 Χ 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official .. See. Schedule . 0 Χ 15 a 15b Χ If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Χ taxable entity during the year?..... 16 a 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 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

New York NY 10022-1006 (212) 826-3636

Karen Furey 14 East 60th Street, Suite 1000

Form 990 (2014)	American	Council	on	Germany.	Inc.
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13-1889074

Page **7**

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

- 1 a 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

employees; and former such persons. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (do not check more than one box, unless person is both an officer and a (B) (E) (F) Name and Title Reportable compensation from Reportable compensation from Estimated amount of other Average hours director/trustee) per week (list any the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) compensation from the organization Officer ndividual nstitutional lighest compensated employee hours fo and related related organizations organiza tions l trustee below dotted line) (1) Paul Stewart Atkins, 1 Esq. Director 0 Χ 0 0 0. (2) Anne E. Cohen, Esq. 1 0 Χ 0 0 Director 0. (3) Alex_M._Azar_II 1 0 Χ Director 0 0 0. (4) Lee Cullum 1 Χ Director 0 0 0 0. (5) Dr. Martin Bussmann 1 Χ Director 0 0 0 0. (6) David W. Detjen, Esq. 1 Director 0 Χ 0 0 0. (7) Arthur Yorke Allen 1 0 Χ 0 0. 0. Director (8) William M. Drozdiak 40 0 Χ Χ 235,000 0 24,270. President (9) James W. Cicconi, Esq 1 Director 0 Χ 0 0 0. (10) Richard W. Fisher 1 0 Director Χ 0 0 0. Dr. Guido Goldman 1 0 Χ 0 0 0. Director (12) Robert M. Kimmitt 1 Chairman 0 Χ Χ 0 0 0. (13) Andrew Gundlach 1 0 Χ 0 0. Director 0. (14) Henry A. Kissinger 1 Director 0 Χ 0 0. 0.

BAA TEEA0107L 02/27/14 Form **990** (2014)

	(B)			((;)								
(A)	Average			heck		e than		(D)	(E)		(F)		
Name and title	hours per	box	, unle	ss pe	erson	is both or/trus	h an	Reportable compensation from	Reportable compensation from		stimated unt of other	er	
	week (list any	역 글	킀	Q	<u>~</u>	e E	ਹ	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	con	npensation from the		
	hours for	Individual trustee or director	nstitutional trustee	Officer	Key employee	jhes!	Former	(=)	(=)	org	ganization nd related		
	related organiza	를 필	ona	_	plo	ee Toon	~			org	anizations	S	
	- tions below	TUS!	tru:		ee	nper							
	dotted line)	8	stee			Highest compensated employee							
						ä							
(15) William R. Harman, Esq.	1												
Treasurer	0	X		X				0.	0.			0.	
(16) Brian K. Klein	1								0			0	
Director	0	Х						0.	0.			0.	
(17) Dr. Richard M. Hunt	1	v		v				0	0.			0	
Vice Chairman 0 X X 0.									0.			0.	
<u>(18) Dr. Klaus Kleinfeld</u> 1 0 X 0.										0			
(19) Dr. Karl Kaiser	1	Λ						0.	0.			0.	
Director	1	X						0.	0.			0.	
(20) Marne Levine	1	71						0.	0.			0.	
Director		X						0.	0.			0.	
(21) Francis J. Kelly	1							0.	0.			<u> </u>	
Director	0	Х						0.	0.			0.	
(22) Alan S. MacDonald	1												
Director	0	Χ						0.	0.			0.	
(23) John J. McCloy II	1												
Director	0	Χ						0.	0.			0.	
(24) Tammy S. Murphy	1												
Director	0	X						0.	0.			0.	
(25) Joseph McLaughlin, Esq.	1							_					
Director	0	X					L	0.	0.			<u>0.</u>	
1 b Sub-total							•	235,000.	0.		24,2		
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							.	275,117.	0.		36,8		
2 Total number of individuals (including but not limit							rec	510,117.		ole com	61,1		
from the organization > 3	tou to the	/3C II.	sicu	abc	vcj	WIIO	100	cived more than 4	7100,000 of reportal	JIC COIT	рспзап	1011	
											Yes	No	
3 Did the organization list any former officer, direct	or or trus	stee	kev	emi	nlov	'ee 0	ır hi	ahest compensate	ed employee				
on line 1a? If 'Yes,' complete Schedule J for such	individua	al			ριο y 					3		Χ	
4 For any individual listed on line 1a, is the sum of	reportable	e cor	nper	าsat	ion	and o	othe	er compensation fr	om				
the organization and related organizations greate	r than \$15	50,00	0'? /	If 'Y	es' (comp	lete	Schedule J for		4	Х		
such individual										``⊢—	Λ		
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	compens ' complet	satioi <i>le Sc</i>	n tro <i>hedu</i>	om a ule u	any i <i>I for</i>	unrei ' <i>such</i>	atec 1 <i>pe</i>	d organization or i erson	ndividual	5		Χ	
Section B. Independent Contractors											<u></u>		
1 Complete this table for your five highest compens compensation from the organization. Report compensation from the organization.	ated inde	pend	lent	con	trac	tors t	that	received more that	an \$100,000 of	tay yas	· ·		
· · · · · · · · · · · · · · · · · · ·	Jensalion	101 (ne c	alei	iuai	year	en		-				
(A) Name and business address (B) Description of services Compensation													
2 Total number of independent contractors (including	-	limit	ted t	o th	ose	liste	d at	pove) who receive	d more than				
\$100,000 of compensation from the organization													
BAA		TEEAC	าากฆ	03/0	19/15					Form	990 (2	20141	

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2014

Department of the Treasury Internal Revenue Service

lame of the Organization Employler Identification number tunerican Council on Germany, Inc. 13-1889074

American Council on Germany, Inc.

