SCANNED SEP 29 2019

Form **990**

Return of Organization Exempt From Income Tax

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

2014

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ 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,

Open to Public

A F	or th	ne 201	4 calendar year, or tax year beginning , 2014, and ending	, 2014, and ending						
			C Name of organization	D Employe	Identific	, 20 ation number				
В	check If ap	pplicable.	ROCKEFELLER PHILANTHROPY ADVISORS, INC.	13-3	61553	33				
	Addres		Doing business as							
	7	change	Number and street (or P O, box if mail is not delivered to street address) Room/suite	E Telephon	e number	7.74				
	Initial	return	6 WEST 48TH STREET, 10TH FLOOR	(212)	812-4	1330				
	Final a	return/	City or town, state or province, country, and ZIP or foreign postal code							
	Aman	sted	NEW YORK, NY 10036	G Gross re	cerpts \$	164,846,637.				
	Applic	cation	F Name and address of principal officer MELISSA A. BERMAN		H(a) is this a group return for Yes X					
_	pendb	n g	6 WEST 48 STREET, 10TH FLOOR NEW YORK, NY 10036	Subordi H(b) Are all s		reducted? Yes No				
ī	Tax-ex	empt st				zt. (see instructions)				
J	Websit	lte: 🕨	WWW.ROCKPA.ORG	H(c) Group	exemption :	number 🕨				
K	Form o	of organ	ızation. X Corporation Trust Association Other ▶ L Year of	formation, 1992						
	art I		mmary							
	1	Briefly	describe the organization's mission or most significant activities HELP DONORS C	REATE THOU	GHTFU	L, EFFECTIVE				
g			LANTHROPY THROUGHOUT THE WORLD. RPA ASSISTS INDIVIDU							
Governance		FOU	NDATIONS, & CORPORATIONS IN ACHIEVING THEIR PHILANTH	ROPIC GOAL	s.					
Ę	2	Check	this box 🕨 📗 if the organization discontinued its operations or disposed of more tha	n 25% of its net a	ssets.					
Ś			er of voting members of the governing body (Part VI, line 1a)			18.				
	4	Numb	er of independent voting members of the governing body (Part VI, line 1b)		4	17.				
Activities &			number of individuals employed in calendar year 2014 (Part V, line 2a)			274.				
₹			number of volunteers (estimate if necessary)			0				
Ą¢	7a	Total	unrelated business revenue from Part VIII, column (C), line 12		7a	0				
			orelated business taxable income from Form 990-T, line 34			0				
				Prior Yea		Current Year				
	8	Contr	butions and grants (Part VIII, line 1h)	63,824	,498.	152,332,044.				
Revenue			am service revenue (Part VIII, line 2g)	7,560		7,338,625.				
eve	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)	1,584		1,469,642.				
œ			revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,709.	558,317.				
			revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).	73,483	,668.	161,698,628.				
			s and similar amounts paid (Part IX, column (A), lines 1-3)	33,970	,586.	63,364,165.				
			its paid to or for members (Part IX, column (A), line 4)		0	Ō				
83			es, other compensation, employee benefits (Part IX, column (A), lines 5-10)	14,357	,876.	20,718,622.				
nse			ssional fundraising fees (Part IX, column (A), line 11e)	128	,506.	225,814.				
Expens	b	Total	undraising expenses (Part IX, column (D), line 25)							
ũ	17	Other	expenses (Part IX, column (A), lines 11a-11d, 111-24e)	16,085	,634.	29,856,656.				
	18	Total	expenses. Add lines 13-17 (must equal Part IX) column (A), line 25)	64,542	,602.	114,165,257.				
	19	Reve	expenses. Add lines 13-17 (must equal Part IX) column (A), line 25) ue less expenses. Subtract line 18 from line 12. SEP. 2.1, 2015.	8,941	,066.	47,533,371.				
5 9			O ω'.	Beginning of Curr		End of Year				
ets Jan	20	Total	assets (Part X, line 16)	73,743	,259.	124,561,808.				
& 8	1		iabilities (Part X, line 26)	13,083	,534.	15,695,784.				
캶	22		sets or fund balances. Subtract line 21 from line 20	60,659	,725.	108,866,024.				
Pa	irt II	Si	gnature Block							
Un	der per	natties	of perpury, I declare that I have examined this return, including accompanying schedules and statem	nents, and to the be	st of my	knowledge and belief, it is				
tru	e, corre	ect, and	complete. Declaration of preparer (other than officer) is based on all information of which preparer has			1				
			Milliu Guireen		Sept	4, 2015				
Sig			Signature of officer							
He	re		MELISSA BERMAN							
			Type or print name and title							
		Print	Type preparer's name Preparer's signature							
Pak		sco	IT THOMPSETT Some							
	parer	Firm'	name DGRANT THORNTON LLP							
USE	Only		address ▶757 THIRD AVE., 4TH FLOOR NEW YORK, NY 1							
May	y the II		cuss this return with the preparer shown above? (see instri							
For	Paper	rwork	Reduction Act Notice, see the separate instructions.							
	•									

For	m 990 (2014) Page 2
P	art III Statement of Program Service Accomplishments
_	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission ATTACHMENT 1
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X No
2	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program
J	services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
	the total expenses, and revenue, if any, for each program service reported
	(Code) (Expenses \$ 15,429,314. including grants of \$ 14,878,676.) (Revenue \$ 0)
-	CHARITABLE FUNDS - RPA SERVES AS A GRANT-MAKING VEHICLE THAT
	ENABLES A DONOR TO MAKE RECOMMENDATIONS WITH RESPECT TO HIS OR HER
	PHILANTHROPIC OBJECTIVES.
	DDA!C CUADITADIE CIVING FUND IC A FLEVIDLE COCT PREDOCTIVE MAY DOD
	RPA'S CHARITABLE GIVING FUND IS A FLEXIBLE, COST-EFFECTIVE WAY FOR ITS DONORS TO ACHIEVE THEIR CHARITABLE AIMS. IT IS AN OPTIMAL
	ALTERNATIVE FOR INDIVIDUALS, COUPLES OR FAMILIES SEEKING EXPERT
	PHILANTHROPIC ADVICE WITHOUT THE EXPENSE AND COMPLEXITY OF FORMING
	A PRIVATE FOUNDATION.
<u>4</u> h	(Code) (Expenses \$88,408,848. Including grants of \$48,394,489.) (Revenue \$4,063,863.)
	ATTACHMENT 2
<u></u>	(Code) (Expenses \$ 5,676,897. including grants of \$ 91,000.) (Revenue \$ 3,274,762.)
	GENERAL FUND/RPA CONSULTING - TO FACILITATE PHILANTHROPY AND TO
	SUPPORT THE GROWTH OF A VITAL, CREATIVE, NOT-FOR-PROFIT SECTOR.
	RPA HAS THE SKILL AND EXPERTISE TO ENGAGE CLIENTS AT ALL STAGES OF
	THE PHILANTHROPIC LIFE CYCLE, FROM CONCEPT AND START-UP TO ONGOING
	OPERATIONS AND SUCCESSION PLANNING.
<u></u>	Other program convece (Departs in Schodule O.)
4 CI	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 109,515,059.
JSA	000 Form 990 (2014)
	8685FS 700J V 14-6F 0183477-00004 PAGE 2

Part	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	x	
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	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a		1	
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			.,
44	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		j	· ,
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
a	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more	1 I a		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	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			
42	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D				
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	· •		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	x	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (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
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	$ \hbox{ Did the organization report more than $5,000 of grants or other assistance to any domestic organization or } \\$			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \dots	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			.,
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	,	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		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			v
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			Х
	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		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			х
• •	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			х
20	Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	22		х
22	complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	х	
24	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		
34	or IV, and Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
oo a b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		
U	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	330		
30	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	30		
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	' '		
50	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
	13 Note: All Loring 330 mers are required to complete Scriedule O		990	(2014)

	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• • •	Yes	
1a Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
	r the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	the organization comply with backup withholding rules for reportable payments to vendors and			
	table gaming (gambling) winnings to prize winners?	1c	Х	
	the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	ements, filed for the calendar year ending with or within the year covered by this return . 2a 274			
b If at	least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
Note	. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a Did t	he organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	es," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	by time during the calendar year, did the organization have an interest in, or a signature or other authority			
	a financial account in a foreign country (such as a bank account, securities account, or other financial			.,
	unt)?	4a		X
	es," enter the name of the foreign country.			
	instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
(FBA				×
	the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	s" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	the organization have annual gross receipts that are normally greater than \$100,000, and did the nization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
-	es," did the organization include with every solicitation an express statement that such contributions or	Va		
	were not tax deductible?	6b		
	nizations that may receive deductible contributions under section 170(c).	,	1 48	× 4
_	the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	services provided to the payor?	7a	~r	Х
	es," did the organization notify the donor of the value of the goods or services provided?	7b		
	the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	red to file Form 8282?	7c		Х
d If "Ye	es," indicate the number of Forms 8282 filed during the year			· ·
	he organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f Did ti	he organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g If the	organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g_		
	organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3 Spor	soring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	soring organization have excess business holdings at any time during the year?	8		Х
	soring organizations maintaining donor advised funds.			
	he sponsoring organization make any taxable distributions under section 4966?	9a		X
	he sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
	ion 501(c)(7) organizations. Enter			
	tion fees and capital contributions included on Part VIII, line 12			
	s receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	s income from members or shareholders		1	
	s income from other sources (Do not net amounts due or paid to other sources			
	ast amounts due or received from them)			
_	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	es," enter the amount of tax-exempt interest received or accrued during the year		_	
	on 501(c)(29) qualified nonprofit health insurance issuers.	•		
	organization licensed to issue qualified health plans in more than one state?	13a		
	. See the instructions for additional information the organization must report on Schedule O			
	the amount of reserves the organization is required to maintain by the states in which			
	rganization is licensed to issue qualified health plans	1		
c Enter	the amount of reserves on hand	:		
4a Did ti	ne organization receive any payments for indoor tanning services during the tax year?	14a		Х
A 12 W.C.	s," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
<u>b</u> it ye sa	of the state of the separation		990	

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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 Part VI

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 18			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			1
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 17	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1		
	the year by the following		,	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		x
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	Х	L,
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		.,	
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	<u> </u>
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?		V	
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	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			\mathbf{x}^{\pm}
	with a taxable entity during the year?	16a		
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			
Saat	organization's exempt status with respect to such arrangements?	16b		
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► ATTACHMENT 3			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply Own website. X Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record TINA BEYERS 6 WEST 48 STREET, 10TH FLOOR NEW YORK, NY 10036 212-812-4330	s ►		
JSA	112-012-130V	Form	990	(2014)

8685FS 700J

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

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

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

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

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

Check this box if neither the organization nor	any related	Juga	11120			upen	3010	any current offic	er, director, or trus	166
(4)	(B)			Pos	C)			(D)	/E\	(E)
(A) Name and Title	(B) Average	(do r	not c			than o	ne	(D) Reportable	(E) Reportable	(F) Estimated
Name and the	hours per	1 .				ıs both		compensation	compensation from	amount of
	week (list any	l		-		or/trust		from	related	other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
_(1)KEVIN P. A. BRODERICK	1.00	x		x			!	0	0	. 0
(2)MELISSA A. BERMAN	35.00									
PRESIDENT AND CEO		х		х				360,017.	o	50,162.
(3)RIEN VAN GENDT	1.00									_
BOARD MEMBER		х					,	0	0	0
(4)CATHY FRANK HALSTEAD	1.00									
BOARD MEMBER		Х						0	0	0
(5)JESSE D. JOHNSON	1.00						i			
BOARD MEMBER		Х							0	0
(6)WENDY O'NEILL BOARD MEMBER	1.00	x						0	o	0
ODR. ROBERT K. ROSS BOARD MEMBER	1.00	х					I	0	О	0
(8)MARNIE S. PILLSBURY BOARD MEMBER	1.00	x						0	0	0
(9)WENDY GORDON ROCKEFELLER BOARD MEMBER	1.00	х	-				!	0	0	0
(10)DAVID KAISER	1.00	 								<u> </u>
BOARD MEMBER		х						o	О	0
(11)MICHAEL ROCKEFELLER BOARD MEMBER	1.00	х						0	0	0
(12)JUANITA JAMES	1.00									 -
BOARD MEMBER	·	x					!	0	О	o
(13)DARREN WALKER	1.00									
BOARD MEMBER		х						0	o	0
(14)STEVEN WAYNE BOARD MEMBER	1.00	х						0	0	0

Form 990 (2014)

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	ıploy	/ees	s, a	and H	lig	hest Compensat	ed Employ	ees (co	ntinue		age o
(A) Name and title	(B) Average hours per week (list any	(do i	f not che unless	(C) Positi eck m pers	ion nore son i	than o	ne an	(D) Reportable compensation from	(E) Reportal compensation related	ble on from	Es am	(F) timated ount of other	
	hours for related organizations below dotted line)	Individual trustee or director				Highest compensated employee	e) Former	the organization (W-2/1099-MISC)	organizat (W-2/1099-		fro orga and	pensation the inization in the inization in the inization in inizations	1
15) ADAM WOLFENSOHN	1.00	ł		\prod									
TREASURER	1 00	Х		x	4			C		9			0
16) PETER ROCKEFELLER BOARD MEMBER	1.00	X						_		d			0
17) BARBARA ROCKEFELLER	1.00			+	\dashv					-			
BOARD MEMBER		х			İ			l c		d			0
18) SARAH TEACHER	1.00			\top	1			-					
BOARD MEMBER		х						o		o			0
19) JUDY BELK-PEEKS (THRU 4/2/14) SENIOR VICE PRESIDENT	35.00			x				102,843.		0		17,4	60.
20) CHRIS B. PAGE	35.00				\dashv	i				- 1			
EXECUTIVE VICE PRESIDENT				x				302,278.		o		41,8	16.
21) WALTER SWEET	35.00				٦			-					
VICE PRESIDENT&CORP SECRETARY		_		x	\perp			193,084.		0		44,2	29.
22) KATHY JEAN EASON (THRU 9/15/14 VICE PRESIDENT AND CFO	35.00			x				125,430.		o		17,9	72.
23) YOLANDA A. ARIAS-BROWNELL	35.00												
VICE PRESIDENT HR				X	4			170,340.		0		34,5	81.
24) NICHOLAS HODGES (AS OF 7/7/14) SENIOR VICE PRESIDENT/COO	35.00			x				115,951.		o		7,9	43.
25) TINA MARIE BEYERS (AS OF 10/29 VICE PRESIDENT AND CFO	35.00			x		ĺ	-	29,785.		0		2,6	—— 77.
1b Sub-total								360,017.		0		50,1	
c Total from continuation sheets to Part VII, S	ection A						•	2,407,624.		0	2	88,84	43.
d Total (add lines 1b and 1c)					• •		▶	2,767,641.		0	3	39,00	05.
2 Total number of individuals (including but not reportable compensation from the organization		hose l 55		abo	ove) who	ге	ceived more than	\$100,0 0 0 c	of			
												Yes	No
3 Did the organization list any former office	er, directo	r, or	trus	tee,	, k	еу е	mp	loyee, or highest	t compens	ated			
employee on line 1a? If "Yes," complete Sched	ule J for suc	ch ind	ıvıdu	al.		· · ·					3		X
4 For any individual listed on line 1a, is the organization and related organizations groups													
individual											4	Х	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue cor	mpen	satio	n fro	om	any	uni	related organization	on or individ	dual	5		x
Section B. Independent Contractors									<u> </u>	•			
Complete this table for your five highest com- compensation from the organization. Report of year.	pensated ir ompensatio	ndepe on for	nder the	nt co cale	onti enda	ractor ar yea	rst are	hat received more inding with or with	than \$100 nin the orga	,000 of nization	's tax		
(A) Name and business add	ress	_			_			(B) Description of se	ervices	Co	(C) mpens	ation	
ATTACHMENT 4													
							igspace						
							<u> </u>						
							\vdash						

PAGE 8

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 39

Part VII Section A. Officers, Directors, Tru	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	not ch unles r and	eck s pe	more rson	n both Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation f related organization (W-2/1099-MI	from s	com fro orga	(F) stimated nount of other pensation om the anization d related anizations
26) JANE M LEVIKOW	35.00											
VICE PRESIDENT	35 00			_	X			180,702.		_9		24,622.
27) LUTHER M. RAGIN, JR. CEO-SPONSORED PROJECT	35.00					х		248,579.		۵		25,196.
28) JEFFREY NESBIT	35.00		\vdash	_	-		_	210,373.		\dashv		23,130.
EXEC. DIRECTOR, SPONSORED PROJ						X		227,906.		o		20,044.
29) ANDREW GEORGE SALKIN	35.00											
COO, SPONSORED PROJECT	25 00					Х		249,841.		_0		16,559.
30) BRYNA ANNE LIPPER VP FOR RELATIONSHIP, SPONS. PROJ	35.00					Х		234 406				10 622
31) JAMIE L. BENNETT	35.00		\vdash			^		234,496.		-4		18,633.
EXECUTIVE DIRECTOR (ARTPLACE)						х		226,389.		d		17,111.
										\neg	•	
						:						
						!				ŀ		
									_			
												-
							Ĺ					
1b Sub-total	ection A .						▼ ▼					
Total number of individuals (including but not reportable compensation from the organization)	limited to tl	nose i	isted				o re	ceived more than	\$100,000 of			
											Lauta X	Yes No
3 Did the organization list any former offic												Y X
employee on line 1a? If "Yes," complete Schedi											3	
4 For any individual listed on line 1a, is the organization and related organizations gre											2.7	
individual											4	X
5 Did any person listed on line 1a receive or	accrue coi	mpen	satio	on f	ron	any	uni	related organization	n or individua	al		
for services rendered to the organization? If "Ye	es," complet	te Sch	edul	le J	for	such	per	so <u>n</u>	· · · · · · · · ·	•	5_	X
Section B. Independent Contractors 1 Complete this table for your five highest com	nensated u	ndene	nde	nt (conf	racto	rc ti	hat received more	than \$100.00	<u> </u>	:	
compensation from the organization Report of year.												
(A) Name and business add	ress						:	(B) Description of se	rvices	Co	(C) ompens	ation
							L					
							\vdash					
							+					
-							+					
2 Total number of independent contractors (in more than \$100,000 in compensation from the				itec	d to	thos	e lı	sted above) who	received			

Pai	rt VII				orden a constitue Deut V		-	
		Check if Schedule O co	ontains a respoi	ise of note to ar	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts t	1a	Federated campaigns	1a					
iran	Ь	Membership dues						
s, G		Fundraising events	• • • • 1	-				
Contributions, Gifts, Grants and Other Similar Amounts	ď	Related organizations	1 1					
ns,	e	Government grants (contrib	1 . 1	6,044,334.				
ıtiol er S	f	All other contributions, gifts,	, i i					
i t		and similar amounts not include		146,287,710.				
ont nd (g	Noncash contributions included		1,852,963.				
	h				152,332,044.			
Program Service Revenue				Business Code				
eVe	2a	ADVISORY FEES		523930	3,274,762.	3,274,762.		
ě.	ь	ASSESSMENT FEES		523920	543,715.	543,715.		
Ş	C	MEMBERSHIP DUES		525990	2,998,925.	2,998,925.		
Sel	d	ASSESSMENT FEES/CONTRACT	S (SPONSORED PR	0 900099	521,223.	521,223.		
Ε	e							_
160.	f	All other program service rev	venue					
<u> </u>	g	Total. Add lines 2a-2f			7,338,625.	ji	źż	4
	3	Investment income (in	cluding divider	ids, interest,				
		and other similar amounts).		🟲	1,183,035.			1,183,035
	4	Income from investment of		· .	0			<u> </u>
	5	Royalties			15,000.			15,000
			(ı) Real	(II) Personal	♦ € *	, ,*	À »	· *,
	6a	Gross rents	297,574.					
	b	Less' rental expenses				\$' ≥ 2'	,	, 54
	C	Rental income or (loss)	297,574.					
	d	Net rental income or (loss	(i) Securities	(II) Other	297,574.			297,574
	7a	Gross amount from sales of	 ``	(II) Other				
		assets other than inventory	3,434,616.			~₩	*	
	b	Less: cost or other basis	3,148,009.				,	
		and sales expenses	286,607.				,	
	d	Gain or (loss)		·	286,607.			286,607
d)	i	Net gain or (loss)			200,007.			200,007
ž	ва	Gross income from fundra	•					
Š		events (not including \$ of contributions reported on						
æ		See Part IV, line 18	•]				
ē	Ь	Less: direct expenses						
Other Revenue		Net income or (loss) from fu			0		·	
J		Gross income from gaming						
		See Part IV, line 19						
	ь	Less direct expenses						
		Net income or (loss) from g			0			
	10a	Gross sales of invent	ory, less					
		returns and allowances	a					
	ь	Less cost of goods sold			-			
	С	Net income or (loss) from sa			0			
	<u> </u>	Miscellaneous Reven		Business Code		_ 		
	11a	ACE EDUCATIONAL CONTRACT		900099	245,743.	245,743.		
	b		-	<u> </u>				
	C							
	ď	All other revenue						
	e	Total. Add lines 11a-11d ·			245,743			
	12	Total revenue. See instruction	ons	▶	161,698,628.	7,584,368.		1,782,216.