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Highest Compensated Employees												
(A)	(B)		(C)					(D)	(E)	(F)		
Name and Title	Average hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director				B Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations		
Marie M. Warburg, MD Director	10	X						0.	0.	0.		
<u>Dale L. Ponikvar, Esq.</u> Counsel	1	X		Х				0.	0.	0.		
Ulrike K. Schlafly Director	1	X						0.	0.	0.		
<u>Christopher M. Schroeder</u> <u>Director</u>		X						0.	0.	0.		
Lt. Gen. Brent Scowcroft Director		Х						0.	0.	0.		
Karen Furey Corp Sec/ExecVP	<u> 40</u> _	-		Х				127,500.	0.	21,592.		
Helena Kane Finn VP/Dir. Prgms.	<u> 40</u> _	-		Х				147,617.	0.	15,289.		
		-										
		-										
		•										
		-										
		-										
		-										
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		-										
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		-										
		-										
		-										
		-										
		-								Form 990 Cont 2014		

	inc.		13-18890/4	Page 9
Part VIII Statement of Revenue				
Check if Schedule O contains a response or note to an	y line in this Part VI	II		
	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1 a Federated campaigns 1 a					
ran M	b Membership dues					
S E	c Fundraising events	518,492.				
iifts	d Related organizations 1 d	,				
a, G	e Government grants (contributions) 1 e					
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above 1 f	881,730.				
t d	g Noncash contributions included in lines 1a-1f: \$					
<u>ਹ ਫ਼</u>	h Total. Add lines 1a-1f		1,400,222.			
Program Service Revenue		Business Code	44 540	44 540		
eke	2a <u>Discussion programs</u> , <u>lunc</u>		11,748.	11,748.		
e e	b					
Ģ.	C					
Se	d					
a	e					
g	f All other program service revenue					
ď	g Total. Add lines 2a-2f		11,748.			
	3 Investment income (including dividends, in					
	other similar amounts)	L	278,855.			278,855.
	4 Income from investment of tax-exempt bor	· L				
	5 Royalties					
	(i) Real	(ii) Personal				
	6 a Gross rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of (i) Securities	(ii) Other				
	assets other than inventory 3,870,846.					
	b Less: cost or other basis					
	and sales expenses 3, 492, 554.					
	c Gain or (loss) 378,292.					
	d Net gain or (loss)		378,292.			378,292.
nue	8a Gross income from fundraising events					
go.	(not including. \$\\$518,492.\ of contributions reported on line 1c).					
æ	See Part IV, line 18 a	98,106.				
<u>a</u>	b Less: direct expenses	98,106.				
Other Rev	c Net income or (loss) from fundraising ever					
J	9 a Gross income from gaming activities. See Part IV, line 19 a	10				
	b Less: direct expenses b					
	c Net income or (loss) from gaming activities	· •				
		5				
	10 a Gross sales of inventory, less returns and allowances a					
	b Less: cost of goods sold					
	c Net income or (loss) from sales of inventor	ry				
	Miscellaneous Revenue	Business Code				
	11 a					
	b					
	c					
	d All other revenue					_
	e Total. Add lines 11a-11d					
	12 Total revenue. See instructions		2.069.117	11,748.	0.	657,147.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a re not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.		expenses	general expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22	46,000.	46,000.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	30,450.	30,450.		
4	Benefits paid to or for members	517 -551	00, 1000		
5	Compensation of current officers, directors, trustees, and key employees	571,564.	503,651.	28,448.	39,465.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	262,242.	232,456.	25,399.	4,387.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	22,617.	19,966.	1,461.	1,190.
9	Other employee benefits	80,440.	71,014.	5,195.	4,231.
10	Payroll taxes	52,020.	45,925.	3,359.	2,736.
11	Fees for services (non-employees):	02/0201	10/3201	0,003.	277001
a	Management				
	Legal				
	: Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
•	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	114,150.	4,773.	109,277.	100.
13	Office expenses	41,804.	35,713.	3,461.	2,630.
14	Information technology	37,513.	10,777.	26,094.	642.
15	Royalties.	37,313.	10,777.	20,004.	042.
16	Occupancy	151,707.	133,931.	9,797.	7,979.
17	Travel	290,068.	280,161.	9,803.	104.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	230,000.	2007101.	3,003.	101.
19 20	Conferences, conventions, and meetings				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	44,084.	38,918.	2,847.	2,319.
23	Insurance	7,687.	6,787.	496.	404.
	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.)	7,007.	0,707.	150.	101.
a	Discussion programs & meetings	287,023.	280,188.	6,454.	381.
Ł	Indirect fundraising expenses	21,474.			21,474.
c	Public policy program	17,772.	17,772.		
	Miscellaneous	16,985.	1,713.	15,272.	
e	All other expenses	14,294.	6,563.	6,327.	1,404.
25	Total functional expenses. Add lines 1 through 24e	2,109,894.	1,766,758.	253,690.	89,446.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