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 resp				
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	51,343,289.	51,343,289.		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			1
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	12,020,876.	12,020,876.		,
5	Compensation of current officers, directors, trustees, and key employees	1,589,108.	806,403.	774,547.	8,158.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	14,747,386.	13,875,147.	872,239.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	933,864.	812,960.	120,411.	493.
9	Other employee benefits	1,951,044.	1,698,449.	251,564.	1,031.
10	Payroll taxes	1,505,378.	1,310,481.	194,101.	796.
11		d			
	n Management	496,701.	335,027.	161,674.	
	Accounting	201,788.	•	201,788.	
	I Lobbying	0			
	Professional fundraising services See Part IV, line 17,	217,656.			217,656.
	f Investment management fees	70,225.		70,225.	
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O). ATCH .5.	13,057,348.	12,879,530.	395,474.	-217,656.
12	Advertising and promotion	649,943.	566,979.	82,964.	
13	Office expenses	894,262.	858,606.	35,533.	123.
14	Information technology	1,571,077.	1,407,101.	163,168.	808.
15	Royalties	2,781,406.	2,143,022.	635,237.	3,147.
16	Occupancy	3,340,812.	3,191,113.	149,699.	3,147.
17 18	Payments of travel or entertainment expenses		3,131,113.	143,033.	
	for any federal, state, or local public officials	728,575.	711,712.	16,863.	
19	Conferences, conventions, and meetings	77,621.	711,712.	77,621.	
20 21	Interest	0		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
22	Depreciation, depletion, and amortization	281,710.	176,973.	104,221.	516.
23	Insurance	111,073.	537.	110,536.	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column			1	
	(A) amount, list line 24e expenses on Schedule O)				
_	PROGRAM RELATED FEES	1,820,803.	1,820,803.		
_	RESEARCH FEES	2,203,538.	2,203,538.		
•	GRANTS ASSESSMENT	543,715.	543,715.	217 261	
	TEMP HELP/EMPLOYMENT AGENCY	1,026,059.	808,798.	217,261.	
	All other expenses	114,165,257.	109,515,059.	4,635,126.	15,072.
	Total functional expenses. Add lines 1 through 24e 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	111,100,201.	109, 313, 039.	4,033,120.	13,072.
	following SOP 98-2 (ASC 958-720)				
JSA				·-· · · · · · · · · · · · · · · · · · ·	Form 990 (2014)

JSA 4E1052 1 000 Form 990 (2014)

Part	X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this	⊃art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	15,162,129.	1	62,982,789.
	2	Savings and temporary cash investments.	23,010,537.	2	23,546,472.
	3	Pledges and grants receivable, net	349,250.	3	2,151,953.
	4	Accounts receivable, net	1,020,312.	4	791,434.
	5	Loans and other receivables from current and former officers, directors,	•		
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L	_	5	C
	6	Loans and other receivables from other disqualified persons (as defined under section		2	* ,
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			* '
		organizations (see instructions) Complete Part II of Schedule L	d	6	C
Assets	7	Notes and loans receivable, net	q	7	C
Ass	8	Inventories for sale or use	. L	8	0
- 1	9	Prepaid expenses and deferred charges	. 99,343.	9	244,935.
11	0 a	Land, buildings, and equipment cost or	, , ,		322
		other basis Complete Part VI of Schedule D 2,821,832		<u>`</u>	
	b	Less: accumulated depreciation			1,343,312.
1	1	Investments - publicly traded securities			28,634,940.
1:	2	Investments - other securities See Part IV, line 11			4,865,973.
1	3	Investments - program-related See Part IV, line 11	1,000,000.	13	0
1.	4	Intangible assets	. 9	14	0
1	5	Other assets See Part IV, line 11		15	0
1		Total assets. Add lines 1 through 15 (must equal line 34)			124,561,808.
1		Accounts payable and accrued expenses			5,403,031.
1		Grants payable			5,672,886.
1		Deferred revenue	•		1,929,801.
2		Tax-exempt bond liabilities		20	0
Liabilities 8 8		Escrow or custodial account liability Complete Part IV of Schedule D		21	, , , , , , , , , , , , , , , , , , ,
2	2	Loans and other payables to current and former officers, directors,	18		
Lia		trustees, key employees, highest compensated employees, and		22	
2	,	disqualified persons Complete Part II of Schedule L			1,065,000.
2		Unsecured notes and loans payable to unrelated third parties	• ————	24	2,000,000
2		Other liabilities (including federal income tax, payables to related third			1
-	•	parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	1,625,066.
2	6	Total liabilities. Add lines 17 through 25		26	15,695,784.
		Organizations that follow SFAS 117 (ASC 958), check here X and		,	
Balances 7		complete lines 27 through 29, and lines 33 and 34.	40.000		
<u>E</u> 2		Unrestricted net assets	43,958,245.	27	33,956,186.
8 2		Temporarily restricted net assets	16,701,480.	28	74,909,838.
Fund	9	Permanently restricted net assets		29	0
or Fi		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34			
	0	Capital stock or trust principal, or current funds		30	
Assets	1	Paid-in or capital surplus, or land, building, or equipment fund		31	
	2	Retained earnings, endowment, accumulated income, or other funds		32	
2 N	3	Total net assets or fund balances	60,659,725.	33	108,866,024.
3	4	Total liabilities and net assets/fund balances	. 73,743,259.	34	124,561,808.
					Form 990 (2014)

Form **990** (2014)

of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in

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

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

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

Х Form 990 (2014)

Х

3a

3b

Х 2c

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

► 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

Employer identification number

ROCKEFELLE	R PHILANTHROP	Y ADVISORS, I	INC.			13	-3615533
Part I Rea	son for Public Cha	arity Status (All	organizations must o	complet	e this pa	art.) See instructions).
			t is (For lines 1 through	_			<u> </u>
1 A chur	ch, convention of ch	urches, or associa	tion of churches desc	ribed in s	ection 1	l70(b)(1)(A)(i).	
2 A scho	ool déscribed in <mark>sect</mark>	ion 170(b)(1)(A)(ii)	. (Attach Schedule E.)				
3 A hos	oital or a cooperative	e hospital service o	rganization described	ın sectio	n 170(b))(1)(A)(iii).	
4 A med	ical research organi	zation operated in	conjunction with a hos	spital de	scribed i	n section 170(b)(1)(A)	(iii). Enter the
hospit	al's name, city, and s	state					.
5 An org	ganization operated	for the benefit of	a college or universit	y owner	d or ope	erated by a governme	ental unit described in
sectio	n 170(b)(1)(A)(iv). ((Complete Part II)					
6 A fede	ral, state, or local ge	overnment or gove	rnmental unit describe	d in sect	ion 170	(b)(1)(A)(v).	
7 X An org	janization that norm	ially receives a sul	ostantial part of its su	ipport fr	om a go	vernmental unit or fro	om the general public
descri	bed in section 170(b)(1)(A)(vi). (Comp	lete Part II)				
₩		•	o)(1)(A)(vi). (Complete				
						contributions, memb	•
					-	otions, and (2) no mo	
, ,	_					e (less section 511	tax) from businesses
			975 See section 509			•	
	•	•	usively to test for publi	•		, ,, ,	
						functions of, or to car	•
						ion 509(a)(2). See se	
	=					and complete lines 11e	-
		•	•	-		orted organization(s),	
	• •		• • • • • • • • • • • • • • • • • • • •	elect a m	ajority o	of the directors or trus	tees of the supporting
. –	nization You must o						
		-				supported organizati	
	-	· · · · -	=	tne sam	e persor	ns that control or man	lage the supported
	nization(s) You mus	-	•	tod in a	opposto	en with and functional	lly intograted with
	=		ns) You must comple			in with, and functional	ny miegrateu with,
	· ·		•			ection with its suppor	tod organization(s)
						oution requirement and	
		-	omplete Part IV, Sect	-		•	an attentiveness
	· '	•	-			hat it is a Type I, Type I	I Tyne III
	-		tionally integrated sup				, . , po
	number of supported						
		-	orted organization(s)				
(i) Name of s	upported organization	(ii) EIN	(III) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
			(described on lines 1-9 above or IRC section		ur governing ment?	support (see instructions)	other support (see instructions)
			(see instructions))			,	
				Yes	No		
(A)							
				ļ			
(B)							
·				1			
(C)							
• •			_	-	-		
(D)							
					 		
(E)							
				-	1		
Total				1			

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.)

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	35,218,801.	79,019,333.	41,754,138.	63,824,498.	152,332,044.	372,148,814.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0	
4	Total. Add lines 1 through 3	35,218,801.	79,019,333	41,754,138.	63,824,498.	152,332,044.	372,148,814	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)						100,621,023.	
_6	Public support. Subtract line 5 from line 4					1	271,527,791.	
	tion B. Total Support		F T					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
7	Amounts from line 4	35,218,801.	79,019,333.	41,754,138.	63,824,498.	152,332,044.	372,148,814.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	729,346.	1,053,546.	1,154,472.	1,114,620.	1,495,609.	5,547,593.	
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	546,659.	110,252.	103,511.	260,060.	245,743.	1,266,225.	
44	(Explain in Part VI) . ATCH. 1	340,033.	110,232.	103,311.	200,000.	240,745.	378,962,632.	
11 12	Total support. Add lines 7 through 10	and instructions)	L		***	12	30,414,848.	
13	Gross receipts from related activities, etc. (s First five years. If the Form 990 is fi	•						
13	organization, check this box and stop here							
Sec	tion C. Computation of Public Sup			· · · · · · · · · · · · · · · · · · ·				
14	Public support percentage for 2014 (li			11. column (f))		14	71.65%	
15	Public support percentage from 2013		•			15	66.95%	
16a	331/3% support test - 2014. If the o						e, check	
	this box and stop here. The organization	_					. [37]	
b	331/3% support test - 2013. If the c	organization did	not check a bo	ox on line 13 o	r 16a, and line	15 is 331/3%	or more,	
	check this box and stop here. The orga	anization qualifi	es as a publicly :	supported orgai	nization		▶ ∐	
17a	10%-facts-and-circumstances test - 2	2014 . If the org	anization did no	ot check a box	on line 13, 16a	a, or 16b, and li	ne 14 is	
	10% or more, and if the organization					•	•	
	Part VI how the organization meets t	the "facts-and-c	ircumstances" te	est The organiz	zation qualifies	as a publicly su	pported	
	organization						▶ ∟	
b	10%-facts-and-circumstances test - 2		•					
	15 is 10% or more, and if the orga						-	
	Explain in Part VI how the organizati				•	•		
	supported organization						▶ ∐	
18	Private foundation. If the organization							
	instructions		<u></u>	• • • • • • • • •				

Dort III	Support Schedule	for (Organizations D	oscribad in	Saction	E00/a\/2\
L GT L III	Support Schedule	101	Organizations D	escribed in	Section	DUBIAILE

(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.)

	 <u></u>	 				·	
	tion A. Public Support		T		1		
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants")			_			
2	Gross receipts from admissions, merchandise						
	sold or services 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					j	
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						-
D	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from				S. 12 3	3	
_	line 6)				* (*	20 Ct - 40 - 40	
Sec	tion B. Total Support		T	r 			
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 10 a	Amounts from line 6						
ь	Unrelated business taxable income (less			,			
_	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or		İ				
	loss from the sale of capital assets						
13	(Explain in Part VI)			<u> </u>			
13							
14	and 12)		n'e firet socond	third fourth as	fifth tay year a	5 2 SOCTION 501	70/2)
	organization, check this box and stop here.						
Sec	tion C. Computation of Public Sup			• • • • • • • • •	• • • • • • • •	· · · · · · · · · · ·	••••
15	Public support percentage for 2014 (line 8,			mn (f))		15	 %
16	Public support percentage from 2013 Sche					16	
	tion D. Computation of Investmen					10 [
17	Investment income percentage for 2014 (lin			3 column (f))		17	0/_
18	Investment income percentage from 2013					 	<u>%</u> %
	33 1/3% support tests - 2014. If the org					18 s than 331/3% :	
	17 is not more than 331/3%, check this						
h	331/3% support tests - 2013 If the orga						
U	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization						
20	Tittate roundation, it the Organization	and Hot Check	a DUX UII IIIIB	14, 13a, UI 190	, check this bo	x and see instr	uctions -

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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 F. If you checked 11d of Part I. complete Sections A and D. and complete Part V.)

Secti	on A. All Supporting Organizations	(V.)		
0000	on 72 74. Outporting 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		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the determination	3b		
c 4a	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 Was any supported organization not organized in the United States ("foreign supported organization")? If	3c		
b	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below 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	4a 4b	* 7	Ž
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		19-23
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	** ?		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с	<u> </u>	
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," complete Part I of Schedule L (Form 990)	8_		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	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		
С	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.	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

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Schedule A (Form 990 or 990-EZ) 2014

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of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990 or 990-EZ) 2014

2b

За

activities but for the organization's involvement

Parent of Supported Organizations Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these

Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

Schedule A (Form 990 or 990-EZ) 2014 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions, All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior 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 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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) a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e 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 4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by 035 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount **Current Year** 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 5 6 Distributable Amount Subtract line 5 from line 4, unless subject to

Schedule A (Form 990 or 990-EZ) 2014

instructions).

emergency temporary reduction (see instructions)

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

Part		Supporting Organizat	ions (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo			
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 organization is resp	onsive	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	····		
(Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-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			5
h	Applied to 2014 distributable amount	·		
<u>i</u>	Carryover from 2009 not applied (see instructions)			######################################
	Remainder Subtract lines 3g, 3h, and 3i from 3f.			*
4	Distributions for 2014 from Section			
	D, line 7 \$			
a	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2014 distributable amount			
C	Remainder Subtract lines 4a and 4b from 4			*
5	Remaining underdistributions for years prior to 2014, if	ĺ		
	any Subtract lines 3g and 4a from line 2 (if amount			
6	greater than zero, see instructions) Remaining underdistributions for 2014. Subtract lines 3h			***
6				
	and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015 Add lines 3		"	
•	and 4c			
8	Breakdown of line 7			
a	DICERCOWN OF HITE !			
<u>a</u>				
<u>c</u>				
d	Excess from 2013			
e	Excess from 2014			
	LAUGOO HUIII ZU IT	l		

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014

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

ATTACHMENT 1 SCHEDULE A, PART II - OTHER INCOME DESCRIPTION 2010 2011 2012 2013 2014 TOTAL 1,266,225. OTHER INCOME 546,659. 110,252. 103,511. 260,060. 245,743. TOTALS 103,511. 260,060. 1,266,225. 546,659.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations: Complete Part I-A only If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization Employer identification number ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures.....▶\$__ Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ Enter the amount of any excise tax incurred by organization managers under section 4955 . . ▶ \$ ___ Yes No Yes No b If "Yes." describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities......▶\$ Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (c) EIN (a) Name (b) Address (d) Amount paid from (e) Amount of political filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization. If none, enter -0-(1) (2)

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

Schedule C (Form 990 or 990-EZ) 2014

(3)

(4)

(5)

(6)

Sch	edule C (Form 990 or 990-EZ) 2014 ROCKEF	ELLER	PHILANTHROPY	ADVISORS,	INC.	13-3	615533	Page 2
Pa	Complete if the organization section 501(h)).	on is ex	cempt under sect	ion 501(c)(3)	and filed	Form 5768 (elec	ction under	
Α	Check ► if the filing organization name, address, EIN, exp						roup memb	er's
В	Check ▶ If the filing organization	checke	ed box A and "limit	ed control" pro	visions a	pply		
	Limits on Lobb (The term "expenditures" mo			ed.)	orga	(a) Filing inization's totals	(b) Affilia group to	
1a	Total lobbying expenditures to influence	public of	pinion (grass roots l	obbying)				
t	Total lobbying expenditures to influence	a legisla	itive body (direct lob	bying)	. [781,075.		
c	Total lobbying expenditures (add lines 1	a and 1b)			781,075.		
	Other exempt purpose expenditures					13,370,190.		
	Total exempt purpose expenditures (add					14,151,265.		
f	Lobbying nontaxable amount Enter the	e amoun	nt from the following	ig table in bot	n			
	columns					1,000,000.		
	If the amount on line 1e, column (a) or (b) is:	The lobb	oying nontaxable amou	unt is:				
	Not over \$500,000		he amount on line 1e		_ ,			
	Over \$500,000 but not over \$1,000,000	\$100,000	0 plus 15% of the exce	ess over \$500,000	<u></u>			
	Over \$1,000,000 but not over \$1,500,000	\$175,000	0 plus 10% of the exce	ess over \$1,000,0	00	,	*	
	Over \$1,500,000 but not over \$17,000,000	\$225,000	0 plus 5% of the exces	ss over \$1,500,00	<u>D</u>	,	•	
	Over \$17,000,000	\$1,000,0	000					1
g	Grassroots nontaxable amount (enter 25	% of line	: 1f)	. .		250,000.		
h	Subtract line 1g from line 1a. If zero or le	ess, enter	r -0	. .		0		0
	Subtract line 1f from line 1c If zero or le					0		0
	If there is an amount other than zero	on eithe	er line 1h or line 1	i, did the orga	nization fil			
	reporting section 4911 tax for this year?						Yes	No

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expend	itures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	721,000.	649,000.	96,000.	633,075.	2,099,075.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2014

	t max m	(:	a)		(b)	
descripti	th "Yes," response to lines 1a through 11 below, provide in Part IV a detailed ion of the lobbying activity	Yes	No		Amo		
	ring the year, did the filing organization attempt to influence foreign, national, state or local islation, including any attempt to influence public opinion on a legislative matter or					•	
_	erendum, through the use of						
a \/al	huntagra?						
b Pai	d staff or management (include compensation in expenses reported on lines 1c through 1i)?			1			
c Me	dia advertisements?			1			-
d Ma	ilings to members, legislators, or the public?						
e Put	blications, or published or broadcast statements?						
f Gra	ants to other organizations for lobbying purposes?						
g Dire	ect contact with legislators, their staffs, government officials, or a legislative body?						
h Rai	lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
	ner activities?						
j Tot	al Add lines 1c through 1i		, ,				
2a Did	the activities in line 1 cause the organization to be not described in section $501(c)(3)$?			/ · '.	· 		
b If "	Yes," enter the amount of any tax incurred under section 4912						
	Yes," enter the amount of any tax incurred by organization managers under section 4912		-				
	ne filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					-	
Part III	-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ectio	n		
	301(0)(0).					Yes	N
1 We	ere substantially all (90% or more) dues received nondeductible by members?				1		
2 Did	the organization make only in-house lobbying expenditures of \$2,000 or less?				2		\vdash
3 Did	the organization agree to carry over lobbying and political expenditures from the prior year?		• • •	 	3		┢
	B Complete if the organization is exempt under section 501(c)(4), section 501					L	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	OR (b) Pa	rt III- <i>A</i>	, line	3, is	
	answered "Yes."						
1 Due	es, assessments and similar amounts from members			1			
2 Sec	ction 162(e) nondeductible lobbying and political expenditures (do not include amou	nts (of				
-	itical expenses for which the section 527(f) tax was paid).						
a Cur							
	rent year			2a			
b Car	ryover from last year						
b Car	ryover from last year al			2a			
b Carc Tota3 Agg	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	 		2a 2b			
b Carc Tota3 Agg4 If no	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion	of the	 ne	2a 2b 2c			
b Carc Tota3 Agg4 If no excel	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible to	of the	· · · · · · · · · · · · · · · · · · ·	2a 2b 2c 3			
b Car c Tota 3 Agg 4 If no excent	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible lo political expenditure next year?	of the	e e	2a 2b 2c 3			
b Car c Tota 3 Agg 4 If no excent and 5 Tax	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible lo political expenditure next year? able amount of lobbying and political expenditures (see instructions)	of the	e e	2a 2b 2c 3			
b Car c Tota 3 Agg 4 If n exce and 5 Tax Part IV	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible lo political expenditure next year? able amount of lobbying and political expenditures (see instructions)	of the	e e e e e e e e e e e e e e e e e e e	2a 2b 2c 3 4 5	II-A, Iı	nes 1	a
b Car c Tota 3 Agg 4 If ne excent and 5 Tax Part IV	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible lo political expenditure next year? able amount of lobbying and political expenditures (see instructions) Supplemental Information he descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated	of the	e e e e e e e e e e e e e e e e e e e	2a 2b 2c 3 4 5	II-A, lı	nes 1	aı
b Car c Tota 3 Agg 4 If n exce and 5 Tax Part IV	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible lo political expenditure next year? able amount of lobbying and political expenditures (see instructions) Supplemental Information he descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated	of the	e e e e e e e e e e e e e e e e e e e	2a 2b 2c 3 4 5	II-A, Iı	nes 1	ar
b Car c Tota 3 Agg 4 If n exc and 5 Tax Part IV	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible lo political expenditure next year? able amount of lobbying and political expenditures (see instructions) Supplemental Information he descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated	of the	e e e e e e e e e e e e e e e e e e e	2a 2b 2c 3 4 5	II-A, lı	nes 1	an
b Car c Tota 3 Agg 4 If n exc and 5 Tax Part IV	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible lo political expenditure next year? able amount of lobbying and political expenditures (see instructions) Supplemental Information he descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated	of the	e e e e e e e e e e e e e e e e e e e	2a 2b 2c 3 4 5	II-A, lı	nes 1	an
b Car c Tota 3 Agg 4 If n exc and 5 Tax Part IV	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible lo political expenditure next year? able amount of lobbying and political expenditures (see instructions) Supplemental Information he descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated	of the	e e e e e e e e e e e e e e e e e e e	2a 2b 2c 3 4 5	II-A, lı	nes 1	ar
b Car c Tota 3 Agg 4 If n exc and 5 Tax Part IV	ryover from last year al gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due otices were sent and the amount on line 2c exceeds the amount on line 3, what portion ess does the organization agree to carryover to the reasonable estimate of nondeductible lo political expenditure next year? able amount of lobbying and political expenditures (see instructions) Supplemental Information he descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated	of the	e e e e e e e e e e e e e e e e e e e	2a 2b 2c 3 4 5	II-A, lı	nes 1	ar

JSA 4E1266 2 000 8685FS 700J Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014

Part IV Supplemental Information (continued)

Page 4

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 76. 14,467,121. Aggregate value of contributions to (during year) 14,878,676. Aggregate value of grants from (during year) . . 27,084,210. Aggregate value at end of year. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised X Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose X Yes Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year 2a Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register...... 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ ______ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i). In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items 1a If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

2	Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as			
а	Board designated or quasi-endowment > %			
b	Permanent endowment			
С	Temporarily restricted endowment ▶ %			
	The percentages in lines 2a, 2b, and 2c should equal 100%			
3 a	Are there endowment funds not in the possession of the organization that are held and administered for the			
	organization by	ſ	Yes	Ī
	(i) unrelated organizations	3a(i)		-
		3a(ii)		_

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Describe in Part XIII the intended uses of the organization's endowment funds

Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) depreciation **b** Buildings c Leasehold improvements 1,562,017. 699,045 862,972. d Equipment 1,259,815. 779,475 480,340. Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) 1,343,312.

Schedule D (Form 990) 2014

Page	P	3

Part VII	Investments - Other Securities.	"Voo" to Form 000	Part IV line 11h See Form 000 Part V line 12
			, Part IV, line 11b See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	al derivatives		
	-held equity interests		
(3) Other_			
(<u>A)</u>			
(<u>B)</u>			
(C)			
		 	
(F)			
(H)			
	n (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>	
Part VIII		"Yes" to Form 990	, Part IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
_(1)			
_(2)			
_(3)			
_(4)			
_(5)			
(6)			
_(7)		 	
(8)		_ .	
(9)			
	n (b) must equal Form 990, Part X, col (B) line 13)		
Part IX	Other Assets.	"V" t- C 000	Deat IV line 444 Con Forms 000 Deat V line 45
			, Part IV, line 11d. See Form 990, Part X, line 15.
	(a) Des	cription	(b) Book value
(1)			
(2)	.		
(3)			
<u>(4)</u> <u>(5)</u>			
(6)			
(7)			
(8)			***
(9)			
	umn (b) must equal Form 990, Part X, col. (B) lii	ne 15)	.
Part X	Other Liabilities.		
r airt A		"Yes" to Form 990	, Part IV, line 11e or 11f See Form 990, Part X,
	line 25.		, , , , , , , , , , , , , , , , , , ,
1.	(a) Description of liability	(b) Book valu	ie l
-	ral income taxes	(2, 222, 222	
	UED PENSION AND POSTRETIRE	412,	319.
	TAL LEASE		059.
	RRED LIABILITIES	1,185,	
(5)			
(6)			
(7)			
(8)			
(9)			
	nn (b) must equal Form 990, Part X, col (B) line 25)	1,625,	066.

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

Schedule D (Form 990) 2014

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PAGE 33

b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	2e 503,23 3 161,684,63 992 4c 13,99 4c 13,99 5 161,698,62
Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments	2e 503,23 3 161,684,63 992. 4c 13,99 5 161,698,62 Return.
a Net unrealized gains (losses) on investments 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 3 Subtract line 2e from line 1 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 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	2e 503,23 3 161,684,63 992 4c 13,99 5 161,698,62 Return. 1 114,151,26
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 3 Subtract line 2e from line 1 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 4 Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	2e 503,23 3 161,684,63 992 4c 13,99 5 161,698,62 Return. 1 114,151,26
c Recoveries of prior year grants d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	3 161,684,63 992. 4c 13,99 5 161,698,62 Return.
d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	3 161,684,63 992. 4c 13,99 5 161,698,62 Return.
e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 4a 13, b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	3 161,684,63 992. 4c 13,99 5 161,698,62 Return.
3 Subtract line 2e from line 1 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 4	3 161,684,63 992. 4c 13,99 5 161,698,62 Return.
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 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	9 92 4c 13, 99 5 161, 698, 62 Return.
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	4c 13,99 5 161,698,62 Return.
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c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	4c 13,99 5 161,698,62 Return.
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	5 161,698,62 Return. 1 114,151,26
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	Return. 1 114,151,26
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	1 114,151,26
1 Total expenses and losses per audited financial statements 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 3 Subtract line 2e from line 1	
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 3 Subtract line 2e from line 1	
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 Subtract line 2e from line 1	
b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1	
c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1	
d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1	
e Add lines 2a through 2d 3 Subtract line 2e from line 1	
3 Subtract line 2e from line 1	2e
	3 114,151,26
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	25.50
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 13,	992.
b Other (Describe in Part XIII)	
c Add lines 4a and 4b	4c 13,99
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5 114,165,25
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 2	
2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional	information
SEE PAGE 5	
••	

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Part XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 2

RPA RECOGNIZES THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION IN THE FINANCIAL STATEMENTS ONLY IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

RPA IS EXEMPT FROM FEDERAL INCOME TAXATION BY VIRTUE OF BEING AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. NEVERTHELESS, RPA MAY BE SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE CODE. THE TAX YEARS ENDING DECEMBER 31, 2011, 2012, 2013 AND 2014 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES. AS OF DECEMBER 31, 2014, MANAGEMENT DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS WITHIN ITS FINANCIAL STATEMENTS.

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.

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

OMB No 1545-0047 20**14**

Open to Public Inspection

Department of the Treasury Internal Revenue Service
Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS, INC

Employer identification number 13-3615533

	COLUMN THE PROPERTY	movino,	1110.		1 10 001000	9
Part	General Information of Form 990, Part IV, line 14		Outside the U	Jnited States. Complete	if the organization answe	ered "Yes" on
1	For grantmakers. Does the orga	nızatıon maınta	ain records to s	substantiate the amount of	f its grants and other	
	assistance, the grantees' eligibili	-			,	
	grants or assistance?				l	X Yes No
2	For grantmakers. Describe in	Part V the or	ganızatıon's pı	ocedures for monitoring	the use of its grants	and other
	assistance outside the United Sta	ates		_	-	
3	Activities per Region (The follow	ving Part I, line	3 table can be	duplicated if additional sp	pace 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
445					-	
(1)	EAST ASIA AND THE PACIFIC			GRANTMAKING		4,492,429.
(2)	EUROPE			GRANTMAKING		5,115,995.
(3)	MIDDLE EAST AND NORTH AFRICA			GRANTMAKING		286,647.
<u> </u>					1,2	
(4)	NORTH AMERICA			GRANTMAKING		574,151.
(5)	SOUTH AMERICA			GRANTMAKING		890,958.
4.53						
(6)	SOUTH ASIA			GRANTMAKING		407,696.
(7)	SUB-SAHARAN AFRICA			GRANTMAKING		253,000.
(8)	EUROPE			INVESTMENTS		4,865,973.
(9)	····					-
(10)						
(11)						
(12)						
(12)						
(13)						
(14)						
(15)						
(13)						
(16)						
(17)						
3a	Sub-total					16,886,849.
b	Total from continuation		<u> </u>	•		
	sheets to Part I					
¢	Totals (add lines 3a and 3b)			1		16,886,849.

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

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Schedule F (Form 990) 2014

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)			SOUTH ASIA	SUPPORT	44,851	СНЕСК			
(2)			SOUTH AMERICA	SUPPORT	138,596.	СНЕСК			
(3)	······································		EUROPE (INCLUDING ICELAN	SUPPORT	8,651.	СНЕСК			
(4)			EAST ASIA AND THE PACIFI	SUPPORT	37,500.	СНЕСК			
(5)			MIDDLE EAST AND NORTH AF	SUPPORT	66,530.	СНЕСК			ļ
(6)			MIDDLE EAST AND NORTH AF	SUPPORT	66,530.	СНЕСК			
(7)			EAST ASIA AND THE PACIFI	SUPPORT	20,000.	СНЕСК			
(8)			EAST ASIA AND THE PACIFI	SUPPORT	30,000.	СНЕСК			
(9)			EAST ASIA AND THE PACIFI	SUPPORT	45,000.	CHECK			ļ
(10)			EUROPE (INCLUDING ICELAN	SUPPORT	15,000.	CHECK			
(11)			SOUTH AMERICA	SUPPORT	55,500.	СНЕСК			
(12)			EAST ASIA AND THE PACIFI	SUPPORT	50,000.	СНЕСК			
(13)			SOUTH ASIA	SUPPORT	69,844.	СНЕСК			
(14)			NORTH AMERICA	SUPPORT	20,000.	СНЕСК			
(15)			EAST ASIA AND THE PACIFI	SUPPORT	64,516.	CHECK			
(16)			EAST ASIA AND THE PACIFI	SUPPORT	65,634.	СНЕСК			

Schedule	E (Earm	0001	204
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Schedule F	(Form 990) 2014								Page 2
Part II			tions or Entities Outsid ved more than \$5,000. F					ed "Yes" on F	orm 990,
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)			EAST ASIA AND THE PACIFI	SUPPORT	37,500.	СНЕСК			
(2)			EAST ASIA AND THE PACIFI	SUPPORT	62,497.	СНЕСК	,		
(3)			EAST ASIA AND THE PACIFI	SUPPORT	62,788.	СНЕСК			
(4)			NORTH AMERICA	SUPPORT	15,000	CHECK			
(5)			NORTH AMERICA	SUPPORT	15,000.	СНЕСК			
(6)			NORTH AMERICA	SUPPORT	10,000.	снеск		1	
(7)			NORTH AMERICA	SUPPORT	15,000.	СНЕСК			
(8)			NORTH AMERICA	SUPPORT	10,000.	снеск			
(9)			EUROPE (INCLUDING ICELAN	SUPPORT	15,000.	CHECK			
(10)			EUROPE (INCLUDING ICELAN	SUPPORT	15,000.	СНЕСК			
(11)			EAST ASIA AND THE PACIFI	SUPPORT	30,000.	СНЕСК		<u> </u>	
(12)			EAST ASIA AND THE PACIFI	SUPPORT	65,000.	снеск			
(13)			EUROPE (INCLUDING ICELAN	SUPPORT	25,000.	СНЕСК	···		
(14)			EAST ASIA AND THE PACIFI	SUPPORT	25,000.	снеск			
(15)			NORTH AMERICA	SUPPORT	10,000.	СНЕСК			
(16)			NORTH AMERICA	SUPPORT	40,000.	CHECK			

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

Schedule F (Form 990) 2014

			ved more than \$5,000. F		aphoated it addit			··	(i) Method o
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	valuation (book, FMV, appraisal, other)
1)			EUROPE (INCLUDING ICELAN	SUPPORT	500,000.	СНЕСК			
2)			SOUTH AMERICA	SUPPORT	109,070	СНЕСК			
3)			EUROPE (INCLUDING ICELAN	SUPPORT	8,400.	СНЕСК			
4)	(1948) - C. (1948)		EUROPE (INCLUDING ICELAN	SUPPORT	25,000.	СНЕСК			
5)			EAST ASIA AND THE PACIFI	SUPPORT	70,000.	CHECK	<u> </u>		
6)			EAST ASIA AND THE PACIFI	SUPPORT	80,000.	CHECK			
7)			EAST ASIA AND THE PACIFI	SUPPORT	100,000.	CHECK			
8)			EAST ASIA AND THE PACIFI	SUPPORT	45,000.	СНЕСК			
9)			EAST ASIA AND THE PACIFI	SUPPORT	47,415.	СНЕСК			
10)			EAST ASIA AND THE PACIFI	SUPPORT	39,992.	СНЕСК	······································		
11)			EAST ASIA AND THE PACIFI	SUPPORT	40,378.	СНЕСК			
12)			EAST ASIA AND THE PACIFI	SUPPORT	25,000.	CHECK			
13)			EAST ASIA AND THE PACIFI	SUPPORT	123,000.	СНЕСК			
14)			EAST ASIA AND THE PACIFI	SUPPORT	123,000.	CHECK			
15)			MIDDLE EAST AND NORTH AF	SUPPORT	45,436.	СНЕСК		_	
16)			EAST ASIA AND THE PACIFI	SUPPORT	212,000.	СНЕСК			

Sche	dule	F (Form	9901	2014

	(Form 990) 2014								Page 2
Part II			tions or Entities Outsid					ed "Yes" on F	orm 990,
	Part IV, line 15, for an	y recipient who receiv	ved more than \$5,000. F	Part II can be	duplicated if addit	tional space i	s 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)			EAST ASIA AND THE PACIFI	SUPPORT	212,000.	СНЕСК			
(2)			MIDDLE EAST AND NORTH AF	SUPPORT	33,151.	СНЕСК			
(3)			EUROPE (INCLUDING ICELAN	SUPPORT	99,831.	CHECK	_		
(4)			EUROPE (INCLUDING ICELAN	SUPPORT	99,831.	СНЕСК			
(5)			EUROPE (INCLUDING ICELAN	SUPPORT	220,000.	СНЕСК			
(6)			EUROPE (INCLUDING ICELAN	SUPPORT	25,000.	снеск			
(7)			EAST ASIA AND THE PACIFI	SUPPORT	60,000.	снеск			
(8)			EUROPE (INCLUDING ICELAN	SUPPORT	10,000.	СНЕСК			
(9)			NORTH AMERICA	SUPPORT	10,000.	СНЕСК			
(10)			EAST ASIA AND THE PACIFI	SUPPORT	30,000	CHECK			
(11)			EAST ASIA AND THE PACIFI	SUPPORT	29,766.	снеск			
(12)			EUROPE (INCLUDING ICELAN	SUPPORT	49,470.	СНЕСК			
(13)			EUROPE (INCLUDING ICELAN	SUPPORT	49,470.	СНЕСК			
(14)			EAST ASIA AND THE PACIFI	SUPPORT	50,000.	СНЕСК			
(15)			EUROPE (INCLUDING ICELAN	SUPPORT	10,000.	СНЕСК			
(16)			SUB-SAHARAN AFRICA	SUPPORT	50,000.	СНЕСК			
by:	er total number of recipient the IRS, or for which the gra er total number of other org	ntee or counsel has prov	vided a section 501(c)(3) ed	quivalency lette	r				

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014

Part II			tions or Entities Outsid red more than \$5,000. F					ed "Yes" on F	orm 990,
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 o valuation (book, FMV, appraisal, other)
(1)			NORTH AMERICA	SUPPORT	10,000	CHECK			
(2)			EUROPE (INCLUDING ICELAN	SUPPORT	583,500.	CHECK			
3)			EUROPE (INCLUDING ICELAN	SUPPORT	583,500.	СНЕСК			
4)	1-		SUB-SAHARAN AFRICA	SUPPORT	56,000.	СНЕСК			
5)	· · · · · · · · · · · · · · · · · · ·		NORTH AMERICA	SUPPORT	10,000.	СНЕСК			
6)			EUROPE (INCLUDING ICELAN	SUPPORT	300,000.	СНЕСК			
7)			EAST ASIA AND THE PACIFI	SUPPORT	30,000.	CHECK			
8)			NORTH AMERICA	SUPPORT	40,000.	СНЕСК	·		
9)			EAST ASIA AND THE PACIFI	SUPPORT	30,000.	СНЕСК			
10)			EAST ASIA AND THE PACIFI	SUPPORT	25,000.	СНЕСК			
11)		The second makes a se	EUROPE (INCLUDING ICELAN	SUPPORT	135,000	CHECK			
12)			NORTH AMERICA	SUPPORT	20,000.	CHECK			_
13)			EAST ASIA AND THE PACIFI	SUPPORT	45,000.	CHECK			
14)			EAST ASIA AND THE PACIFI	SUPPORT	25,000.	СНЕСК			
15)			EUROPE (INCLUDING ICELAN	SUPPORT	25,000.	СНЕСК			
16)			EAST ASIA AND THE PACIFI	SUPPORT	10,000.	СНЕСК			
by th	r total number of recipient o e IRS, or for which the grant r total number of other orga	tee or counsel has prov	rided a section 501(c)(3) ed	quivalency lette	r		▶		

	Part IV, line 15, for ar	Ty recipient who received	ved more than \$5,000. F	art ii can be t	uupiicateu ii auui	tional space is	s needed.		(I) M-151 -
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 o valuation (book, FMV, appraisal, other)
(1)			EUROPE (INCLUDING ICELAN	SUPPORT	5,164.	СНЕСК			
(2)			SOUTH AMERICA	SUPPORT	25,000.	СНЕСК			
(3)			EUROPE (INCLUDING ICELAN	SUPPORT	8,642.	СНЕСК			
(4)			EAST ASIA AND THE PACIFI	SUPPORT	25,000.	СНЕСК			
(5)			SUB-SAHARAN AFRICA	SUPPORT	25,000.	снеск			
(6)			SUB-SAHARAN AFRICA	SUPPORT	25,000.	СНЕСК			
(7)			EUROPE (INCLUDING ICELAN	SUPPORT	161,040.	СНЕСК			
(8)			EUROPE (INCLUDING ICELAN	SUPPORT	205,805.	СНЕСК			
(9)			SUB-SAHARAN AFRICA	SUPPORT	20,000.	СНЕСК			
(10)			EUROPE (INCLUDING ICELAN	SUPPORT	10,000.	снеск			
(11)			EUROPE (INCLUDING ICELAN	SUPPORT	70,723.	СНЕСК			<u>-</u>
(12)			EAST ASIA AND THE PACIFI	SUPPORT	40,000.	СНЕСК			
(13)			EUROPE (INCLUDING ICELAN	SUPPORT	30,000.	снеск			
(14)			EUROPE (INCLUDING ICELAN	SUPPORT	10,000.	СНЕСК			
(15)			NORTH AMERICA	SUPPORT	40,000.	снеск			
(16)			EAST ASIA AND THE PACIFI	SUPPORT	25,000.	СНЕСК			