-		Check if Schedule O contains a response or note to	any line	in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			336,619.	1	302,038.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		61,332.	3	60,349.	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former of trustees, key employees, and highest compensated er	nplovees	. Complete			
		Part II of Schedule L		<u></u>		5	
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958 employers and sponsoring organizations of section 50 beneficiary organizations (see instructions). Complete	(c)(3)(B) 1(c)(9) v	, and contributing oluntary employees'		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
A	9	Prepaid expenses and deferred charges			20,650.	9	22,626.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	243,485.			
	b	Less: accumulated depreciation		61,195.	48,033.	10 c	182,290.
	11	Investments — publicly traded securities			12,167,354.	11	11,746,456.
	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			35,904.	15	35,904.
	16	Total assets. Add lines 1 through 15 (must equal line	12,669,892.	16	12,349,663.		
	17	Accounts payable and accrued expenses		174,911.	17	143,978.	
	18	Grants payable		_	85,650.	18	84,829.
	19	Deferred revenue		-		19	
	20	Tax-exempt bond liabilities		<u> </u>		20	
ies	21	Escrow or custodial account liability. Complete Part IV				21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	l disqualit	fied persons.		22	
	23	Secured mortgages and notes payable to unrelated th		_		23	
	24	Unsecured notes and loans payable to unrelated third		<u></u>		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Comp	•		16,091.	25	18,304.
	26	Total liabilities. Add lines 17 through 25			276,652.	26	247,111.
S		Organizations that follow SFAS 117 (ASC 958), check lines 27 through 29, and lines 33 and 34.			<u>, </u>		•
ဦ	27	Unrestricted net assets			12,359,153.	27	12,035,168.
<u>a</u>	28	Temporarily restricted net assets.			34,087.	28	67,384.
8	29	Permanently restricted net assets		<u> </u>	34,007.	29	07,304.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958)					
5		and complete lines 30 through 34.		l l			
ध	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or equipm				31	
ţ,	32	Retained earnings, endowment, accumulated income,				32	
ş	33	Total net assets or fund balances		<u> </u> _	12,393,240.	33	12,102,552.
	34	Total liabilities and net assets/fund balances			12,669,892.	34	12,349,663.

BAA Form **990** (2014)

_	Tanolican Council on Colmany, Inc.		±0050	,,,		9 -
Pa	art XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	1 Total revenue (must equal Part VIII, column (A), line 12)		1	2,0	069,1	117.
2	2 Total expenses (must equal Part IX, column (A), line 25)		2	2,1	109,8	394.
3	Revenue less expenses. Subtract line 2 from line 1.		3	-	-40,7	777.
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4	12,3	393,2	240.
5	5 Net unrealized gains (losses) on investments		5		249,9	
6	6 Donated services and use of facilities		6			
7	7 Investment expenses		7			
8	8 Prior period adjustments		8			
9	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	12,1	L02,5	552 .
Pa	art XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					🔲
					Yes	No
1	1 Accounting method used to prepare the Form 990:					
				_		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2 8	2a Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled	or rovious	lono			
	separate basis, consolidated basis, or both:	OI TEVIEWED	i Uii a			
	Separate basis Consolidated basis Both consolidated and separate basis					
ı	b Were the organization's financial statements audited by an independent accountant?			2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited o					
	basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for ow review, or compilation of its financial statements and selection of an independent accountant?	ersight of th	e audit,	,		
	review, or compilation of its financial statements and selection of an independent accountant?			20	X	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain				
2.	in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set for	orth in the S	inale			
3	Audit Act and OMB Circular A-133?		yıc	За		Х
ı	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo	ao the reaui	red aud	dit		
•	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				,	

BAA Form **990** (2014)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2014

Name of the organization Employer identification number American Council on Germany, Inc. 13-1889074 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 11, 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.) 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 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.) 5 6 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.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 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.) 10 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 11 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.** 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 is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations..... **g** Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (v) Amount of monetary (vi) Amount of other (iv) Is the organization listed in your governing organization support (see instructions) support (see instructions) (see instructions)) document? Yes Nο (A) (B) (C) (D) (E) Total

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

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.)

Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 1 Gifts, grants, contributions, and membership fees received. (0o not include any 'unusual grants.) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. 3 The value of services or facilities furnished by a governmental unit to the organization without charge. 4 Total. Add lines 1 through 3. 5 The portion of total contributions by each person (other than a governmental	(f) Total 7,179,257. 0.							
membership fees received. (Do not include any 'unusual grants.)								
organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental	0.							
facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental								
5 The portion of total contributions by each person (other than a governmental	0.							
contributions by each person (other than a governmental	7,179,257.							
unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	163,449.							
6 Public support. Subtract line 5 from line 4	7,015,808.							
Section B. Total Support								
Calendar year (or fiscal year beginning in) ► (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014	(f) Total							
7 Amounts from line 4	7,179,257.							
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,150,594.							
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0.							
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0.							
11 Total support. Add lines 7 through 10	8,329,851.							
12 Gross receipts from related activities, etc (see instructions)	65,919.							
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3 organization, check this box and stop here	8) ▶ □							
Section C. Computation of Public Support Percentage								
14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	84.22%							
15 Public support percentage from 2013 Schedule A, Part II, line 14	82.71 %							
16a 33-1/3% support test — 2014. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, claim and stop here. The organization qualifies as a publicly supported organization	check this box ► X							
b 33-1/3% support test — 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.								
17a 10%-facts-and-circumstances test − 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization								
b 10%-facts-and-circumstances test — 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part's organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization	VI how the ▶							
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see inst	tructions							