	Schedule	F (Form	990	2014
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Schedule F	(Form 990) 2014								Page 2
Part II			tions or Entities Outsid red more than \$5,000. F					ed "Yes" on F	
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)			SOUTH ASIA	SUPPORT	56,000	CHECK			
(2)			EUROPE (INCLUDING ICELAN	SUPPORT	33,625.	снеск			
(3)			EUROPE (INCLUDING ICELAN	SUPPORT	33,625.	CHECK			
(4)			EUROPE (INCLUDING ICELAN	SUPPORT	300,000.	СНЕСК			
(5)			NORTH AMERICA	SUPPORT	40,000.	СНЕСК			
(6)			EUROPE (INCLUDING ICELAN	SUPPORT	25,000.	СНЕСК			
(7)			EUROPE (INCLUDING ICELAN	SUPPORT	10,000	СНЕСК			
(8)			EAST ASIA AND THE PACIFI	SUPPORT	53,728.	СНЕСК			
(9)			EAST ASIA AND THE PACIFI	SUPPORT	53,728.	СНЕСК			
(10)			EAST ASIA AND THE PACIFI	SUPPORT	53,728.	СНЕСК			
(11)			EAST ASIA AND THE PACIFI	SUPPORT	53,728.	снеск		ļ	
(12)			SOUTH AMERICA	SUPPORT	233,500.	СНЕСК			
(13)			SOUTH AMERICA	SUPPORT	233,500.	СНЕСК		 	
(14)			NORTH AMERICA	SUPPORT	10,000.	СНЕСК			
(15)			NORTH AMERICA	SUPPORT	64,151.	СНЕСК			
(16)			EAST ASIA AND THE PACIFI	SUPPORT	25,000.	CHECK			1

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

Schedule F (Form 990) 2014

Schedule	E.	/Earm	aan	2014
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	[· = 2011	ı aye
Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Forr	n 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	

	Part IV, line 15, for ar	y recipient who recen	<u>/ed more than \$5,000. F</u>	Part II can be	duplicated if addit	tional space is	s 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)			NORTH AMERICA	SUPPORT	25,000.	СНЕСК			
(2)	×		EAST ASIA AND THE PACIFI	SUPPORT	30,000.	снеск			
(3)	·		NORTH AMERICA	SUPPORT	10,000.	снеск			
(4)			EAST ASIA AND THE PACIFI	SUPPORT	50,000	CHECK			
(5)			EUROPE (INCLUDING ICELAN	SUPPORT	25,634.	CHECK			
(6)			EUROPE (INCLUDING ICELAN	SUPPORT	35,550.	СНЕСК			
(7)			EUROPE (INCLUDING ICELAN	SUPPORT	8,180.	СНЕСК			
(8)			EUROPE (INCLUDING ICELAN	SUPPORT	15,000.	CHECK			
(9)			EAST ASIA AND THE PACIFI	SUPPORT	40,000.	СНЕСК			
(10)			EAST ASIA AND THE PACIFI	SUPPORT	49,974.	CHECK			
(11)	• • •		EUROPE (INCLUDING ICELAN	SUPPORT	8,642.	СНЕСК			
(12)	*		EAST ASIA AND THE PACIFI	SUPPORT	500,000.	снеск			
(13)			EUROPE (INCLUDING ICELAN	SUPPORT	10,500.	снеск			
(14)			EAST ASIA AND THE PACIFI	SUPPORT	60,000.	СНЕСК			
(15)			EAST ASIA AND THE PACIFI	SUPPORT	25,000.	СНЕСК			
(16)			EAST ASIA AND THE PACIFI	SUPPORT	7,500	СНЕСК			

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
	Enter total number of other organizations or entities

Schedule F (Form 990) 2014

	Form 990) 2014								Page
Part II			t <mark>ions or Entities Outsid</mark> red more than \$5,000. F					ed "Yes" on F	orm 990,
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)			EAST ASIA AND THE PACIFI	SUPPORT	30,000.	СНЕСК			
(2)	<u> </u>		EUROPE (INCLUDING ICELAN	SUPPORT	50,000.	CHECK			
(3)			EUROPE (INCLUDING ICELAN	SUPPORT	15,000.	CHECK			
(4)			MIDDLE EAST AND NORTH AF	SUPPORT	75,000.	СНЕСК			
(5)			NORTH AMERICA	SUPPORT	15,000.	СНЕСК			
(6)			EUROPE (INCLUDING ICELAN	SUPPORT	20,000.	СНЕСК			
(7)			EAST ASIA AND THE PACIFI	SUPPORT	20,000.	СНЕСК		_	!
(8)			EAST ASIA AND THE PACIFI	SUPPORT	50,000.	СНЕСК			
(9)			NORTH AMERICA	SUPPORT	10,000.	СНЕСК			
(10)			EAST ASIA AND THE PACIFI	SUPPORT	22,952	CHECK			<u></u>
(11)			EAST ASIA AND THE PACIFI	SUPPORT	27,606.	СНЕСК		ļ	
(12)			NORTH AMERICA	SUPPORT	10,000.	снеск		ļ	
(13)			EAST ASIA AND THE PACIFI	SUPPORT	10,000.	снеск			
(14)			NORTH AMERICA	SUPPORT	40,000.	снеск			
(15)			SUB-SAHARAN AFRICA	SUPPORT	25,000.	снеск			
(16)			EAST ASIA AND THE PACIFI	SUPPORT	20,000.	СНЕСК			

Schedule F (Form 990) 20	11

Part II			tions or Entities Outsid					ed "Yes" on F	Page orm 990,
	Part IV, line 15, for an	y recipient who receiv	ved more than \$5,000. F	Part II can be	duplicated if addit	tional space is	s 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)	,		SUB-SAHARAN AFRICA	SUPPORT	52,000.	СНЕСК			
2)	**		EAST ASIA AND THE PACIFI	SUPPORT	20,000.	СНЕСК			
3)			SOUTH ASIA	SUPPORT	237,000.	снеск			
4)			EUROPE (INCLUDING ICELAN	SUPPORT	45,000.	снеск			
5)			EAST ASIA AND THE PACIFI	SUPPORT	54,958.	снеск	-		
6)	· · · · · · · · · · · · · · · · · · ·		EAST ASIA AND THE PACIFI	SUPPORT	174,542.	снеск			
7)			EAST ASIA AND THE PACIFI	SUPPORT	50,000.	снеск			
8)			EUROPE (INCLUDING ICELAN	SUPPORT	8,538.	СНЕСК			
9)			NORTH AMERICA	SUPPORT	10,000.	снеск			
10)			EUROPE (INCLUDING ICELAN	SUPPORT	23,800.	СНЕСК			
11)			EUROPE (INCLUDING ICELAN	SUPPORT	25,000.	снеск			
12)			EUROPE (INCLUDING ICELAN	SUPPORT	30,000	СНЕСК	<u></u>		<u> </u>
13)			EUROPE (INCLUDING ICELAN	SUPPORT	40,000.	СНЕСК			
14)			EUROPE (INCLUDING ICELAN	SUPPORT	40,000.	СНЕСК			
15)			EUROPE (INCLUDING ICELAN	SUPPORT	49,700.	СНЕСК			
16)			EUROPE (INCLUDING ICELAN	SUPPORT	67,835.	СНЕСК			

Schedule	E /E	orm (agn,	201

Schedule	F	(Form	990)	2014
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	Part IV, line 15, for an	y recipient who receive	tions or Entities Outsid yed more than \$5,000. F	Part II can be	duplicated if addit	ional 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)			NORTH AMERICA	SUPPORT	10,000	CHECK			
(2)			NORTH AMERICA	SUPPORT	10,000.	СНЕСК	. <u> </u>		
(3)			EUROPE (INCLUDING ICELAN	SUPPORT	7,875.	СНЕСК			
(4)	- Control of the Cont		EUROPE (INCLUDING ICELAN	SUPPORT	8,074	СНЕСК			
(5)			EAST ASIA AND THE PACIFI	SUPPORT	75,000.	СНЕСК			
(6)			EAST ASIA AND THE PACIFI	SUPPORT	21,000.	СНЕСК			
(7)			NORTH AMERICA	SUPPORT	7,000.	СНЕСК			
(8)	-		NORTH AMERICA	SUPPORT	8,000.	CHECK			
(9)			EUROPE (INCLUDING ICELAN	SUPPORT	14,735.	СНЕСК			
(10)			EUROPE (INCLUDING ICELAN	SUPPORT	50,000.	СНЕСК			
(11)			EUROPE (INCLUDING ICELAN	SUPPORT	162,003.	СНЕСК			
(12)			EAST ASIA AND THE PACIFI	SUPPORT	30,000.	СНЕСК			
(13)			EAST ASIA AND THE PACIFI	SUPPORT	10,000.	CHECK			
(14)			EAST ASIA AND THE PACIFI	SUPPORT	75,000.	СНЕСК			
(15)			EUROPE (INCLUDING ICELAN	SUPPORT	50,000.	CHECK			
(16)			EUROPE (INCLUDING ICELAN	SUPPORT	50,000.	СНЕСК			
by th	r total number of recipient ne IRS, or for which the gra er total number of other org	ntee or counsel has prov	ve that are recognized as or	uvalency lette	r		-exempt		

Schedule F (Form 990) 2014

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)			EUROPE (INCLUDING ICELAN	SUPPORT	30,000.	СНЕСК			
(2)			EAST ASIA AND THE PACIFI	SUPPORT	10,000.	CHECK			
3)			EUROPE (INCLUDING ICELAN	SUPPORT	130,000.	CHECK			
4)			SOUTH AMERICA	SUPPORT	15,000.	СНЕСК			
5)			SOUTH AMERICA	SUPPORT	20,000.	снеск			
6)			SOUTH AMERICA	SUPPORT	20,000.	СНЕСК			
7)			SOUTH AMERICA	SUPPORT	40,000.	CHECK	,		
8)			EUROPE (INCLUDING ICELAN	SUPPORT	161,235.	CHECK			
9)			EUROPE (INCLUDING ICELAN	SUPPORT	161,235.	СНЕСК			
10)			EAST ASIA AND THE PACIFI	SUPPORT	40,000.	СНЕСК			
11)			NORTH AMERICA	SUPPORT	40,000.	СНЕСК			
12)			EAST ASIA AND THE PACIFI	SUPPORT	75,000.	СНЕСК			
13)			EAST ASIA AND THE PACIFI	SUPPORT	68,000.	СНЕСК			
14)			EAST ASIA AND THE PACIFI	SUPPORT	289,530	СНЕСК			
15)			EUROPE (INCLUDING ICELAN	SUPPORT	20,000.	СНЕСК			
16)			EAST ASIA AND THE PACIFI	SUPPORT	5,056.	СНЕСК			

Schedule	F(Form	990	2014
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Schedule	F (Form	990) 2014

1	(a) Name of organization	(b) IRS code section and EIN	(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
·	-	(if applicable)				disbuisement	assistance	assistance	appraisal, other)
)			EAST ASIA AND THE PACIFI	SUPPORT	40,000.	снеск			
)			EUROPE (INCLUDING ICELAN	SUPPORT	45,000.	СНЕСК			
)									
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<u>.</u>									
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)									
0)									
1)									
2)									
3)									
4)									
5)									
6)	Total Management						-		<u></u>
	or total number of regions	organizations listed sh	ove that are recognized as	harities by the	foreign country	aggized as to:	overnt	_ <u>l</u>	1
. ⊂ ⊓(e			ove that are recognized as ovided a section 501(c)(3) ec						

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page 3 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 Part III can be duplicated if additional space is needed. (e) Manner of (f) Amount of (g) Description (h) Method of (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of cash non-cash of non-cash valuation disbursement recipients cash grant assistance assistance (book, FMV, appraisal, other) (1) GENERAL SUPPORT GRANTS EAST ASIA AND THE PACIFI 102,289. CHECK (2) FOREIGN GRADUATE TRAINING EAST ASIA AND THE PACIFI 20,000. CHECK (3) (5) (6) (9) (10) (11) (12)

Schedule F (Form 990) 2014

(13)

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(17)

(18)

Par	•	Δ

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

Schedule F (Form 990) 2014

Part V Supple

Supplemental Information

Complete this part to 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

ROCKEFELLER PHILANTHROPY ADVISORS INC. HAS A STRONG COMMITMENT TO

ACCOUNTABILITY AND SOUND GOVERNANCE, AS EXPRESSED IN ITS BY-LAWS AND

BOARD OF DIRECTORS POLICIES AND PROCEDURES. TO REDUCE THE LIKELIHOOD THAT

GRANTS RECOMMENDED OR ADMINISTERED BY ROCKEFELLER PHILANTHROPY ADVISORS,

INC., WILL BE DIVERTED FOR INAPPROPRIATE PURPOSES, THE ORGANIZATION HAS

ADOPTED GENERAL PRINCIPLES, PRACTICES, AND DUE DILIGENCE PROCEDURES THAT

INCLUDE COMPLIANCE WITH IRS GUIDELINES AND OTHER INDUSTRY BEST PRACTICES

AND MORE SPECIFICALLY INCLUDE THE FOLLOWING:

- 1. CHARITABLE PURPOSE AND INTENT
- 2.ANTI-TERRORISM SCREEN
- 3. VERIFICATION OF EXEMPT STATUS
- 4.RISK ASSESMENT AND IF NECESSARY MORE DETAILED REVIEW
- 5.WRITTEN AGREEMENTS
- 6. POST GRANT MONITORING FOR COMPLIANCE BASED ON INDIVIDUAL CIRCUMSTANCES
 FOR BOTH PROGRAM AND FINANCIAL REPORTING.

ALL GRANTS ISSUED BY ROCKEFELLER PHILANTHROPY ADVISORS ARE GENERAL SUPPORT GRANTS; TO THE EXTENT ANY ADDITIONAL INFORMATION IS REQUIRED ABOUT A SPECIFIC GRANT, THAT INFORMATION IS AVAILABLE UPON REQUEST.

SCHEDULE F, PART IV

ROCKEFELLER PHILANTHROPY ADVISORS INVESTS IN DOMESTIC AND FOREIGN LIMITED PARTNERSHIPS THAT MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP. RPA'S INVESTMENT

Schedule F (Form 990) 2014

Page 5

Part V S

Supplemental Information

Complete this part to 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)

ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING FORM 5471.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization					Employer identification	on number
ROCKEFELLER PHILANTHROPY ADV	ISORS, INC.				13-3615533	3
Part I Form 200 F7 flore are not	•			"Yes" to Form 9	90, Part IV, line	17
Form 990-EZ mers are not					·	
1 Indicate whether the organization ra	sed funds through		_			
a Mail solicitations	е			non-government g		
b Internet and email solicitations	f			government grants	S	
c Phone solicitations	g	Spec	cial fundra	ising events		
d X In-person solicitations						
2a Did the organization have a written or or key employees listed in Form 990					rectors, trustees	X Yes No
b If "Yes," list the ten highest paid ind					-	
compensated at least \$5,000 by the		(101101010	no, purouc	in to agreements	under winen me	ranaraiser is to be
	-					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody c	draiser have or control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		33. (4)	
1	FUNDRAISING	100				•
GARWOOD EVENTS	CONSULTANT		x	331,800	50,000.	281,800.
2	FUNDRAISING					
THE KAVELMAN GROUP	CONSULTANT		x	141,700.	126,812.	14,888.
3	FUNDRAISING				· ·	
THE MCELWEE GROUP	CONSULTANT	<u> </u>	Х	110,000.	40,844.	69,156.
4					ı	
<u> </u>						
5						
6						
8						
7	<u> </u>	 				
•						
8	-					
9	, i					
10						
*****		<u> </u>	l			·
				500 500	0.0.454	255 244
Total			<u></u> ▶	583,500	217,656	365,844.
3 List all states in which the organiza registration or licensing.	ition is registered o	r licensed	to solicit	contributions or	has been notified	it is exempt from
AL, AK, AR, CA, CO, CT, DC, FL, GA, H	т тт.					
KS, KY, ME, MD, MA, MI, MN, MS, NH, N						
OK, OR, PA, RI, SC, TN, UT, VA, WA, W		· <u>'</u>				
						
		··				
					-	

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

Schedule G (Form 990 or 990-EZ) 2014

Page 2

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
			(event type)	(event type)	(total number)	col (c))
Kevenue		_				
	1 (Gross receipts				
1	2 L	ess Contributions				
		Gross income (line 1 minus				
+	''	ine 2)				
	4 (Cash prizes				
	5 N	Noncash prizes				
, [
	6 F	Rent/facility costs			<u> </u>	
	7 F	Food and beverages				
	8 E	Entertainment			 .	
	9 (Other direct expenses				
1		Gamina Complete if the orga	inization ancivored "	Vac" to Earm 000 Dari	t IV Juno 10 or rono	rtad mara
ai	t III	Gaming. Complete if the orga than \$15,000 on Form 990-E.	inization answered " Z, line 6a.		<u> </u>	
a		daming. Complete if the orga than \$15,000 on Form 990-E.	Inization answered " Z, line 6a. (a) Bingo	Yes" to Form 990, Pari	t IV, line 19, or repo	rted more (d) Total gaming (add col (a) through col (c)
aı	t III	than \$15,000 on Form 990-E.	Z, line 6a.	(b) Pull tabs/instant	<u> </u>	(d) Total gaming (ad
aı	1 (than \$15,000 on Form 990-E.	Z, line 6a.	(b) Pull tabs/instant	<u> </u>	(d) Total gaming (ad
al	1 (than \$15,000 on Form 990-E.	Z, line 6a.	(b) Pull tabs/instant	<u> </u>	(d) Total gaming (ad
al	1 0	than \$15,000 on Form 990-E.	Z, line 6a.	(b) Pull tabs/instant	<u> </u>	(d) Total gaming (ad
al	1 G 2 G	than \$15,000 on Form 990-E. Gross revenue	Z, line 6a.	(b) Pull tabs/instant	<u> </u>	(d) Total gaming (add
al	1 G 2 G	than \$15,000 on Form 990-E. Gross revenue	Z, line 6a.	(b) Pull tabs/instant	<u> </u>	(d) Total gaming (add
al	1 (2 (3 N 4 F	than \$15,000 on Form 990-E. Gross revenue	Z, line 6a. (a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c
	1 0 2 0 3 N 4 F	than \$15,000 on Form 990-E. Gross revenue	Z, line 6a. (a) Bingo	(b) Pull tabs/instant	<u> </u>	(d) Total gaming (add
al	1 0 2 0 3 N 4 F 5 0 6 V	than \$15,000 on Form 990-E. Gross revenue	Z, line 6a. (a) Bingo Yes	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming Yes%	(d) Total gaming (adcol (a) through col (d
al	1 0 2 0 3 N 4 F 5 0 6 V	than \$15,000 on Form 990-E. Gross revenue	Z, line 6a. (a) Bingo Yes	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming Yes%	(d) Total gaming (ad col (a) through col (d
al .	1 0 2 0 3 N 4 F 5 0	than \$15,000 on Form 990-E. Gross revenue	Z, line 6a. (a) Bingo Yes No through 5 in column (column)	(b) Pull tabs/instant bingo/progressive bingo Yes% No	(c) Other gaming Yes% No	(d) Total gaming (ad col (a) through col (d
al	1 0 2 C 3 N 4 F 5 C 6 V 7 E 8 N Enter	than \$15,000 on Form 990-E. Gross revenue	Yes through 5 in column (conducts gaming a	(b) Pull tabs/instant bingo/progressive bingo Yes% No Solumn (d)	Yes% No	(d) Total gaming (ad col (a) through col (d
a	1 0 2 0 3 N 4 F 5 0 6 V 7 E 8 N Enter Is th	than \$15,000 on Form 990-E. Gross revenue	Yes	(b) Pull tabs/instant bingo/progressive bingo Yes% No No ctivities	Yes% No	(d) Total gaming (ad col (a) through col (d
a	1 0 2 0 3 N 4 F 5 0 6 V 7 E 8 N Enter Is th	than \$15,000 on Form 990-E. Gross revenue	Yes	(b) Pull tabs/instant bingo/progressive bingo Yes% No No ctivities	Yes% No	(d) Total gaming (ad col (a) through col (d
a	1 0 2 0 3 N 4 F 5 0 6 V 7 D 8 N Enter Is the If "N	than \$15,000 on Form 990-E. Gross revenue	Yes Yes	(b) Pull tabs/instant bingo/progressive bingo Yes% No No Slumn (d)	Yes% No	(d) Total gaming (ad col (a) through col (c

Enter the amount of distributions required under state law to be distributed to other exempt organizations

Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information

or spent in the organization's own exempt activities during the tax year > \$

Schedule	G	(Form	990 0	r 990-F7	1 201

Part IV

(see instructions).