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

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

Sec	tion A. Public Support							
	dar year (or fiscal yr beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	1	(f) Total
1	Gifts, grants, contributions and membership fees							
	received. (Do not include							
2	any 'unusual grants.') Gross receipts from admis-							
2	sions, merchandise sold or							
	services performed, or facilities							
	furnished in any activity that is related to the organization's							
	tax-exempt purpose							
3	Gross receipts from activities							
	that are not an unrelated trade or business under section 513.							
1	Tax revenues levied for the							
-	organization's benefit and							
	either paid to or expended on							
5	its behalf							
,	facilities furnished by a							
	governmental unit to the							
_	organization without charge							
	Total. Add lines 1 through 5 Amounts included on lines 1.							
1 0	2, and 3 received from							
	disqualified persons							
b	Amounts included on lines 2							
	and 3 received from other than disqualified persons that							
	exceed the greater of \$5,000 or							
	1% of the amount on line 13							
	for the year							
	: Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6.)							
Sec	tion B. Total Support							
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	1	(f) Total
	Amounts from line 6							
10 a	Gross income from interest, dividends,							
	payments received on securities loans, rents, royalties and income from							
	similar sources							
b	Unrelated business taxable income (less section 511							
	taxes) from businesses							
	acquired after June 30, 1975							
C	Add lines 10a and 10b							
11	Net income from unrelated business							
	activities not included in line 10b, whether or not the business is							
	regularly carried on					<u> </u>		
12	Other income. Do not include							
	gain or loss from the sale of capital assets (Explain in							
	Part VI.)							
13	Total support. (Add lines 9, 10c, 11 and 12.)							
14	First five years. If the Form 990	L is for the organiza	l ation's first secon	I nd third fourth or	l r fifth tay year as s	l a section 501	(c)(3)	
	organization, check this box and	stop here					· (=)(=)	<u></u> ► □
Sec	tion C. Computation of Pu	blic Support F	Percentage					
	Public support percentage for 20	•	• •			4	15	%
16	Public support percentage from 2	2013 Schedule A,	Part III, line 15	<u></u>	<u></u>		16	%
Sec	tion D. Computation of Inv							
17	Investment income percentage for	or 2014 (line 10c,	column (f) divide	d by line 13, colur	mn (f))		17	%
18	Investment income percentage fr					<u>.</u>	18	%
19 a	33-1/3% support tests – 2014. If is not more than 33-1/3%, check	the organization this box and stop	did not check the here. The organ	box on line 14, a ization qualifies a	nd line 15 is more s a publicly suppo	than 33-1/3 orted organiz	%, and lination	ne 17 ► ∏
b	33-1/3% support tests – 2013. If line 18 is not more than 33-1/3%	the organization	did not check a b	ox on line 14 or li	ne 19a, and line 1	6 is more th	an 33-1/3	%, and
20	Private foundation. If the organiz		•				-	

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
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	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3 a	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)			
56	and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
_	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	3с		
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and	_		
	if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
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	4c		
5 a	a 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)	5a		
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?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of	•		
	the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,'			
Ū	complete Part I of Schedule L (Form 990)	8		
9 a	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	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9с		
10 a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below.	10a		
h	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.)	10b		

Pa	art IV	Supporting Organizations (continued)			
				Yes	No
11		he organization accepted a gift or contribution from any of the following persons?			
	gover	son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the ning body of a supported organization?	11a		
	b A fam	nily member of a person described in (a) above?	11b		
	c A 35%	% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c		
Se	ction E	3. Type I Supporting Organizations			
				Yes	No
1	or ele Part \ If the direct	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint act at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, seed to such powers during the tax year.	1		
2	Did the that of the benefit	ne organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Se		C. Type II Supporting Organizations	_		
		7 Type II Capper III. g Crgain_attone		Yes	No
1	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s)	1	163	
Se	ction D	D. All Type III Supporting Organizations			
				Yes	No
1	organ year,	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were organ	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how reganization maintained a close and continuous working relationship with the supported organization(s)	2		
3		ason of the relationship described in (2), did the organization's supported organizations have a significant			
	voice all tin	in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played is regard.	3		
Se		E. Type III Functionally-Integrated Supporting Organizations			
-	CHOII E	Type in tunetionally integrated Supporting Organizations			
1	Checi	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi	ons):		
	a ⊤	he organization satisfied the Activities Test. Complete line 2 below.			
	ь □⊤	he organization is the parent of each of its supported organizations. Complete line 3 below.			
	c T	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	structi	ons).	
2	2 Activi	ties Test. Answer (a) and (b) below.		Yes	No
	suppo orgar respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported inizations and explain how these activities directly furthered their exempt purposes, how the organization was possive to those supported organizations, and how the organization determined that these activities constituted antially all of its activities.	2a		
	b Did the or the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the ization's involvement.	2b		
3	P arer	nt of Supported Organizations. Answer (a) and (b) below.			
	a Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI</i>	3a		
	b Did the	ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		

Schedule A	(Form 990	or 990-EZ) 2014	American	Council	οn	Germany	Tnc
ocificadie A	(1011101)	01 330-LZ) 2014	Allierican	Council	OH	Germany,	THC.

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organiz	ation	S	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust other Type III non-functionally integrated supporting organizations must complete	on No Sectio	vember 20, 1970. See ins A through E.	nstructions. All
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions.	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions).	6		
7	Other expenses (see instructions).	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
ā	Average monthly value of securities	1a		
- 1	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions.	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-integ (see instructions).	grated		
RΔΔ			Schedule A (F	orm 990 or 990-F7) 2014

	tion D — Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purp			
	Amounts paid to supported organizations to accomplish exempt purp	oses		
2	Amounts paid to perform activity that directly furthers exempt purpos in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organi in Part VI). See instructions			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount.			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D, line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			

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Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 American Council on Germany, Inc. 13-1889074 Page

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 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.