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.

Open to Public Inspection

OMB No 1545-0047

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 ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 General Information on Grants and Assistance Part I 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? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1) ACACIA NETWORK							
300 EAST 175TH ST. BRONX, NY 10457	13-4014082	501 (C) (3)	20,000.				SUPPORT
2) ACCESS FUND							
P O BOX 17010 BOULDER, CO 80308	94-3131165	501 (C) (3)	15,000.				SUPPORT
3) ACHIEVE HARTFORD INC							
39 WASHINGTON AVE PLEASANTVILLE, NY 10570	13-4038441	501 (C) (3)	20,000.				SUPPORT
1) ACTIONAID USA					 		
1420 K ST., NW WASHINGTON, DC 20005	52-2277575	501 (C) (3)	25,000.				SUPPORT
5) AFRICARE							
440 R ST., N.W. WASHINGTON, DC 20001	23-7116952	501 (C) (3)	10,000.				SUPPORT
S) AGASSIZ VILLAGE							
238 BEDFORD ST. LEXINGTON, MA 02420	04-2160531	501 (C) (3)	12,637.				SUPPORT
7) ALASKA ARTS CONFLUENCE							
PO BOX 1664 HAINES, AK 99827	20-4036592	501 (C) (3)	217,456.				SUPPORT
3) ALASKA CONSERVATION FDN							
911 W 8TH AVE #300 ANCHORAGE, AK 99501-2340	92-0061466	501 (C) (3)	15,000.				SUPPORT
) ALL HANDS RAISED		1					
2069 NE HOYT ST. PORTLAND, OR 97232	93-1149789	501 (C) (3)	70,000.				SUPPORT
)) ALL SAINTS ACADEMY							
5001 STATE RD 540 W WINTER HAVEN, FL 33880	59-3246571	501 (C) (3)	30,000.				SUPPORT
) ALLEGHENY GENERAL HOSPITAL							
320 E NORTH AVE PITTSBURGH, PA 15212	25-0969492	501 (C) (3)	66,778.				SUPPORT
2) AM. INSTIT. FOR RESEARCH & BEHAVIOR							
1000 T. JEFFERSON NW WASHINGTON, DC 20007	25-0965219	501 (C) (3)	50,000.				SUPPORT

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

Name of the organization

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,

Department of the Treasury
Internal Revenue Service

Information about Schedule I (Form 990) and its

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

ROCKEFELLER PHILANTHROPY ADVISORS	, INC.					13-361553	3
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to sit the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand	e?			eligibility for the gran		X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AMERICA ACHIEVES							
300 NEW JERSEY AVE NW WASHINGTON, DC 20001	27-3238471	501 (C) (3)	70,541.				SUPPORT
(2) AMERICA VOTES							
1155 CONNECTICUT NW WASHINGTON, DC 20036	26-4568349	501 (C) (4)	100,000.				SUPPORT
(3) AMERICAN ACADEMY OF NURSING					-		
1000 VERMONT NW #910 WASHINGTON, DC 20005	52-2213870	501 (C) (3)	369,543.				SUPPORT
(4) AMERICAN ASSOC. OF COLLEGES OF NURSING				<u> </u>			
ONE DUPONT CIRCLE, NW WASHINGTON, DC 20036	52-0971333	501 (C) (3)	30,326.				SUPPORT
(5) AMERICAN BIRD CONSERVANCY	ĺ				,		
PO BOX 249 THE PLAINS, VA 20198	52-1501259	501 (C) (3)	10,000.				SUPPORT
(6) AMERICAN BRIDGE 21ST CENTURY FDN							
455 MASSACHUSETTS #650 WASHINGTON, DC 20001	27-5278038	501 (C) (4)	25,000.				SUPPORT
(7) AMERICAN INDIAN INSTITUTE							
502 WEST MENDENHALL ST. BOZEMAN, MT 59715	81-0339551	501 (C) (3)	5,500.				SUPPORT
(8) AMERICAN NATIONAL RED CROSS							
P.O. BOX 37295 WASHINGTON, DC 20013	53-0196605	501 (C) (3)	6,500.				SUPPORT
(9) AMERICAN SECURITY PROJECT							
1100 NEW YORK NW #710 WASHINGTON, DC 20005	20-4079553	501 (C) (3)	10,000.				SUPPORT
(10) ANCHORAGE SCHOOL DISTRICT							
5530 E NORTHERN LIGHTS ANCHORAGE, AK 99504	92-6000078	501 (C) (3)	134,939.				SUPPORT
(11) ARKANSAS ASSOC. OF TWO YEAR COLLEGES					,		
1400 W MARKHAM #402 LITTLE ROCK, AR 72201	71-0795889	501 (C) (3)	45,000.				SUPPORT
(12) ARKANSAS STATE UNVERSITY NEWPORT							
7648 VICTORY BLVD NEWPORT, AR 72112	71-0855933	501 (C) (3)	10,000.				SUPPORT
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 to	able			
3 Enter total number of other organizations li	sted in the lir	ne 1 table	<u> </u>		<u></u>	<u></u> ▶	
For Paperwork Reduction Act Notice, see the Instructi	ons for Form 9	90.				Sct	nedule I (Form 990) (2014)

Department of the Treasury

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Internal Revenue Service
Name of the organization

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.

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

13-3615533

Part I General Information on Grants and						= =	
1 Does the organization maintain records to su	ıbstantıate th	e amount of the	e grants or assistar	nce, the grantees	deligibility for the grant	ts or assistance, and	
the selection criteria used to award the grant	s or assistand	e [?]	<i></i> .				X Yes No
2 Describe in Part IV the organization's proced	lures for mor	nitoring the use	of grant funds in the	United States			
Part II Grants and Other Assistance to D	omestic Or	ganizations ar	nd Domestic Gov	ernments. Com	plete if the organiz	ation answered "Y	es" to Form 990
Part IV, line 21, for any recipient the	nat received	more than \$5	,000. Part II can b	e duplicated if a	additional space is r	needed.	,
· · · · · · · · · · · · · · · · · · ·	·	·		·			
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ARMSTRONG ATLANTIC STATE UNI. FDN	j	İ		i			
11935 ABERCORN ST. SAVANNAH, GA 31419	58-1577237	501 (C) (3)	70,000.				SUPPORT
(2) ART IN GENERAL, INC							
79 WALKER ST. NEW YORK, NY 10013-3523	13-3472869	501 (C) (3)	25,000.			Ì	SUPPORT
(3) ART PRODUCTION FUND							
15 WOOSTER ST. NEW YORK, NY 10013	13-4098503	501 (C) (3)	7,500.				SUPPORT
(4) ARTS COMPANY							
43 LINNGEAN ST. CAMBRIDGE, MA 02138	22-2876209	501 (C) (3)	75,000				SUPPORT
(5) ASIAN ARTS INITIATIVE							
1219 VINE ST. PHILADELPHIA, PA 19107	23-2827657	501 (C) (3)	644,885				SUPPORT
(6) ASIAN CULTURAL COUNCIL, INC.							
6 W 48 ST #1200 NEW YORK, NY 10036-1802	13-3018822	501 (C) (3)	182,750.				SUPPORT
(7) AURORA HEALTH CARE							
1020 NORTH 12TH ST. MILWAUKEE, WI 53233	39-1442285	501 (C) (3)	36,778.				SUPPORT
(8) AUSTIN INDEPENDENT SCHOOL DISTRICT							
1111 WEST SIXTH ST. AUSTIN, TX 78703	74-6000064	501 (C) (3)	250,000.				SUPPORT
(9) BASTROP FINE ARTS GUILD							
1406 WILSON ST. BASTROP, TX 78602	27-4257320	501 (C) (3)	488,387.				SUPPORT
(10) BETH ISRAEL DEACONESS MEDICAL CENTER							
RESEARCH FINANCE, E/BR 259 BOSTON, MA 02215	04-2103881	501 (C) (3)	73,556.				SUPPORT
(11) BETH ISRAEL MEDICAL CENTER							
FIRST AVE AT 16TH ST. NEW YORK, NY 10003	13-5564934	501 (C) (3)	20,000.				SUPPORT
(12) BLUEVOICE ORG							
10 SUNFISH DRIVE ST. AUGUSTINE, FL 32080	68-0458549	501 (C) (3)	20,000.				SUPPORT
2 Enter total number of section 501(c)(3) and	governmen	t organizations	listed in the line 1 to	able			
3 Enter total number of other organizations li							· · · · · · · · · · · · · · · · · · ·
For Panerwork Reduction Act Notice, see the Instruction							

Schedule I (Form 990) (2014

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

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Employer identification number

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS, INC.						13-3615533		
Part I General Information on Grants and	d Assistanc	е						
1 Does the organization maintain records to su	ibstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and		
the selection criteria used to award the grant	s or assistanc	e?					X Yes No	
2 Describe in Part IV the organization's proced								
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the	omestic Or nat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	rernments. Com be duplicated if a	plete if the organized ditional space is	cation answered "Y needed.	es" to Form 990,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) BREWSTER ACADEMY								
80 ACADEMY DRIVE WOLFEBORO, OH 03894-4128	02-0223317	501 (C) (3)	10,500				SUPPORT	
(2) BRIGHAM AND WOMEN'S HOSPITAL, INC.								
116 HUNTINGTON 5TH FL BOSTON, MA 02116	04-2312909	501 (C) (3)	25,000.				SUPPORT	
(3) BRONX MUSEUM OF THE ARTS, INC.								
1040 GRAND CONCOURSE BRONX, NY 10456	13-2709368	501 (C) (3)	25,000.				SUPPORT	
(4) BROOKS SCHOOL]							
1160 GREAT POND RD NORTH ANDOVER, MA 01845	04-2130844	501 (C) (3)	20,000.				SUPPORT	
(5) BROWN UNI OFFICE OF THE PRESIDENT								
1 PROSPECT ST CAMPUS B PROVIDENCE, RI 02912	05-0258809	501 (C) (3)	187,500.				SUPPORT	
(6) BUFFALO REFORMED	1							
347 E FERRY ST BUFFALO, NY 14208	27-2881442	501 (C) (3)	50,000.		- <u> </u>		SUPPORT	
(7) BUSH FDN				·				
101 5TH ST E ST PAUL, MN 55101	41-6017815	501 (C) (3)	10,251.	- -			SUPPORT	
(8) CALIFORNIANS DEDICATED TO EDUCATION FDN		Ì						
MR. TIM SBRANTI LAFAYETTE, CA 94549	45-0676449	501 (C) (3)	500,000.				SUPPORT	
(9) CAMPAIGN FOR COLLEGE OPPORTUNITY]							
714 W OLYMPIC STE 745 LOS ANGELES, CA 90015	20-0427622	501 (C) (3)	250,000.				SUPPORT	
(10) CAROLINA FRIENDS SCHOOL]							
4809 FRIENDS SCHOOL RD DURHAM, NC 27705	56-0812560	501 (C) (3)	10,000.				SUPPORT	
(11) CASEL	_		4					
815 W VAN BUREN #210 CHICAGO, IL 60607	20-5884201	501 (C) (3)	1,500,000.				SUPPORT	
(12) CAUSECENTRIC PRODUCTIONS INC								
9 BENCHMARK RD. SHERMAN, CT 06784	27-3264552		8,000.			<u></u>	SUPPORT	
2 Enter total number of section 501(c)(3) and	l governmen	t organizations	listed in the line 1 to	able				
3 Enter total number of other organizations li	sted in the lir	ne 1 table	<u> </u>	<u> </u>	<u> </u>	<u></u> . •		

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

Department of the Treasury

Internal Revenue Service
Name of the organization

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.

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

ROCKEFELLER PHILANTHROPY ADVISORS	ROPY ADVISORS, INC.						13-3615533		
Part I General Information on Grants and	d Assistanc	е				·· !			
1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and			
the selection criteria used to award the grant	s or assistanc	e?					X Yes No		
2 Describe in Part IV the organization's proces									
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to							es" to Form 990,		
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
(1) CENTER CITY DISTRICT FDN									
660 CHESTNUT ST. PHILADELPHIA, PA 19106	23-2701217	501 (C) (3)	130,000.				SUPPORT		
(2) CENTER FOR EFFECTIVE PHILANTHROPY									
675 MASSACHUSETTS FL 7 CAMBRIDGE, MA 02139	04-3523528	501 (C) (3)	695,000.				SUPPORT		
(3) CENTER FOR EMPLOYMENT OPPORTUNITIES									
50 BRDWAY, SUITE 1604 NEW YORK, NY 10004	13-3843322	501 (C) (3)	156,000.				SUPPORT		
(4) CENTER FOR RURAL AFFAIRS									
145 MAIN ST. LYON, NE 68038	47-0553823	501 (C) (3)	200,000.				SUPPORT		
(5) CENTER OF WORKFORCE INNOVATIONS									
2804 BOILERMAKER CT VALPARAISO, IN 46383	35-2099782	501 (C) (3)	20,000.				SUPPORT		
(6) CENTRAL CAROLINA COMMUNITY FDN	_								
2711 MIDDLEBURG DRIVE COLUMBIA, SC 29204	57-0793960	501 (C) (3)	70,000.				SUPPORT		
(7) CENTRAL PARK NC	_								
PO BOX 159 STAR, NC 27356	56-1580629	501 (C) (3)	400,000				SUPPORT		
(8) CHABOT-LAS POSITAS COMM. COLLEGE DISTRICT	_								
7600 DUBLIN FL 3 DUBLIN, CA 94568	23-7074515	501 (C) (3)	400,000				SUPPORT		
(9) CHAPIN HALL CENTER FOR CHILDREN	_								
1313 EAST 60TH ST. CHICAGO, IL 60637-2830	36-2167012	501 (C) (3)	103,000.				SUPPORT		
(10) CHARLOTTE CENTER CITY PARTNERS	_								
200 S TRYON ST #1600 CHARLOTTE, NC 28202	01-0554275	501 (C) (3)	412,000.				SUPPORT		
(11) CHINESE AMERICAN PLANNING COUNCIL	_j								
150 ELIZABETH ST. NEW YORK, NY 10012	13-5202592	501 (C) (3)	25,000.				SUPPORT		
(12) CITIZEN ACTION OF WISC. EDUCATION FUND	_								
221 S 2ND ST. #300S MILWAUKEE, WI 53204	39-1520619		25,000.				SUPPORT		
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 to	able		. >			
3 Enter total number of other organizations is	isted in the lir	ne 1 table	<u></u>			<u></u> ▶			

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

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

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

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

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

2014

OMB No 1545-0047

Open to Public Inspection

X Yes No.

Department of the Treasury Internal Revenue Service Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

General Information on Grants and Assistance

the selection criteria used to award the grants or assistance?

Employer Identification number 13-3615533

2 Describe in Part IV the organization's proced				United States.			
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient th	omestic Or nat received	ganizations ar more than \$5	n d Domestic Gov ,000. Part II can b	ernments. Compe duplicated if a	plete if the organizadditional space is r	ation answered "Y needed.	es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CITIZEN FILM INC							
2180 BRYANT #201 SAN FRANCISCO, CA 94110	81-0621889	501 (C) (3)	250,000.				SUPPORT
(2) CITIZENS FOR EDUCATION EXCELLENCE, INC					· · · · · · · · · · · · · · · · · · ·		
P.O. BOX 261125 CORPUS CHRISTI, TX 78426	75-3137924	501 (C) (3)	20,000.				SUPPORT
(3) CITY AND COUNTY OF SAN FRANCISCO					-		
1 DR GOODLETT PL SAN FRANCISCO, CA 94102	94-6000417	501 (C) (3)	219,597.				SUPPORT
(4) CITY OF AUSTIN, ECONOMIC DEVELOP. DIVISION							
201 E. 2ND ST. AUSTIN, TX 78701	74-6000085	501 (C) (3)	256,500.				SUPPORT
(5) CITY OF BERKELEY]						
2180 MILVIA ST. BERKELEY, CA 94704	94-6000299	501 (C) (3)	647,436.				SUPPORT
(6) CITY OF BOULDER	_						
1739 BRDWAY, 3RD FLOOR BOULDER, CO 80306	84-6000566	501 (C) (3)	284,000.				SUPPORT
(7) CITY OF FARGO							
200 NORTH 3RD ST. FARGO, ND 58102	45-6002069	501 (C) (3)	450,000.				SUPPORT
(8) CITY OF GRAND RAPIDS							
300 MONROE NW #921 GRAND RAPIDS, MI 49503	38-6004689	501 (C) (3)	20,000.				SUPPORT
(9) CITY OF LITTLE ROCK							
500 WEST MARKHAM ST. LITTLE ROCK, AR 72201	71-6014465	501 (C) (3)	345,000				SUPPORT
(10) CITY OF MARION							
1225 6TH AVE, SUITE 100 MARION, IA 52302	42-6004932	501 (C) (3)	350,000.				SUPPORT
(11) CITY OF NEW LONDON							
PO BOX 252 NEW LONDON, MN 56273	41-6005408	501 (C) (3)	262,500.				SUPPORT
(12) CITY OF NEW ORLEANS							
1300 PERDIDO ST \$2E04 NEW ORLEANS, LA 70112			156,104.			_	SUPPORT
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 to	able			
3 Enter total number of other organizations li					<u></u>	<u></u> .▶	
For Paperwork Reduction Act Notice, see the Instructi	ons for Form 9	90.				Sch	edule I (Form 990) (2014)

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Department of the Treasury

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Internal Revenue Service

Name of the organization

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.