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

American Council on Germany, Inc.	13-1889074
Part I Organizations Maintaining Donor Advised Funds or Oth Complete if the organization answered 'Yes' to Form 990	ner Similar Funds or Accounts.
(a) Donor advised	funds (b) Funds and other accounts
1 Total number at end of year	
2 Aggregate value of contributions to (during year)	
3 Aggregate value of grants from (during year)	
4 Aggregate value at end of year	
5 Did the organization inform all donors and donor advisors in writing that the are the organization's property, subject to the organization's exclusive legal of	assets held in donor advised funds control? Yes No
6 Did the organization inform all grantees, donors, and donor advisors in writin for charitable purposes and not for the benefit of the donor or donor advisor, impermissible private benefit?	or for any other purpose conferring Yes No
Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990	, Part IV, line 7.
1 Purpose(s) of conservation easements held by the organization (check all the	at 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	n contribution in the form of a conservation easement on the
last day of the tax year.	Held at the End of the Tax Year
a Total number of conservation easements	
b Total acreage restricted by conservation easements	
c Number of conservation easements on a certified historic structure included	
d Number of conservation easements included in (c) acquired after 8/17/06, ar	``
structure listed in the National Register.	
3 Number of conservation easements modified, transferred, released, extinguis tax year ►	shed, or terminated by the organization during the
4 Number of states where property subject to conservation easement is located	d ►
5 Does the organization have a written policy regarding the periodic monitoring and enforcement of the conservation easements it holds?	· ·
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing or	onservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conse ►\$	rvation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the recand section 170(h)(4)(B)(ii)?	
9 In Part XIII, describe how the organization reports conservation easements in include, if applicable, the text of the footnote to the organization's financial s conservation easements.	n its revenue and expense statement, and balance sheet, and statements that describes the organization's accounting for
Part III Organizations Maintaining Collections of Art, Historical Complete if the organization answered 'Yes' to Form 990	Treasures, or Other Similar Assets. , Part IV, line 8.
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to art, historical treasures, or other similar assets held for public exhibition, edu in Part XIII, the text of the footnote to its financial statements that describes	acation, or research in furtherance of public service, provide,
b If the organization elected, as permitted under SFAS 116 (ASC 958), to reponsition treasures, or other similar assets held for public exhibition, education following amounts relating to these items:	on, or research in furtherance of public service, provide the
(i) Revenue included in Form 990, Part VIII, line 1	
(ii) Assets included in Form 990, Part X	·
2 If the organization received or held works of art, historical treasures, or other amounts required to be reported under SFAS 116 (ASC 958) relating to these	e items:
a Revenue included in Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·
b Assets included in Form 990, Part X	▶\$

Part III Organizations Maintainin	g Collections	s of Art, Histo	orical Treasures, o	r Other Similar Ass	sets (co	<u>วทtınเ</u>	ıed)
3 Using the organization's acquisition, a items (check all that apply):	ccession, and of	ther records, che	ck any of the following	that are a significant us	e of its c	ollectio	on
a Public exhibition		d Loan o	or exchange programs				
b Scholarly research		e Other					
c Preservation for future generation	S						
4 Provide a description of the organizati Part XIII.	on's collections	and explain how	they further the organi	zation's exempt purpose	e in		
5 During the year, did the organization s to be sold to raise funds rather than to	be maintained	as part of the or	ganization's collection?		Yes	[No
Part IV Escrow and Custodial Ar line 9, or reported an amount	rangements. ount on Form	Complete if t 990, Part X,	the organization ar line 21.	nswered 'Yes' to Fo	rm 990	, Par	t IV,
1 a Is the organization an agent, trustee, on Form 990, Part X?	custodian, or oth	ner intermediary	for contributions or othe	er assets not included	Yes	Γ	No
b If 'Yes,' explain the arrangement in Pa						<u>L</u>	_
					Amount		
c Beginning balance				1с			
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance							
2a Did the organization include an amoun	nt on Form 990,	Part X, line 21, t	for escrow or custodial	account liability?	Yes		No
b If 'Yes,' explain the arrangement in Pa	art XIII. Check he	ere if the explana	ation has been provided	d in Part XIII		L	
					- 10		
Part V Endowment Funds. Comp		ĭ					
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Fo	our years	back
1 a Beginning of year balance							
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships							
e Other expenditures for facilities and programs							
f Administrative expenses							
q End of year balance							
2 Provide the estimated percentage of t	he current vear e	L end balance (line	e 1g. column (a)) held a	ns:			
a Board designated or quasi-endowmen	-	%	, rg, co.a (a),				
b Permanent endowment ►	- %	 -					
c Temporarily restricted endowment		%					
The percentages in lines 2a, 2b, and 2	2c should equal						
3a Are there endowment funds not in the organization by:	possession of ti	ne organization t	nat are neid and admir	listered for the		Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(ii), are the related organ	izations listed as	required on Sch	nedule R?				
4 Describe in Part XIII the intended use:	s of the organiza	tion's endowmer	nt funds.		<u> </u>		
Part VI Land, Buildings, and Equ	ipment.						
Complete if the organizatio		es' to Form 9	90, Part IV, line 11	a. See Form 990, Pa	art X, Iii	ne 10	١.
Description of property		t or other basis		(c) Accumulated		ook va	
	(ir	vestment)	(b) Cost or other basis (other)	depreciation	(u) D		
1 a Land							
b Buildings							
c Leasehold improvements							
d Equipment			243,485.	61,195.		182,	290.
e Other							
Total. Add lines 1a through 1e. (Column (d)	must equal Fori	т 990, Part X, с	olumn (B), line 10c.)	· · · · · · · · · · · · · · · · · · ·		182,	,290.

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Schedule **D** (Form 990) 2014

Part VII	Investments – Other Securities.		N/A	
	Complete if the organization answered "			
	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-	year market value
	ial derivatives			
	-held equity interests			
(3) Other				
(A) (B)				
(C) (D)				
(E)				
(F)				
(G)				
(H)				
(l)				
	nn (b) must equal Form 990, Part X, column (B) line 12.) 🕨			
Part VIII	Investments – Program Related.	Vasi ta Farra 000 i	N/A	land V lina 10
	Complete if the organization answered ' (a) Description of investment type		(c) Method of valuation: Cost or end-	
(1)	(a) Description of investment type	(b) Book value	(c) Method of Valuation. Cost of end-	or-year market value
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX	Other Assets. Complete if the organization answered 'Y	N/ <i>I</i> es' to Form 990 P:	<u>A</u> art IV line 11d. See Form 990. Par	X line 15
		scription	are rv, mile rra. Gee r omi 330, r ar	(b) Book value
(1)	``	•		, ,
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
(10)				
	lumn (b) must equal Form 990, Part X, column (b	3), line 15.)		
Part X	Other Liabilities.	000 David IV Lina 11a	11f Coo Forms 000 Dowl V Line 0F	
	Complete if the organization answered 'Yes' to Form (a) Description of liability	(b) Book value		
(1) Fede	ral income taxes	(b) Book Value		
	erred Rent	18,3	04.	
(3)		Í		
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
(11)				
Total. (Colun	nn (b) must equal Form 990, Part X, column (B) line 25.)	. • 18,3	04.	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	1,893,529.
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		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	-175,588.
3 Subtract line 2e from line 1	3	2,069,117.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,069,117.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	rn.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	2,184,217.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	74,323.
3 Subtract line 2e from line 1	3	2,109,894.
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		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4 c	2 109 894
		/ IU9 X94

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

Part X - FIN 48 Footnote

ACG does not believe its financial statements include any material, uncertain tax positions. Tax filings for periods ending December 31, 2011 and later are subject to examination by applicable taxing authorities.