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

13-3615533

Part I General Information on Grants and	l Assistanc	е		<u> </u>			
1 Does the organization maintain records to su	ıbstantıate th	e amount of the	grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant	s or assistanc	e?					X Yes No
2 Describe in Part IV the organization's proced							_
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient tr							es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CITY OF NORFOLK							
810 UNION ST. NORFOLK, VA 23510	54-6001455	501 (C) (3)	375,772.				SUPPORT
(2) CITY OF OAKLAND							
1 FRANK OGAWA PL #301 OAKLAND, CA 94612	94-6000384	501 (C) (3)	244,543.				SUPPORT
(3) CIVIC CONSULTING ALLIANCE							
21 S CLARK #4301 CHICAGO, IL 60603	45-0467524	501 (C) (3)	20,000.				SUPPORT
(4) CLARKSDALE REVITALIZATION, INC.				<u> </u>			
PO BOX 909 CLARKSDALE, MS 38614	26-2665278	501 (C) (3)	350,000.				SUPPORT
(5) CLEVELAND CLINIC FDN]						
2049 E 100TH ST CLEVELAND, OH 44195	34-0714585	501 (C) (3)	36,778.				SUPPORT
(6) CLEVELAND METROPOLITAN SCHOOL DISTRICT]						
1111 SUPERIOR E #1800 CLEVELAND, OH 44114	34-6000662	501 (C) (3)	250,000.				SUPPORT
(7) CNTR FOR EDU INNOVATION - PUB. EDU. ASS'N]						
28 W 44 ST #300 NEW YORK, NY 10036	13-4113613	501 (C) (3)	100,000.				SUPPORT
(8) COACHELLA VALLEY ECONOMIC PARTNERSHIP]						
3111 E TAHQUITZ CNYN PALM SPRINGS, CA 92262	33-0642485	501 (C) (3)	70,000.				SUPPORT
(9) COALFIELD DEVELOPMENT CORPORATION]						
P.O. BOX 1133 WAYNE, WV 25570	26-3836207	501 (C) (3)	350,000.				SUPPORT
(10) COLEMAN CENTER FOR THE ARTS	1						
630 AVE A YORK, AL 36925	63-0844429	501 (C) (3)	200,000.				SUPPORT
(11) COLLEGE OF THE ATLANTIC	<u>}</u>						
105 EDEN ST. BAR HARBOR, ME 04609	23-7032625	501 (C) (3)	7,500.				SUPPORT
(12) COLLEGE OF THE OUACHITAS]						
PAT SIMMS MALVERN, AR 72104	71-0411511		10,000.				SUPPORT
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 to	able			
3 Enter total number of other organizations li	sted in the lir	ne 1 table			 <u> </u>	<u></u>	
For Paperwork Reduction Act Notice, see the Instructi	ons for Form 9	90.				Sch	edule I (Form 990) (2014)

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.

Open to Public

OMB No. 1545-0047

2014

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 General Information on Grants and Assistance Part I 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? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(q) Description of (h) Purpose of grant (book, FMV appraisal, or government if applicable grant cash assistance non-cash assistance or assistance (1) COLONIAL WILLIAMSBURG FDN P.O. BOX 1776 WILLIAMSBURG, VA 23187-1776 54-0505888 | 501 (C) (3) 13,500. SUPPORT (2) COLORADO CIVIC ENGAGEMENT PO BOX 1620 DENVER, CO 80201 02-0758897 501 (C) (3) 25,000 SUPPORT (3) COLORADO PROGRESSIVE COALITION STATE OFFICE DENVER, CO 80204 84-1338008 |501 (C) (3) 30,000. SUPPORT (4) COLORADO STATE UNI. FDN - OFFICE OF SPONS P 2002 CAMPUS D. FORT COLLINS, CO 80523-2002 23-7098397 501 (C) (3) 59,680. SUPPORT (5) COLUMBUS LEARNING CENTER MGMT CORP 4555 CENTRAL AVE COLUMBUS, IN 47203 35-2120567 501 (C) (3) 75,000. SUPPORT (6) COMM. CENTER FOR EDUCATION RESULTS 2100 24 AVE S #340 SEATTLE, WA 98144 27-1667560 501 (C) (3) 75,000 SUPPORT (7) COMM. FDN FOR THE NATIONAL CAPITAL REGION 1201 15TH ST N.W WASHINGTON, DC 20005 23-7343119 501 (C) (3) 1,110,500. SUPPORT (8) COMM. FDN OF GREATER GREENSBORO INC P.O. BOX 20444 GREENSBORO, NC 27420-0444 561380249 501 (C) (3) 75,000. SUPPORT (9) COMMIT2DALLAS 3963 MAPLE AVE, SUITE 290 DALLAS, TX 75219 80-0790222 501 (C) (3) 20,000. ISUPPORT (10) COMMON CAUSE EDUCATION FUND 245 WATERMAN #400A PROVIDENCE, RI 02906 31-1705370 | 501(C)(3) 6,000. SUPPORT (11) COMMUNITIES FON OF TEXAS, INC 5500 CARUTH HAVEN LANE DALLAS, TX 75225 75-0964565 501(C)(3) 20,000 SUPPORT (12) COMMUNITY FON FOR GREATER BUFFALO 75,000. 726 EXCHANGE #525 BUFFALO, NY 14210 22-2743917 501(C)(3) SUPPORT Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for 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.

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

► Attach to Form 990.

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

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

General Information on Grants and Assistance

Employer Identification number 13-3615533

Part II Grants and Other Assistance to De Part IV, line 21, for any recipient the							es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) COMMUNITY MUSICWORKS							
1392 WESTMINSTER ST PROVIDENCE, RI 02909	05-0507426	501 (C) (3)	210,000.				SUPPORT
(2) COMPATIBLE TECHNOLOGY INTERNATIONAL							
800 TRANSFER RD, SUITE 6 ST. PAUL, MN 55082	41-1400421	501 (C) (3)	20,000.				SUPPORT
(3) CONSERVATION INTERNATIONAL FDN							
2011 CRYSTAL DR #500 ARLINGTON, VA 22202	52-1497470	501 (C) (3)	1,344,000.				SUPPORT
(4) CONSERVATION LAW FDN							
62 SUMMER ST. BOSTON, MA 02110	04-6149986	501 (C) (3)	5,500.				SUPPORT
(5) COOPERS FERRY DEVELOPMENT ASSOC. INC		-					
2 RIVERSIDE DR #501 CAMDEN, NJ 08103	52-1333698	501 (C) (3)	475,000.				SUPPORT
(6) CORNERSTONE CAMPAIGN					· · ·	, ,	
660 PENN SE 302 WASHINGTON, DC 20003	05-0528669	501 (C) (3)	430,000				SUPPORT
(7) COUNCIL FOR A STRONG AMERICA							
1212 NEW YORK NW #300 WASHINGTON, DC 20005	13-3840271	501 (C) (3)	50,000.				SUPPORT
(8) COUNCIL FOR ADULT & EXPERIENTIAL LEARNING					-	, ,	
55 E MONROE #2710 CHICAGO, IL 60603	13-2890752	501 (C) (3)	25,000.				SUPPORT
(9) CREATIVE COMMONS							
PO BOX 1866 MOUNTAIN VIEW, CA 94042	04-3585301	501 (C) (3)	125,000.				SUPPORT
10) CREATIVE TIME, INC.							
59 E 4 ST FL 6 NEW YORK, NY 10003	13-2835847	501 (C) (3)	45,000.				SUPPORT
11) CRISTO REY NEW YORK HIGH SCHOOL							
112 EAST 106TH ST. NEW YORK, NY 10029	03-0495750	501 (C) (3)	19,200.				SUPPORT
12) CUCKOLDS FOG SIGNALS & LIGHT STATION COUN.							
PO BOX 117 NEWAGEN, ME 04576	03-0601659	501 (C) (3)	10,000.				SUPPORT

For Paperwork Reduction Act Notice, see the Instructions for 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.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Name of the organization				-		Employer identificat	ion number
ROCKEFELLER PHILANTHROPY ADVISORS	, INC.					13-361553	3
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to si the selection criteria used to award the grant Describe in Part IV the organization's process 	s or assistand Jures for moi	e? nitoring the use	of grant funds in the	United States.			X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the	omestic Or nat received	ganizations ar more than \$5	n d Domestic Gov ,000. Part II can b	ernments. Com e duplicated if a	plete if the organiz additional space is r	ation answered "Y needed.	es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) DANCE EXCHANGE INC	i						
7117 MAPLE AVE TAKOMA PARK, MD 20912	52-1076232	501 (C) (3)	210,000.				SUPPORT
(2) DANCE SERVICE NEW YORK CITY INC.			·				
218 E 18TH ST NEW YORK, NY 10003	46-0830780	501 (C) (3)	25,000				SUPPORT
(3) DEERFIELD ACADEMY							
7 BOYDEN LANE DEERFIELD, MA 01342	04-2103563	501 (C) (3)	115,650.				SUPPORT
(4) DEMOS A NETWORK FOR IDEAS & ACTION							
220 FIFTH AVE, 2ND FLOOR NEW YORK, NY 10001	13-4105066	501 (C) (3)	7,500.				SUPPORT
(5) DENVER FDN			!				
55 MADISON ST FL 8 DENVER, CO 80206-5423	84-6048381	501 (C) (3)	70,000				SUPPORT
(6) DESIGN MUSEUM BOSTON INC	_		İ				
15 CHANNEL CENTER ST., #211	27~0816164	501 (C) (3)	50,000.				SUPPORT
(7) DETROIT HISTORICAL SOCIETY						-	
5401 WOODWARD AVE DETROIT, MI 48202	38-1381144	501 (C) (3)	25,000.				SUPPORT
(8) DEVELOPMENT GATEWAY						-	
1110 VERMONT NW #500 WASHINGTON, DC 20005	52-2318905	501 (C) (3)	500,000.				SUPPORT
(9) DEVELOPMENT IN GARDENING	1]					
999 PEACHTREE ST. NE ATLANTA, GA 30309	20-4708212	501 (C) (3)	18,400.				SUPPORT
10) DOCTORS WITHOUT BORDERS							
333 7 AVE FL 2 NEW YORK, NY 10001-5004	13-3433452	501(C)(3)	50,500.				SUPPORT
11) DREAMYARD PROJECT]						
1085 WASHINGTON, GROUND FL BRONX, NY 10456	13-3759661	501 (C) (3)	25,000.				SUPPORT
12) DUDLEY STREET NEIGHBORHOOD INITIATIV	1		<u> </u>			-	
504 DUDLEY ST ROXBURY, MA 02119	04-2359066		200,000.				SUPPORT
2 Enter total number of section 501(c)(3) and	-	-	listed in the line 1 to	able		-	
3 Enter total number of other organizations li	stad in the lir	na 1 tahla				_	

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

Schedule I (Form 990) (2014)

JSA

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.

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

2014

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Name of the organization

Employer Identification number 13-3615533

Part L 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? X Yes 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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. (f) Method of valuation (book, FMV, appraisal, 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant or government if applicable grant cash assistance other) non-cash assistance or assistance (1) DUKE UNI. 250 SANFORD INSTITUTE DURHAM, NC 27708 56-0532129 | 501 (C) (3) 36,778. SUPPORT (2) DUPAGE REGIONAL OFFICE OF EDUCATION 421 NORTH COUNTY FARM RD WHEATON, IL 60187 501 (C) (3) 50,000. SUPPORT (3) EARTHENABLE 11 CANDLEBERRY LANE WESTON, MA 02493 501 (C) (3) 46-5540643 20,000. SUPPORT (4) EAST COAST ASSISTANCE DOGS INC. 06-1436718 501 (C) (3) 10.000. PO BOX 251 DOBBS FERRY, NY 10522 SUPPORT (5) EASTERN IOWA COMMUNITY COLLEGES 306 WEST RIVER DRIVE DAVENPORT, IA 52801 42-1430209 501 (C) (3) 75,000 SUPPORT (6) EASTSIDE ARTS ALLIANCE 74-3073621 501 (C) (3) PO BOX 17008 OAKLAND, CA 94601 250,000. SUPPORT (7) EDUCATION REFORM NOW, INC 24 W. 46TH ST., SUITE 4 NEW YORK, NY 10036 20-3687838 501 (C) (3) 100,000 SUPPORT (8) EDUCATION TRUST WEST 1814 FRANKLIN ST #220 OAKLAND, CA 94612 52-1982223 |501(C)(3) 350,000. SUPPORT (9) EDUCATIONAL POLICY IMPROVEMENT CENTER 1700 MILLRACE DRIVE EUGENE, OR 97403 82-0569407 501 (C) (3) 400,000. SUPPORT (10) EDUCATORS FOR EXCELLENCE 448 SOUTH HILL #718 LOS ANGELES, CA 90013 27-3382030 |501(C)(3) 250,000. SUPPORT (11) EDVOICE INSTITUTE FOR RESEARCH & EDUCATION 1107 9TH #680 SACRAMENTO, CA 95814 20-5320422 501 (C) (4) 50,000. SUPPORT (12) EL CENTRO HISPANO 346 S LEXINGTON AVE WHITE PLAINS, NY 10606 | 13-4149424 | 501(C) (3) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Schedule I (Form 990) (2014)

JSA

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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.

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2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eliqibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part II Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ELSEWHERE INCORPORATED							
606 S ELM ST GREENSBORO, NC 27406	20-1026041	501 (C) (3)	200,000.				SUPPORT
(2) EMBRACE	_]						· - · -
1440 BRDWAY, SUITE 205 OAKLAND, CA 95612	73-1687650	501 (C) (3)	20,000.				SUPPORT
(3) ENVIRON. COALITION OF S. SEATTLE (ECOSS)							
8201 10TH AVE SOUTH #3 SEATTLE, WA 98108	91-1613460	501 (C) (3)	300,000.				SUPPORT
(4) ENVIRONMENT COLORADO INC.	_}	i					
1543 WAZEE ST., SUITE 400 DENVER, CO 80202	57-1151228	501 (C) (4)	25,000.				SUPPORT
(5) ENVIRONMENTAL DEFENSE FUND	_						
ATTN: MEMBER SERVICES WASHINGTON, DC 20009	11-6107128	501 (C) (3)	8,000.				SUPPORT
(6) EUGENE SCHOOL DISTRICT 4J							
200 NORTH MONROE ST. EUGENE, OR 97402	93-6000566	501(C)(3)	50,000.				SUPPORT
(7) EXALT YOUTH							
175 REMSEN ST BROOKLYN, NY 11201	20-5540955	501 (C) (3)	25,500.				SUPPORT
(8) EXCELLENT SCHOOLS DETROIT	_	i					
211 WOODWARD AVE #506 DETROIT, MI 48201	27-4616034	501 (C) (3)	20,000.				SUPPORT
(9) EXPONENT PHILANTHROPY							
1720 N ST NW WASHINGTON, DC 20036	65-0617866	501(C)(3)	121,000.				SUPPORT
(10) FAIR SHARE ALLIANCE		,					
218 D STSE #205 WASHINGTON, DC 20003	26-1525298	501(C)(4)	10,000.				SUPPORT
(11) FAIRFIELD UNI							
1073 N BENSON RD FAIRFIELD, CT 06824-5171	06-0646623	501 (C) (3)	10,000.				SUPPORT
(12) FAUNA & FLORA INTERNATIONAL							
1720 N ST., NW WASHINGTON, DC 20036	04-2730954		250,000.				SUPPORT
Enter total number of section 501(c)(3) andEnter total number of other organizations l	d governmen sted in the lir	t organizations ne 1 table	listed in the line 1 to	able			

Schedule I (Form 990) (2014)

JSA

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For Paperwork Reduction Act Notice, see the Instructions for 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.

Open to Public

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X Yes 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. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, or government if applicable grant non-cash assistance or assistance cash assistance other) (1) FDN FOR APPALACHIAN KENTUCKY PO BOX 310 CHAVIES, KY 41727 61-1329396 501(C)(3) 50,000. SUPPORT (2) FDN FOR CALIFORNIA COMMUNITY COLLEGES 1102 Q ST., SUITE 3500 SACRAMENTO, CA 95811 501 (C) (3) 85,000. 68-0412350 SUPPORT (3) FDN FOR THE NATIONAL INSTITUTE OF HEALTHL 9650 ROCKVILLE PIKE BETHESDA, MD 20814 52-1986675 501 (C) (3) 10,000. SUPPORT (4) FOOD BANK FOR WESTCHESTER INC. 200 CLEARBROOK RD ELMSFORD, NY 10523 13-3507988 501 (C) (3) 6,000 SUPPORT (5) FOR-SITE FDN 49 GEARY #205 SAN FRANCISCO, CA 94108 84-1617222 | 501(C)(3) 9,455. SUPPORT (6) FREE FOR ALL CONCERT FUND 27-5457803 501 (C) (3) 15,000 168 BRATTLE ST. CAMBRIDGE, MA 02138 SUPPORT (7) FRIENDS OF ROCKEFELLER ST. PARK PRESERVE 58-2295320 |501(C)(3) P.O. BOX 8444 SLEEPY HOLLOW, NY 10591 25,000. SUPPORT (8) FRIENDS OF THE MORRILL HOMESTEAD, INC P.O. BOX 98 STRAFFORD, VT 05072 03-0356732 501(C)(3) 6,000. SUPPORT (9) FUND FOR THE REPUBLIC 11 DUPONT CIR NW #350 WASHINGTON, DC 20036 32-0384285 501 (C) (3) 10,000. SUPPORT (10) FUSE BOX AUSTIN (FUSEBOX FESTIVAL) 2023 E CESAR CHAVEZ ST AUSTIN, TX 78702 501 (C) (3) 26-3676365 400,000. SUPPORT (11) GENERATION ENTERPRISE 3537 LOCUST WK #100 PHILADELPHIA, PA 19104 41-2272965 | 501 (C) (3) 20,000. SUPPORT (12) GEORGE WASHINGTON UNIV. HEART & VASCULAR IN 2150 PENN NW #4-417 WASHINGTON, DC 20037 53-0196584 |501(C)(3) SUPPORT Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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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.

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

2014 Open to Public Inspection

OMB No 1545-0047

ROCKEFELLER PHILANTHROPY ADVISORS	OCKEFELLER PHILANTHROPY ADVISORS, INC.						3
Part I General Information on Grants and	d Assistanc	е					
1 Does the organization maintain records to su	bstantiate th	ne amount of the	e grants or assista	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant	s or assistand	ce?	<i></i>				X Yes No
2 Describe in Part IV the organization's proced	lures for mor	nitoring the use	of grant funds in the	e United States,			
Part II Grants and Other Assistance to D	omestic Or	ganizations a	nd Domestic Gov	vernments Com	nlete if the organiz	ration answered "Y	es" to Form 990
Part IV, line 21, for any recipient the							cs (61 0mm 550,
				,			
(a) Name and address of organization or government	(b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) GEORGETOWN UNI.							
2303 37TH ST NW WASHINGTON, DC 20007	53-0196603	501 (C) (3)	27,000				SUPPORT
(2) GIVEWELL]						
182 HOWARD #208 SAN FRANCISCO, CA 94105	20-8625442	501 (C) (3)	100,000.				SUPPORT
(3) GLOBALGIVING FDN							
110 VERMONT NW #550 WASHINGTON, DC 20005	30-0108263	501 (C) (3)	700,000.				SUPPORT
(4) GREATER HOUSTON PARTNERSHIP, INC.]						
1200 SMITH ST. HOUSTON, TX 77002	20-8179135	501 (C) (6)	75,000.				SUPPORT
(5) GREATER MILWAUKEE COMMITTEE FOR COMM. DEV.	_						
247 FRESHWATER WAY #400 MILWAUKEE, WI 53204	39-0749512	501 (C) (3)	20,000.				SUPPORT
(6) GREATER PHILADEL. CHMBR OF COMM. REG FDN							
200 SOUTH BRD ST. PHILADELPHIA, PA 19102	23-2653189	501 (C) (3)	75,000.				SUPPORT
(7) GREATER YELLOWSTONE COALITION, INC.							
215 SOUTH WALLACE AVE BOZEMAN, MT 59715	81-0414042	501 (C) (3)	7,500.				SUPPORT
(8) GREENWICH ACADEMY]				-		
200 NORTH MAPLE AVE GREENWICH, CT 06830	06-0653118	501 (C) (3)	7,500.				SUPPORT
(9) GULF OF MAINE RESEARCH INSTITUTE]						
350 COMMERCIAL ST. PORTLAND, ME 04101	01-0504905	501 (C) (3)	11,000.				SUPPORT
(10) HABITAT FOR HUMANITY INTERNATIONAL, INC]						
121 HABITAT ST. AMERICUS, GA 31709	91-1914868	501 (C) (3)	162,000.				SUPPORT
(11) HAITIAN EDUCATION INITIATIVE (HEI)]						
857 POST RD FAIRFIELD, CT 06924	27-4250639	501 (C) (3)	20,000.				SUPPORT
(12) HANDEL & HAYDN SOCIETY	1						
300 MASSACHUSETTS AVE BOSTON, MA 02115	04-2126598		10,000.				SUPPORT
2 Enter total number of section 501(c)(3) and	-	-					
3 Enter total number of other organizations li	sted in the lir	ne 1 table	<u> </u>		<u> </u>	<u></u> ▶	
For Paperwork Reduction Act Notice, see the Instructi	ons for Form 9	90.				Sch	edule I (Form 990) (2014)