BAA Schedule **D** (Form 990) 2014

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.

Open to F

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Ame	erican Council on	Germany, Ir	nc.		13-18890						
Pa	rt I General Informat on Form 990, Par	ion on Activiti rt IV, line 14b.	es Outside th	e United States. Comple	te if the organizatio	n answered 'Yes'					
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?										
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Part V										
3	Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)										
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region Pt V					
(1)	Europe			Grantmaking	Fellowships	40,850.					
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
10)											
11)											
12)											
13)											
14)											
15)											
16)											
17)											
3 8	Sub-total					40,850.					
ł	Total from continuation sheets to Part I										

0

40,850.

0

13-1889074

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	>	
3	Enter total number of other organizations or entities	<u> </u>	

BAA

Schedule **F** (Form 990) 2014

Schedule F (Form 990) 2014 American Council on Germany, Inc.

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Fellowships	Europe	15	30,450.	Check			
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
BAA				1		Schedule F	(Form 990) 2014

Schedule F (Form 990) 2014 American Council on Germ.	any, Inc
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13-1889074

Page 4

OCITIC	American Council on Germany, The.	13 1003074	i age ¬
Pa	rt IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	_	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization marequired to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Ce 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).	ertain	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 Ce Foreign Corporations (see Instructions for Form 5471)	ertain	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qual 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).	on	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).	n	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 file Form 5713, International Boycott Report (see Instruction for Form 5713; do not file with Form 990).	ns Yes	X No

BAA TEEA3505L 06/16/13

Schedule **F** (Form 990) 2014

Part V Supplemental Information

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

Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US

The fellowship stipends are granted for travel to either the US or Germany. Payment in the form of a per diem (\$200) is provided in advance of their travel to cover meals and lodging. Additional payments may be made upon the Fellows' return, for example if rental car is needed, or an additional rail ticket. A portion is withheld until final report upon completion of fellowship is submitted.

Part I, Line 3f - Investments & Expenditures Per Region

Today, roughly 30 Americans and Germans travel each year through the Council's fellowships, gaining a better understanding of how issues are approached on the other side of the Atlantic and forging lasting connections with their transatlantic counterparts and fellowship alumni alike.

BAA TEEA3504L 08/18/14 Schedule **F** (Form 990) 2014

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 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.

Open to Pub

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

2014

Name of the organization					Employer identific	
American Council on Germa					13-188907	7.4
Part I Fundraising Activities. Comp	quired to compl	ete this pa	art.			
1 Indicate whether the organization i	aised funds thr	ough any	of the follo			
a Mail solicitations			е	Solicitation of non-	government grants	
b Internet and email solicitations	;		f	Solicitation of gove	rnment grants	
c Phone solicitations			q	Special fundraising	events	
d In-person solicitations			9			
2a Did the organization have a writter employees listed in Form 990, Par						
b If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	dividuals or enti	ities (fundr				
(i) Name and address of individual	(ii) Activity	(iii) Did	fundraiser	(iv) Gross receipts	(v) Amount paid to	(vi) Amount paid to
or entity (fundraiser)		have custoo	dy or control ibutions?	from activity	(or retained by) fundraiser listed in column (i)	(or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						0.
List all states in which the organization or licensing.	ation is register	ed or licen	ised to sol	icit contributions or has	been notified it is exer	mpt from registration

Schedule G (Form 990 or 990-EZ) 2014 American Council on Germany, Inc. 13-1889074 Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (d) Total events (a) Event #1 **(b)** Event #2 (c) Other events (add column (a) <u>Awards</u> Dinner None through column (c) (event type) (event type) (total number) REVENUE 1 Gross receipts..... 616,598. 616,598. 518,492. 518,492. **3** Gross income (line 1 minus line 2)..... 98,106. 98,106. 5 Noncash prizes..... 6 Rent/facility costs..... 7 Food and beverages Other direct expenses..... 98,106. 98,106. 10 Direct expense summary. Add lines 4 through 9 in column (d). 98,106. Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/Instant (c) Other gaming (d) Total gaming (add column (a) through column (c)) REVENUE bingo/progressive bingo Gross revenue.... 2 Cash prizes D X P E N C T S 3 Noncash prizes..... Rent/facility costs..... **5** Other direct expenses..... Yes Yes Yes No No No 8 Net gaming income summary. Subtract line 7 from line 1, column (d)..... ▶ **9** Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states?b If 'No,' explain:	Yes	No
10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If 'Yes,' explain:	Yes	No

sch	edule G (Form 990 or 990-EZ) 2014 American Council on Germany, Inc.	13-18890) 74	Page 3
	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity f administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:	1 1		
	a The organization's facility	13a		%
	b An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books a	nd records:		
	Name •			
	Address ►	. – – – – –		
	a Does the organization have a contact with a third party from whom the organization receives gaming reven b If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ and of gaming revenue retained by the third party ▶ \$ c If 'Yes,' enter name and address of the third party:		Yes	No
	Name •			1
	Address •			
16	Gaming manager information:			
	Name •			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to restate gaming license?	etain the	Yes	No
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations of	r spent in the)	
	organization's own exempt activities during the tax year 🕨 \$			
<u>Pa</u>	Supplemental Information. Provide the explanations required by Part I, line 2b, and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide information (see instructions).	columns (i any addition	ii) and onal	(v),

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number 13-1889074 American Council on Germany, Inc. Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' to Form 990. Part IV. line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization (b) EIN (c) IRC section if applicable (d) Amount of cash grant (f) Method of valuation (book, FMV, appraisal, (e) Amount of non-cash (a) Description of (h) Purpose of grant or assistance (3) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 3 Enter total number of other organizations listed in the line 1 table..... ▶

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Fellowships	11	46,000.			
2					
3					
4					
_ 5					
_ 6					
7					

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

Part IV - Additional Supplemental Information

The fellowship stipends are granted for travel to either the US or Germany. Payment of funds does not get distributed until the fellow travels and provides documentation of expenses. A portion is withheld until final report upon completion of fellowship is submitted.