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

2014

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Employer identification number

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

ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 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? X Yes No 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. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant (book, FMV, appraisal, or government if applicable grant cash assistance non-cash assistance or assistance (1) HARLEM LACROSSE AND LEADERSHIP P.O. BOX 708 NEW YORK, NY 10030 45-1634118 501(C)(3) 25,000. SUPPORT (2) HARVARD BUSINESS SCHOOL 04-2103580 501(C)(3) DEVELOPMENT OPERATIONS BOSTON, MA 02163 26,500. SUPPORT (3) HEART OF FLORIDA UNITED WAY 1940 TRAYLOR BLVD. ORLANDO, FL 32804 59-0808854 501(C)(3) 20,000. SUPPORT (4) HISTORIC HUDSON VALLEY 639 BEDFORD RD POCANTICO HILLS, NY 10591 13-1692606 501(C)(3) 35,000. SUPPORT (5) HOLE IN THE WALL FON 122 E 42 ST 26 FL NEW YORK, NY 10168 20-3865042 501(C)(3) 10,000. SUPPORT (6) HOSPICE AND PALLIATIVE CARE OF WESTCHESTER 311 NORTH ST. WHITE PLAINS, NY 10605 13-3634734 |501(C)(3) 10,000 SUPPORT (7) HUNTER COLLEGE 695 PARK AVE EAST. 1313A NEW YORK, NY 10065 13-3598671 | 501(C)(3) 120,000. SUPPORT (8) IA CITIZENS FOR COMM. IMPROVE. ACTION FUND 2001-2005 FOREST AVE DES MOINES, IA 50311 45-3279620 501 (C) (4) 10.000 SUPPORT (9) ILEX FDN 84 REVERE ST. BOSTON, MA 02114 34-7089903 501 (C) (3) 140.000. SUPPORT (10) ILLINOIS STATE BOARD OF EDUCATION 100 NORTH FIRST ST. SPRINGFIELD, IL 62777 05-0527061 170(2)(1) 100,000. SUPPORT (11) INCOURAGE COMMUNITY FON INC 478 E GRAND AVE WISC RAPIDS, WI 54494 39-1772651 | 501(C)(3) 400,000. SUPPORT (12) INTERNAT. INSTIT. OF RURAL RECONSTRUCTION 601 WEST 26TH ST NEW YORK, NY 10001 13-6175722 | 501 (C) (3) 138,100. SUPPORT Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Schedule I (Form 990) (2014)

JSA

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

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	me of the organization							
ROCKEFELLER PHILANTHROPY ADVISORS	, INC.					13-361553	3	
Part I General Information on Grants an	d Assistanc	е						
1 Does the organization maintain records to si the selection criteria used to award the grant	ubstantiate th	ne amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	ts or assistance, and	X Yes No	
2 Describe in Part IV the organization's proces	dures for mo	nitoring the use	of grant funds in the	LInited States		• • • • • • • • • • • • • • • • • • • •		
			<u> </u>		1.1.60			
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the	nat received	more than \$5	,000. Part II can b	pe duplicated if a	additional space is r	ation answered "Y needed	es" to Form 990,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) INTERNATIONAL FUND FOR CHINA'S ENVIRONMENT								
2421 PA AVE WASHINGTON, DC 20037	54-1814885	501 (C) (3)	70,000.				SUPPORT	
(2) INTRAHEALTH INTERNATIONAL								
6340 QUADRANGLE DRIVE CHAPEL HILL, NC 27517	55-0825466	501 (C) (3)	20,880.				SUPPORT	
(3) ISLAND INSTITUTE							-	
386 MAIN ST. ROCKLAND, ME 04841-0648	94-3057411	501 (C) (3)	10,500.				SUPPORT	
(4) ISRAEL CENTER OF VT, INC								
200 CHURCH ST BURLINGTON, VT 05401	20-4545468	501 (C) (3)	10,000.				SUPPORT	
(5) JACKSONVILLE CHAMBER FDN, INC								
3 INDEPENDENT DR JACKSONVILLE, FL 32202	59-1867407	501 (C) (3)	20,000				SUPPORT	
(6) JEWISH FUNDERS NETWORK					-			
150 WEST 30TH STE 900 NEW YORK, NY 10001	23-2742482	501 (C) (3)	10,000.				SUPPORT	
(7) JOBTRAIN, INC.								
1200 O'BRIEN DRIVE MENLO PARK, CA 94025	94-1712371	501 (C) (3)	50,000.		_		SUPPORT	
(8) JOHNS HOPKINS UNI.				-				
SCHOOL OF NURSING BALTIMORE, MD 21205	52-0595110	501 (C) (3)	43,498.				SUPPORT	
(9) JUNEAU ARTS AND HUMANITIES COUNCIL								
PO BOX 20562 JUNEAU, AK 99802	23-7243859	501 (C) (3)	250,000.				SUPPORT	
(10) JUST DETENTION INTERNATIONAL	_	Ì				-		
3325 WILSHIRE BLVD. LOS ANGELES, CA 90010	13-3711840	501 (C) (3)	22,500.				SUPPORT	
(11) JUXTAPOSITION INC				·				
2007 EMERSON AVE MINNEAPOLIS, MN 55411	41-1851915	501(C)(3)	500,000.				SUPPORT	
(12) KENTUCKY COUNCIL								
1024 CAPITAL CENTER DR. FRANKFORT, KY 40601			254,000.				SUPPORT	
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 to	able				
3 Enter total number of other organizations is	sted in the li	na 1 tahla						

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

Schedule I (Form 990) (2014)

JSA

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Department of the Treasury

Internal Revenue Service

Name of the organization

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.

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OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

ROCKEFELLER PHILANTHROPY ADVISORS, INC.						13-3615533		
Part I General Information on Grants a	nd Assistanc	е						
1 Does the organization maintain records to	substantiate th	ne amount of the	e grants or assistar	nce, the grantees	eligibility for the gran	ts or assistance, and		
the selection criteria used to award the grai	nts or assistand	ce?					X Yes No	
2 Describe in Part IV the organization's proce								
Part II Grants and Other Assistance to Part IV, line 21, for any recipient							es" to Form 990,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) KHAN ACADEMY						-		
P.O. BOX 1630 MOUNTAIN VIEW, CA 94042	26-1544963	501 (C) (3)	361,000.				SUPPORT	
(2) KNOWLEDGEWORKS FDN								
ONE W FOURTH ST. CINCINNATI, OH 45202	31-1321973	501 (C) (3)	75,000.				SUPPORT	
(3) KOUNKUEY DESIGN INITIATIVE (KDI)								
108 W. 2ND ST. LOS ANGELES, CA 90012	90-0599471	501 (C) (3)	300,000.				SUPPORT	
(4) LAWRENCE ARTS CENTER, INC								
940 NEW HAMPSHIRE ST. LAWRENCE, KS 66044	48-0825692	501 (C) (3)	500,000.				SUPPORT	
(5) LEAGUE OF CONSERVATION VOTERS, INC.								
1920 L ST., NW WASHINGTON, DC 20036	52-1379661	501 (C) (3)	25,000.				SUPPORT	
(6) LEGAL AID SOCIETY								
199 WATER ST. NEW YORK, NY 10038	13-5562265	501 (C) (3)	20,000.				SUPPORT	
(7) LIFT, INC.								
1620 I ST. WASHINGTON, DC 20006	52-2168409	501 (C) (3)	200,000.				SUPPORT	
(8) LOS ANGELES AREA CHAMBER OF COMMERCE FDN								
350 S BIXEL ST. LOS ANGELES, CA 90017	95-2597392	501 (C) (3)	400,000.				SUPPORT	
(9) LOUISIANA BOARD OF REGENTS								
P.O. BOX 3677 BATON ROUGE, LA 70821-3677	72-6000720	501 (C) (3)	240,000.				SUPPORT	
(10) LOWCOUNTRY OPEN LAND TRUST								
43 WENTWORTH ST. CHARLESTON, SC 29403	57-0809313	501 (C) (3)	11,000.				SUPPORT	
(11) LULAC INSTITUTE INC								
1133 19TH ST WASHINGTON, DC 20036	52-2072106	501 (C) (3)	15,000.				SUPPORT	
(12) MAINE COAST HERITAGE TRUST								
1 BOWDOIN MILL ISLAND TOPSHAM, ME 04086	23-7099105	501 (C) (3)	35,000.				SUPPORT	
2 Enter total number of section 501(c)(3) a	nd governmen	it organizations	listed in the line 1 to	able		 >		
3 Enter total number of other organizations	listed in the li	ne 1 table						

For Paperwork Reduction Act Notice, see the Instructions for 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.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

ROCKEFELLER PHILANTHROPY ADVISORS	ORS, INC.					13-3615533		
Part I General Information on Grants and	d Assistanc	е						
1 Does the organization maintain records to su								
the selection criteria used to award the grant							X Yes No	
2 Describe in Part IV the organization's proced	lures for mor	nitoring the use	of grant funds in the	United States.				
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) MAINE HUTS & TRAILS								
375 N.MAIN ST. KINGFIELD, ME 04947	01-0537084	501 (C) (3)	25,000.				SUPPORT	
(2) MAINE MEDICAL CENTER								
22 BRAMHALL ST. PORTLAND, ME 04102	01-0238552	501 (C) (3)	10,000.				SUPPORT	
(3) MAKE THE ROAD NEW YORK								
301 GROVE ST. BROOKLYN, NY 11237	11-3344389	501 (C) (3)	30,000.				SUPPORT	
(4) MASSACHUSETTS BUSINESS ALLIANCE FOR ED.								
400 ATLANTIC AVE BOSTON, MA 02090	04-3274599	501 (C) (3)	100,000.				SUPPORT	
(5) MASSACHUSETTS DEPARTMENT OF HIGHER ED.						-		
ONE ASHBURTON PLACE BOSTON, MA 02108	04-6002284	501 (C) (3)	241,000.				SUPPORT	
(6) MASSACHUSETTS GENERAL HOSPITAL]							
55 FRUIT ST - GRB 817 BOSTON, MA 02114-2621	04-1564655	501 (C) (3)	46,778.				SUPPORT	
(7) MAYO CLINIC								
200 FIRST STREET SW ROCHESTER, MN 55905	41-1937751	501 (C) (3)	36,778				SUPPORT	
(8) MEDIA MATTERS ACTION FUND	_							
PO BOX 52155 WASHINGTON, DC 20091	77-0646754	501 (C) (4)	25,000.				SUPPORT	
(9) MEDSTAR RESEARCH INSTITUTE, INC.								
8010 CORPORATE DRIVE BALTIMORE, MD 21236	52-6056274	501 (C) (3)	36,778.				SUPPORT	
(10) MIAMI LIGHT PROJECT, INC.	1							
PO BOX 1048 MIAMI, FL 33137	65-0107810	501 (C) (3)	215,000.				SUPPORT	
(11) MID-AMER. REGION COUN COMM. SERVICES CORP	_	!						
600 BRDWAY KANSAS CITY, MO 64105	20-1824454	501 (C) (3)	70,000.				SUPPORT	
(12) MIRACLE HOUSE				-				
630 NINTH AVE \$603 NEW YORK, NY 10036	22-3081068	501 (C) (3)	25,000.]	SUPPORT	
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 to	able				
3 Enter total number of other organizations li	sted in the lu	ne 1 table	 	<u> </u>	<u>. ,</u>	<u></u>		
For Paperwork Reduction Act Notice, see the Instructi	ons for Form 9	90.				Sci	nedule I (Form 990) (2014)	

Department of the Treasury

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

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.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

13-3615533

Part I General Information on Grants an	d Assistanc	е									
1 Does the organization maintain records to s	ubstantiate th	e amount of th	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and					
the selection criteria used to award the grant	the selection criteria used to award the grants or assistance?										
2 Describe in Part IV the organization's proced	dures for mor	nitoring the use	of grant funds in the	e United States.							
Part IV, line 21, for any recipient to	omestic Or nat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can I	vernments. Compe duplicated if a	plete if the organized ditional space is	zation answered "Y needed.	es" to Form 990,				
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
(1) MIRACLEFEET											
410 WEST MAIN ST. CARRBORO, NC 27510	27-3764203	501 (C) (3)	20,000				SUPPORT				
(2) MOUNT SINAI SCHOOL OF MEDICINE					<u>.</u>						
ONE GUSTAVE L. LEVY PL BOX 1015	13-6171197	501 (C) (3)	73,556.				SUPPORT				
(3) NAT. FDN FOR ADVANCEMENT IN THE ARTS INC.											
2100 BISCAYNE BOULEVARD MIAMI, FL 33137	59-2141837	501 (C) (3)	300,000.				SUPPORT				
(4) NATIONAL ASSOC. OF MOTHERS' CENTERS, INC											
4940 MERRICK RD. MASSAPEQUA PARK, NY 11762	11-3242529	501 (C) (3)	250,000.				SUPPORT				
(5) NATIONAL AUDUBON SOCIETY					· -	-					
225 VARICK ST. NEW YORK, NY 10014	13-1624102	501 (C) (3)	14,200.				SUPPORT				
(6) NATIONAL BLUES MUSEUM FDN	_	1									
906 OLIVER ST. PH-17 SAINT LOUIS, MO 63101	46-1221955	501 (C) (3)	10,000.			<u></u>	SUPPORT				
(7) NATIONAL FISH AND WILDLIFE FDN	_										
1133 FIFTEENTH ST. WASHINGTON, DC 20005	52-1384139	501 (C) (3)	25,000.				SUPPORT				
(8) NATIONAL JEWISH HEALTH											
1400 JACKSON ST. DENVER, CO 80206	74-2044647	501 (C) (3)	7,500.			}	SUPPORT				
(9) NATIONAL LEAGUE FOR NURSING											
2600 VIRGINIA AVE NW, 8TH FLOOR	13-1896510	501 (C) (3)	121,000.				SUPPORT				
(10) NATIONAL PARK FDN											
1201 I ST. WASHINGTON, DC 20005	52-1086761	501 (C) (3)	25,000.				SUPPORT				
(11) NATURAL RESOURCES DEFENSE COUNCIL											
1200 NEW YORK AVE NW STE 400	13-2654926	501 (C) (3)	30,000.			Í	SUPPORT				
(12) NC CITIZENS FOR PROTECTING OUR SCHOOLS	_										
PO BOX 1093 RALEIGH, NC 27602	45-2294710		25,000.				SUPPORT				
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 to	able							
3 Enter total number of other organizations li	sted in the lir	ne 1 table	· · · · · · · · · · · · · · · · · · ·	· · · · · <u>· · · · · · · · · · · · · · </u>	· · · · · · · · · · · · · · · · · · ·	<u></u>					
For Paperwork Reduction Act Notice, see the Instructi	ons for Form 9	90.				Sch	nedule I (Form 990) (2014)				

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.

Open to Public
Inspection

OMB No 1545-0047

2014

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 ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 General Information on Grants and Assistance 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? X Yes No 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. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant (book, FMV, appraisal, or government if applicable grant non-cash assistance cash assistance or assistance other) (1) NC COMMUNITY COLLEGE SYSTEM 5016 MAIL CENTER RALEIGH, NC 27699-5016 56-1288079 | 501 (C) (3) 488,900. SUPPORT (2) NEIGHBORHOOD TRUST FINANCIAL PARTNERS 1112 ST. NICHOLAS AVE NEW YORK, NY 10032 13-3849263 501 (C) (3) 25,000. SUPPORT (3) NEW GARDEN FRIENDS SCHOOL INC. 1128 NEW GARDEN RD GREENSBORO, NC 27410 56-1002236 | 501 (C) (3) 10,000. SUPPORT (4) NEW HAMPSHIRE CHARITABLE FDN 37 PLEASANT ST. CONCORD, NH 03301 02-6005625 501 (C) (3) 70,000. SUPPORT (5) NEW JERSEY WORKING FAMILIES ALLIANCE 30 CLINTON ST NEWARK, NJ 07102 30-0427821 | 501 (C) (4) 200,000. SUPPORT (6) NEW MUSEUM OF CONTEMPORARY ART 235 BOWERY NEW YORK, NY 10002 13-2986881 501 (C) (3) 7,500. SUPPORT (7) NEW ORGANIZING INSTITUTE EDUCATION FUND 1133 19TH STRET, NW WASHINGTON, DC 20036 56-2633160 501 (C) (3) 30,000. SUPPORT (8) NEW VENTURE FUND 1201 CONNECTICUT AVE WASHINGTON, DC 20036 20-5806345 501 (C) (3) 70,000 SUPPORT (9) NEW YORK CIVIL LIBERTIES UNION FON 125 BRD ST., 17TH FLOOR NEW YORK, NY 10004 13-6167267 501 (C) (3) 20,000 SUPPORT (10) NEW YORK FDN FOR THE ARTS 20 JAY ST., 7TH FLOOR BROOKLYN, NY 11201 237129564 501 (C) (3) 12,200. SUPPORT (11) NEW YORK LEGAL ASSISTANCE GROUP 7 HANOVER SQUARE NEW YORK, NY 10004 25,000. 13-3505428 501(C)(3) SUPPORT (12) NEW YORK UNI. SCHOOL OF NURSING NEW YORK, NY 10003 13-5562308 | 501(C)(3) SUPPORT Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for 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.

2014

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OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Inspection Name of the organization Employer identification number ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 Part L 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? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part li 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 (f) Method of valuation (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant (book, FMV, appraisal or government if applicable grant cash assistance non-cash assistance or assistance other) (1) NEW YORK URBAN LEAGUE INC 204 WEST 136TH ST. NEW YORK, NY 10030 131671035 501 (C) (3) 300,000. SUPPORT (2) NEXT STAGE ARTS PROJECT, INC. 15 KIMBALL HILL PUTNEY, VT 05346 45-2157212 | 501 (C) (3) 370,000. SUPPORT (3) NONPROFIT INNOVATIONS 601 KAPPOCK ST. RIVERDALE, NY 10463 42-1587468 | 501 (C) (3) 25,000. SUPPORT (4) NONPROFITS ASSISTANCE FUND 2801 21ST AVE S MINNEAPOLIS, MN 55407 41-1916337 | 501(C)(3) 100,000. SUPPORT (5) NORTH CAROLINA BUSINESS LEADERS FOR ED 2826 LAZY LANE WINSTON-SALEM, NC 27106 46-2988453 | 501(C)(3) 100,000. SUPPORT (6) NORTH COUNTRY SCHOOL, INC. 4382 CASCADE RD LAKE PLACID, NY 12946 14-1430542 501(C)(3) 40,000. SUPPORT (7) NORTHEAST HARBOR SAILING SCHOOL P.O. BOX 12 NORTHEAST HARBOR, ME 04662 01-0535123 | 501 (C) (3) 20,500. SUPPORT (8) NORTHEAST INDIANA FON, INC. 200 EAST MAIN ST. FORT WAYNE, IN 46802 59-3812438 | 501(C)(3) 75,000. SUPPORT (9) NORTHEASTERN UNI. SCHOOL OF NURSING 102 ROBINSON HALL BOSTON, MA 02115 04-1679980 501 (C) (3) 20,000. SUPPORT (10) NORTHWESTERN UNI. 1801 MAPLE AVE EVANSTON, IL 60201 36-2167817 501 (C) (3) 36,778. SUPPORT (11) NUCLEAR INFORMATION AND RESOURCE SERVICE 6930 CARROLL AVE TAKOMA PARK, MD 20912 52-1119677 |501(C)(3) 10,000. SUPPORT (12) OCEANA 1350 CONNECTICUT AVE WASHINGTON, DC 20036 51-0401308 |501(C)(3) SUPPORT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer identification number ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 General Information on Grants and Assistance 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? X Yes No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part II Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, other) or government if applicable grant cash assistance non-cash assistance or assistance (1) OFFICE OF TALENT & HUMAN CAPITAL, MEMPHIS 125 N. MAIN ST. MEMPHIS, TN 38103 45-3216090 501(C)(3) 175,000. SUPPORT (2) OH BUS. ALLIANCE FOR HIGHER ED. 41 SOUTH HIGH ST. COLUMBUS, OH 43125 20-3642989 501(C)(3) 479,000. SUPPORT (3) OR DEPT. OF COMM COLLEGES & WRKFRC DEV. MR. DAVID MOORE SALEM, OR 97310 80-0383235 501(C)(3) 248,000 SUPPORT (4) OXFAM AMERICA, INC. 226 CAUSEWAY ST., 5TH FLOOR 23-7069110 |501(C)(3) 40,500. SUPPORT (5) OZARKA COLLEGE 218 COLLEGE DRIVE MELBOURNE, AR 72556 58-1969931 | 501(C)(3) 12.500. SUPPORT (6) PANGEA WORLD THEATER 711 W LAKE ST. MINNEAPOLIS, MN 55408 41-1854164 | 501(C)(3) 120,500. SUPPORT (7) PARTNERS IN HEALTH 888 COMMONWEALTH BOSTON, MA 02215 04-3567502 | 501 (C) (3) 30,000. SUPPORT (8) PARTNERSHIP FOR CHILDREN AND YOUTH 1330 BRDWAY, SUITE 601 04-3653529 501(C)(3) 150.000. SUPPORT (9) PETEY GREENE PRISONER ASSIST PROGRAM, INC. 9 MERCER ST., 2ND FLOOR PRINCETON, NJ 08540 30-0499760 501 (C) (3) 180,000. SUPPORT (10) PHILLIPS COMM. COLLEGE OF THE UNI. OF AR 1000 CAMPUS RD, HELENA HELENA, AR 72342 71-0388796 501 (C) (3) 10,000. SUPPORT (11) PHILLIPS EXETER ACADEMY 20 MAIN ST. EXETER, NH 03833-2460 02-0222174 |501(C)(3) 35,000. SUPPORT (12) PLANNED PARENTHOOD ACTION FUND 434 WEST 33RD ST. NEW YORK, NY 10001 13-3539048 501(C)(4) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for 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.