BAA Schedule I (Form 990) (2014)

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

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

13-1889074 American Council on Germany, Inc Part I **Questions Regarding Compensation** Yes No 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain... 1 b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?...... 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee X Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment?..... **4** a Χ 4 b **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?..... Χ c Participate in, or receive payment from, an equity-based compensation arrangement?..... 4 c Χ If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?..... 5 a Χ **b** Any related organization?.... 5 h Χ If 'Yes' to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6 a a The organization?..... Χ **b** Any related organization? 6 b Χ If 'Yes' to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III...... 7 Χ Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III Χ If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53.4958-6(c)?..... BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2014

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

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

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

William M. Drozdiak 60 235,000. 0. 0. 0. 0. 24,270. 259,270. 1 President 60 0. 0. 0. 0. 0. 0. 0. 0. 0. 1 Helena Kane Finn 0 147,617. 0. 0. 0. 0. 15,289. 162,906. 1 2 VP/Dir. Prgms. 60 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	(A) Name and Title		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other	(D) Nontaxable	(E) Total of columns(B)(i)-(D)	(F) Compensation
William M. Drozdiak (0) 235,000, 0. 0. 0. 24,270, 259,270, 1 President (0) 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 1 President (0) 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.			(i) Base compensation	(ii) Bonus and incentive	(iii) Other reportable	deferred	benefits	columns(B)(i)-(D)	reported as
President				compensation	compensation	compensation			Form 990
President									
Helena Kane Finn 2 VP/Dir. Prgms. 60 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 3 (0) 4 (0) 5 (0) 6 (0) 7 (0) 8 (0) 9 (0) 10 (0) 11 (0) 12 (0) 13 (0) 14 (0) 15 (0) 16 (0) 17 (0) 18 (0) 19 (0) 10 (0) 11 (0) 12 (0) 13 (0) 14 (0) 15 (0) 16 (0) 17 (0) 18 (0) 19 (0) 10 (0) 10 (0) 11 (0) 12 (0) 13 (0) 14 (0) 15 (0)									0.
2 VP/Dir. Prqms. (i) 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.									0.
3 (i) (i) (i) (i) (i) (ii) (ii) (ii) (ii									<u>0.</u>
Columbia	2 VP/Dir. Prgms.		0.	0.	0.	0.	0.	0.	0.
4 (ii) (ii) (iii)	_								
4 (i) (i) (i) (ii) (ii) (ii) (ii) (ii) (3								
5 (i) (i) (i) (ii) (ii) (ii) (ii) (ii) (_							 	
5 (i) (i) (ii) (ii) (iii) (iiii) (iii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiiii) (iiiii) (iiiiii) (iiiiii) (iiiiiii) (iiiiiiii	4								
6 (i) (i) (ii) (ii) (iii) (iii	_								
6 (i) (i) (ii) (ii) (iii) (iii	5								
7 (ii) 8 (ii) 9 (ii) 10 (ii) 11 (ii) 12 (ii) 13 (ii) 14 (ii) 15 (ii)	C							 	
7 (i) (i) (i) (ii) (ii) (ii) (ii) (ii) (<u> </u>								
8 (i) (i) 9 (ii) 10 (ii) 11 (ii) 12 (ii) 12 (ii) 13 (ii) 14 (ii) 15 (ii) 15 (ii) 17 (iii) 18 (iii) 19 (iiii) 19 (iiii) 19 (iiiii) 19 (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	7							+	
8 (i) (i) (j) (ii) (ii) (ii) (ii) (ii) (i									
9 (i) (i) (ii) (ii) (ii) (iii) (iiii) (iiii) (iiiii) (iiiiiii) (iiiiiiii	8							 	
9 (i) (i) (i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiiiiii) (iiiiiiii									
10 (i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiiii) (iiiiiiii	9							†	
10 (i) (i) (ii) (ii) (ii) (ii) (ii) (ii)									
(i) (ii) (ii) (ii) (ii) (ii) (ii) (ii)	10							 	
11 (i) (i) (i) (ii) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiiiiii									
12 (ii) (ii) (iii) (iiii) (iiii) (iiiiiiii	11	(ii)						T	
13 (i) (ii) (ii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iiii) (iiii) (iiii) (iiiiii) (iiiiiiii		(i)							
13 (ii) (i) (ii) (ii) (iii) (iii) (iii) (iii) (iiii) (iiiiiiii	12								
14 (i) (ii) (ii) (iii)								L	
14 (ii) (i) (ii) (iii)	13								
(i) (ii)									
15 (ii)	14								
						L		L	
	15								_
		(i)				L		_	
16 (ii) Separate Sepa		(ii)						<u> </u>	1.65

BAA

TEEA4102L 06/19/14

Schedule J (Form 990) 2014

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.

TEEA4103L 10/17/14

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

American Council on Germany, Inc.

13-1889074

Form 990, Part III, Line 1 - Organization Mission

The American Council on Germany (ACG) is an independent, nonpartisan nonprofit organization which promotes dialogue among leaders from business, government, and the media in the United States and Europe. The ACG strengthens transatlantic understanding and coordinates policy initiatives on key issues in the post-September 11th world. The ACG was incorporated in 1952 in New York to encourage reconciliation and understanding following the two disastrous wars in the first half of the 20th century. Among its early leaders were John J. and Ellen McCloy, General Lucius D. Clay, Christopher Emmet, Joseph Kaskell, George N. Shuster, and Eric M. Warburg. Because of their vision of transatlantic cooperation, the Council has served as a key bridge between Germany and the United States for more than 60 years. In the 21st century, transatlantic cooperation on a range of global economic, political, and social issues is more important than ever. As the European Union continues to evolve, the ACG provides Americans with a better understanding of Europe as a whole. The ACG supports an open exchange of views and builds personal networks among leaders on both sides of the Atlantic by convening regular policy discussions around the United States and in Germany, sponsoring exchange programs for young professionals, organizing conferences and Study Tours, and publishing papers on a range of issues affecting the transatlantic relationship.

Form 990, Part III, Line 4a - Program Service Accomplishments

I. POLICY DISCUSSIONS

The American Council on Germany endeavors to expose a wide audience to economic, political, and social issues of common concern on both sides of the Atlantic through its activities in New York City and at its Eric M. Warburg Chapters around the country. The ACG provides businesspeople, policymakers, academics, and tomorrow's

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leaders on the Eastern Seaboard and in America's heartland alike with insights into German and European issues, as well as today's wide array of global challenges. The American Council on Germany's Policy Program Series in New York encompasses events with prominent officials, analysts, and other influential figures in larger, lecture-style discussion programs and smaller, high-level briefings. About 25 events are held in New York annually, providing a cohesive overview of timely issues of transatlantic and international relevance, from politics and security to economics and finance. The ACG also holds regular events in Washington, D.C., in an effort to keep Young Leader alumni and ACG members in the region engaged in transatlantic affairs. In addition, the Council offers specialized lecture series on an ongoing basis: the McCloy Lecture Series, the Arthur F. Burns Memorial Lecture, the Garrick Utley Lecture Series on Global Media Issues, and the Transatlantic Global Agenda series.

The ACG's 19 Eric M. Warburg Chapters are located in the following cities:

Alexandria, Atlanta, Boca Raton, Boston, Charlotte, Chicago, Dallas, Denver,

Indianapolis, Madison, Minneapolis/St. Paul, Nashville, Philadelphia, Phoenix,

Pittsburgh, St. Louis, San Diego, San Francisco, and Seattle. The program was

inaugurated in 1992, in order to reach beyond the business community in New York and
the policy community in Washington, D.C., by creating a forum for the discussion of

transatlantic business and political affairs in other cities across the country. This

unique nationwide outreach program is intended to encourage discussion and exchange

among the professional community in each Chapter city. Government officials,

politicians, business leaders, journalists, and policy analysts have been among those
to speak at Chapter events.

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II.YOUNG LEADERS CONFERENCES

The American Council on Germany reaches out to the next generation of decision-makers and opinion leaders by organizing conferences to familiarize them with key transatlantic issues and to enable them to establish a network of contacts across the Atlantic. The main goals of the ACG's Young Leaders programs are to provide a forum for bright, informed, and sophisticated young professionals to discuss major issues in an informal setting; to encourage participants to deal frankly with the issues on their own terms, and to explore and debate their differences and common interests; and to create an enduring community of leaders who are engaged and committed to strengthening the transatlantic partnership. The week long American-German Young Leaders Conferences bring together up to 50 Germans and Americans and take place on an annual basis. The relationships formed during the Young Leaders' brief time together serve as a valuable investment in the transatlantic relationship. Alumni have gone on to become high-ranking members of the U.S. and German governments; Congress and the Bundestag; the European Parliament; local city governments; military leaders; and editorial writers.

III.FELLOWSHIPS

Since the early 1990s, the ACG has given more than 1,000 American and German journalists, scholars, and other mid-career professionals in a variety of fields the opportunity to travel overseas and broaden their personal and professional horizons under the auspices of its fellowship programs. Today, about 30 Americans and Germans travel each year as fellows, gaining a better understanding of how issues are

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approached on the other side of the Atlantic and forging lasting connections with their transatlantic counterparts and fellowship alumni.

In 2014, the ACG expanded the scope of its McCloy Fellowship offerings to include funding for a wider range of research topics geared toward participants from a broader set of professional backgrounds. The McCloy Fellowships are open to individuals from nonprofits, think tanks, law, journalism, the public sector, and cultural organizations in relatively early stages of their careers. Mid-career professionals in the fields of urban affairs are also invited to draw upon the local expertise of their transatlantic counterparts and cull best practices overseas through McCloy Fellowships in Urban Affairs. The Anna-Maria and Stephen M. Kellen Fellowships allow Berlin-based journalists to conduct research in the United States. The ACG also supports the work of promising American scholars who are studying important elements of the transatlantic relationship from both historical and contemporary standpoints through the Dr. Guido Goldman Fellowship for the Study of German and European Economic and International Affairs and the Dr. Richard M. Hunt Fellowship for the Study of German Politics, Society, and Culture. The fellowships also represent a long-lasting investment in the future of the transatlantic relationship.

Form 990, Part VI, Line 11b - Form 990 Review Process

Management reviewed a draft of the form 990 with the audit/finance committee and provided edits to the tax preparer. After this process was performed, the form 990 was sent to the full board of directors prior to being filed with the IRS.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The organization had a board approved conflicts of interest policy. Each board member must fill out an annual declaration stating they had no conflicts or

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Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts (continued)

identifying the nature of their interested party transactions.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

All Officer salaries are reviewed on an annual basis by the board.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

All Officer salaries are reviewed on an annual basis by the board.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The Organizations governing documents are available upon request.