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

OMB No 1545-0047

ROCKE FELLER PHILANTHROPY ADVISORS	, INC.					13-3615533	3
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's process 	ts or assistand	e?			' eligibility for the gran	ts or assistance, and	X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) PLANNED PARENTHOOD FED. OF AMERICA, INC. 434 WEST 33RD ST. NEW YORK, NY 10001	13-1644147	501 (C) (3)	28,000.				SUPPORT
(2) POLICY & ECONOMIC RESEARCH COUNCIL (PERC)	_						
240 DURHAM, NC 27701 (3) PRINCETON UNI.	20-5179792	501 (C) (3)	48,925.				SUPPORT
P.O. BOX 5357 PRINCETON, NJ 08543-5357 (4) PRO MUJER	21-0634501	501 (C) (3)	278,840.				SUPPORT
240 WEST 35TH ST #404 NEW YORK, NY 10001	98-0115409	501 (C) (3)	10,000.				SUPPORT
(5) PROGRESS NOW EDUCATION 1536 WYNKOOP ST., #203 DENVER, CO 80202	20-8720291	501 (C) (3)	55,000.				SUPPORT
(6) PROGRESS MICHIGAN 215 S. WASHINGTON SQ LANSING, MI 48933	26-0900990	501 (C) (4)	15,000.				SUPPORT
(7) PROGRESSNOW COLORADO 1714 HUMBOLDT ST. DENVER, CO 80218	65-1244918	501 (C) (4)	10,000.				SUPPORT
(8) PROVIDENCE HOUSE 703 LEXINGTON AVE BROOKLYN, NY 11221	11-2594653		50,000.				SUPPORT
(9) PUBLIC CONVERSATIONS PROJECT, INC. 46 KONDAZIAN ST. WATERTOWN, MA 02472-2832	22-3432160		14,500.				SUPPORT
(10) QUALITY OF LIFE FDN OF AUSTIN INC	1						
535 E STH ST. AUSTIN, TX 78701 (11) QUODDY TIDES FDN	74-2394827	501 (C) (3)	20,000.				SUPPORT
PO BOX 161, 43 WATER ST. EASTPORT, ME 04631 (12) REGENTS OF THE UNI. OF CALIFORNIA, LA	01-6046843	501 (C) (3)	150,000.				SUPPORT
BOX 951432, 1125 MURPHY HALL 2 Enter total number of section 501(c)(3) an	95-6006143		36,778.	ahlo			SUPPORT
3 Enter total number of other organizations i	-	-					

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

Department of the Treasury

Internal Revenue Service
Name of the organization

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.

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OMB No 1545-0047

2014

Open to Public Inspection
Employer identification number

ROCKEFELLER PHILANTHROPY ADVISORS	, INC.					13-3615533	3
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to state the selection criteria used to award the grant Describe in Part IV the organization's proced 	ts or assistand	e?	_ 				X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) REGENTS OF THE UNI. OF MICHIGAN		,					
5000 WOLVERINE TOWER ANN ARBOR, MI 48109	38-6006309	501 (C) (3)	150,000.				SUPPORT
(2) REGENTS OF THE UNI. OF MINNESOTA							
NW 5957 MINNEAPOLIS, MN 55485	41-6007513	501 (C) (3)	86,021.				SUPPORT
(3) RENSSELAER POLYTECHNIC INSTITUTE							
PO BOX 3164 BOSTON, MA 02241-3164	14-1340095	501 (C) (3)	15,000.				SUPPORT
(4) RESEARCH FDN OF CITY UNI. OF NY							
230 WEST 41ST ST. NEW YORK, NY 10036	13-1988190	501 (C) (3)	70,000.				SUPPORT
(5) RESTAURANT OPPORTUNITIES CENTERS UNITED	_						
275 7TH AVE, SUITE 1703 NEW YORK, NY 10001	01-0939141	501 (C) (3)	30,000.			, <u></u>	SUPPORT
(6) ROANOKE COLLEGE	_						
221 COLLEGE LANE SALEM, VA 24153	54-0505945	501 (C) (3)	20,000.				SUPPORT
(7) ROCKEFELLER BROTHERS FUND, INC.	_]						
437 MADISON AVE 37TH FLOOR	13-1760106	501 (C) (3)	6,500.				SUPPORT
(8) ROCKEFELLER FAMILY FUND, INC.	_						
475 RIVERSIDE DR. NEW YORK, NY 10115	13-6257658	501 (C) (3)	75,500.				SUPPORT
(9) ROOSEVELT ROW COMMUNITY DEVELOPMENT CORP							
C/O GREG ESSER PHOENIX, AZ 85004	20-5937475	501 (C) (3)	90,000.				SUPPORT
(10) ROSE KENNEDY GREENWAY CONSERVANCY							
185 KNEELAND ST. BOSTON, MA 02111	20-1678932	501 (C) (3)	250,000.				SUPPORT
(11) RUDOLF STEINER FDN, INC.							
RSF SOCIAL FINANCE SAN FRANCISCO, CA 94129	13-6082763	501 (C) (3)	10,000.	_			SUPPORT
(12) RURAL CHINA EDUCATION FDN							
PO BOX 92424 ROCHESTER, NY 14692-0424	20-2753350	501 (C) (3)	61,032.				SUPPORT
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 t	able			
3 Enter total number of other organizations I						<u></u> . >	
For Paperwork Reduction Act Notice, see the Instruct							nedule I (Form 990) (2014)

Department of the Treasury

Internal Revenue Service
Name of the organization

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.

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2014

OMB No 1545-0047

Open to Public Inspection

Employer identification number

OCKEFELLER PHILANTHROPY ADVISORS, INC.						13-3615533		
Part I General Information on Grants and	d Assistanc	e	•			· · · · · · · · · · · · · · · · · · ·		
1 Does the organization maintain records to su	ıbstantıate th	e amount of the	e grants or assistai	nce, the grantees	' eligibility for the gran	ts or assistance, and		
the selection criteria used to award the grant	s or assistand	e?					X Yes No	
2 Describe in Part IV the organization's proced								
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) RUSH UNI. MEDICAL CENTER	_							
COLLEGE OF NURSING CHICAGO, IL 60612	36-2174823	501 (C) (3)	36,778.				SUPPORT	
(2) RUTGERS UNI. FDN								
7 COLLEGE AVE NEW BRUNSWICK, NJ 08901	23-7318742	501 (C) (3)	20,000.				SUPPORT	
(3) SAILORS FOR THE SEA								
449 THAMES ST., 300D NEWPORT, RI 02840	51-0506943	501 (C) (3)	79,500.				SUPPORT	
(4) SALT LAKE EDUCATION FON								
440 EAST 100 SOUTH SALT LAKE CITY, UT 84111	74-2563849	501 (C) (3)	70,000				SUPPORT	
(5) SANTA ANA COLLEGE FDN								
1530 WEST 17TH ST. SANTA ANA, CA 92706	95-6209198	501 (C) (3)	75,000	_			SUPPORT	
(6) SANTA CRUZ MUSEUM OF ART & HISTORY								
705 FRONT ST SANTA CRUZ, CA 95060	94-2718861	501 (C) (3)	250,000.				SUPPORT	
(7) SANTO DOMINGO TRIBE								
PO BOX 10 SANTO DOMINGO PUEBLO, NM 87505	85-0443030	501 (C) (3)	478,500.				SUPPORT	
(8) SARGASSO SEA PROJECT, INC.								
1630 CONNECTICUT AVE WASHINGTON, DC 20009	27-3229137	501 (C) (3)	100,000.				SUPPORT	
(9) SC COASTAL CONSERVATION LEAGUE]							
P.O. BOX 1765 CHARLESTON, SC 29042-9940	57-0887278	501 (C) (3)	12,500.				SUPPORT	
(10) SEBASTIAN FERRERO FDN, INC.								
105 SW 128TH ST., SUITE 200 TIOGA, FL 32669	26-1200788	501(C)(3)	6,000.				SUPPORT	
(11) SHARED INTEREST, INC.						-		
121 WEST 27TH ST STE 905 NEW YORK, NY 10001	13-3836581	501 (C) (3)	8,000.				SUPPORT	
(12) SHORE LINE TROLLEY MUSEUM								
17 RIVER ST. EAST HAVEN, CT 06512	06-6088826	501 (C) (3)	20,000.				SUPPORT	
2 Enter total number of section 501(c)(3) and	governmen	t organizations	listed in the line 1 to	able	<u>, </u>	>		
3 Enter total number of other organizations li	-	-			<i></i>			

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

Department of the Treasury

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Internal Revenue Service

Name of the organization

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.

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OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

13-3615533

Part I General Information on Grants and	l Assistanc	е					· · ·
1 Does the organization maintain records to su	bstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the grants	s or assistand	:e?					X Yes No
2 Describe in Part IV the organization's proced							_
Part II Grants and Other Assistance to De	omestic Or	ganizations ar	nd Domestic Gov	rernments. Com	plete if the organiz	ation answered "Y	es" to Form 990,
Part IV, line 21, for any recipient th	at received	more than \$5	,000. Part II can b	pe duplicated if a	additional space is r	needed.	
	_	T	T		(f) Method of valuation	T	1
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SOCY FOR PREV. OF CRUELTY TO ANIMALS							
590 NORTH STATE RD BRIARCLIFF, NY 10510	131740069	501 (C) (3)	15,500.				SUPPORT
(2) SOMERVILLE ARTS COUNCIL							
50 EVERGREEN AVE. SOMERVILLE, MA 02145	04-6001414	501 (C) (3)	415,000.				SUPPORT
(3) SOUTHWEST FLORIDA COMM. FDN							
8771 COLLEGE PKWY #201 FORT MYERS, FL 33919	59-6580974	501 (C) (3)	70,000.				SUPPORT
(4) SPACE ON RYDER FARM							
155 NEWEL ST., #2B BROOKLYN, NY 11222	27-2886262	501 (C) (3)	10,000.				SUPPORT
(5) SPELMAN COLLEGE							
350 SPELMAN LANE ATLANTA, GA 30314-4399	58-0566243	501 (C) (3)	10,000.		=		SUPPORT
(6) SPONSORS FOR ED OPPORTUNITY INC							
55 EXCHANGE PLACE NEW YORK, NY 10005	132578670	501 (C) (3)	50,000				SUPPORT
(7) SPRINGBOARD FOR THE ARTS							
308 PRINCE ST ST PAUL, MN 55101	41-1690483	501 (C) (3)	100,000				SUPPORT
(8) ST. CHRISTOPHER'S INN INC.							
21 FANCISCAN WAY GARRISON, NY 10524	13-3668321	501 (C) (3)	25,000.				SUPPORT
(9) ST. LUKE'S EPISCOPAL HOSPITAL]						
834 FIFTH AVE NEW YORK, NY 10022	74-1161938	501 (C) (3)	36,778.				SUPPORT
(10) ST. VINCENT HOSPITAL FDN							
8333 NAAB RD INDIANAPOLIS, IN 46260	35-6088862	501 (C) (3)	36,778.				SUPPORT
(11) STAND FOR CHILDREN							
1732 NW QUIMBY ST. PORTLAND, OR 97209	52-1957214	501(C)(3)	125,000.				SUPPORT
(12) STANFORD UNI.							
350 SERRA MALL STANFORD, CA 94305-9510	94-6174066		7,000.				SUPPORT
2 Enter total number of section 501(c)(3) and	governmen	t organizations	listed in the line 1 t	able			
3 Enter total number of other organizations li							
For Paperwork Reduction Act Notice, see the Instruction						·· ···	edule I (Form 990) (2014)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

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ROCKEFELLER PHILANTHROPY ADVISORS	PHILANTHROPY ADVISORS, INC.						13-3615533		
Part I General Information on Grants an	d Assistanc	е							
Does the organization maintain records to sight the selection criteria used to award the grant of the selection criteria used to award the grant of the selection criteria used to award the grant of the selection criteria.	ts or assistand	e?					X Yes No		
Describe in Part IV the organization's proced									
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
(1) STATE OF COLORADO DEPT OF HIGHER ED	1								
1560 BRDWAY, SUITE 1600 DENVER, CO 80202	84-0644739	501 (C) (3)	258,699.				SUPPORT		
(2) STATE VOICES									
500 GRISWOLD ST. DETROIT, MI 48226	20-1115618	501 (C) (3)	100,000.				SUPPORT		
(3) STONE BARNS CENTER FOR FOOD AND AGRI.					=				
630 BEDFORD RD POCANTICO HILLS, NY 10591	13-4150082	501 (C) (3)	96,000.				SUPPORT		
(4) STONY BROOK FDN, INC.									
230 ADMIN STONY BROOK, NY 11794-1188	11-6077945	501 (C) (3)	36,778.				SUPPORT		
(5) STONY HILL STABLES FDN									
P.O. BOX 283 AMAGANSETT, NY 11930	45-5444990	501 (C) (3)	25,000.				SUPPORT		
(6) SUMMIT EDUCATION INITIATIVE									
39 E. MARKET ST, AKRON, OH 44308	34-1843220	501 (C) (3)	70,000.				SUPPORT		
(7) SWAN'S ISLAND EDUCATIONAL SOCIETY									
451 ATLANTIC RD SWAN'S ISLAND, ME 04685	01-0317540	501 (C) (3)	10,000.				SUPPORT		
(8) SYRACUSE UNI.	_								
113 BROWNE HALL SYRACUSE, NY 13244	15-0532081	501 (C) (3)	175,000.				SUPPORT		
(9) TAIA PEACE FON	_j								
45 MAIN ST., SUITE 1008 BROOKLYN, NY 11201	20-8261600	501 (C) (3)	12,626.		2002		SUPPORT		
(10) TEACHERS COLLEGE	_	ŀ							
COLUMBIA UNIVERSITY NEW YORK, NY 10027	13-1624202	501 (C) (3)	6,000.				SUPPORT		
(11) TENNESSEE HIGHER EDUCATION COMMISSION	_								
404 JAMES ROBERTSON PKWY	10-4800173	501 (C) (3)	180,000.	···			SUPPORT		
(12) TETON REGIONAL LAND TRUST, INC.	_								
P.O. BOX 247 DRIGGS, ID 83422	94-3146525		10,000.				SUPPORT		
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 to	able					
3 Enter total number of other organizations I	isted in the lir	ne 1 table			<u> </u>	<u></u> . >			

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

Schedule I (Form 990) (2014)

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Department of the Treasury

Internal Revenue Service

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.

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

► Attach to Form 990.

Name of the organization

OMB No 1545-0047

Open to Public Inspection

Employer Identification number

13-3615533

ROCKEFELLER PHILANTHROPY ADVISORS	EFELLER PHILANTHROPY ADVISORS, INC.						3
Part I General Information on Grants and	d Assistanc	e				· · · · · · · · · · · · · · · · · · ·	
1 Does the organization maintain records to su	ıbstantiate th	e amount of the	grants or assistai	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant							X Yes No
2 Describe in Part IV the organization's proced							
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the	omestic Or nat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	ernments. Com be duplicated if a	plete if the organized	zation answered "Y needed.	es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TEXAS A & M UNI.							
3578 TAMU COLLEGE STATION, TX 77843-3578	74-2648747	501 (C) (3)	25,000.	_		l	SUPPORT
(2) THE AFRICA-AMERICA INSTITUTE							
420 LEXINGTON AVE , SUITE 1706	53-0218859	501 (C) (3)	8,000.				SUPPORT
(3) THE AMERICAN IDEAS INSTITUTE							
910 17TH STREET WASHINGTON, DC 20006-2628	27-0311492	501 (C) (3)	14,000.				SUPPORT
(4) THE ASIA SOCIETY							
725 PARK AVE NEW YORK, NY 10021	13-3234632	501 (C) (3)	29,500.				SUPPORT
(5) THE BALLOT INITIATIVE STRATEGY CENTER							
1815 ADAMS MILL RD WASHINGTON, DC 20009	04-3411708	501 (C) (4)	20,000				SUPPORT
(6) THE BARTER FON	_						
PO BOX 867 ABINGDON, VA 24212	54-6000120	501 (C) (3)	160,000				SUPPORT
(7) THE BHUTAN FON							
3121 SOUTH ST , N.W. WASHINGTON, DC 20007	13-3376290	501 (C) (3)	6,000				SUPPORT
(8) THE BOSTON FDN, INC							
75 ARLINGTON ST. BOSTON, MA 2116, MA 02116	04-2104021	501 (C) (3)	175,000.				SUPPORT
(9) THE BREARLEY SCHOOL	_						
610 EAST 83RD ST. NEW YORK, NY 10028-7988	13-1623915	501 (C) (3)	10,000				SUPPORT
(10) THE BRIDGE FUND							
MCQUADE BRENNAN LLP WASHINGTON, DC 20036	91-2144422	501 (C) (3)	845,117.				SUPPORT
(11) THE BUCKLEY SCHOOL	_		1				
113 EAST 73RD ST. NEW YORK, NY 10021	13-1837409	501 (C) (3)	7,500.				SUPPORT
(12) THE CANTATA SINGERS, INC.							
729 BOYLSTON ST. BOSTON, MA 02116	04-6138594	501 (C) (3)	30,000	<u> </u>			SUPPORT
2 Enter total number of section 501(c)(3) and	_	-			. 		
3 Enter total number of other organizations li	sted in the lii	ne 1 table					

For Paperwork Reduction Act Notice, see the Instructions for 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.

► Attach to Form 990.

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

2014

OMB No 1545-0047

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service

Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS	S, INC.					13-3615533	3
Part I General information on Grants an	d Assistanc	е					
1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assistai	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant							X Yes No
2 Describe in Part IV the organization's proceed	dures for mor	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to D	omestic Or	ganizations a	nd Domestic Gov	ernments. Com	plete if the organiz	ration answered "Y	es" to Form 990
Part IV, line 21, for any recipient to							00 10 1 01111 000,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE CENTER FOR REPRODUCTIVE RIGHTS							
120 WALL ST. NEW YORK, NY 10005	13-3669731	501 (C) (3)	150,000.				SUPPORT
(2) THE CLEVELAND FDN							
1422 EUCLID AVE CLEVELAND, OH 44115-2001	34-0714588	501 (C) (3)	70,000.				SUPPORT
(3) THE COMMUNITY FDN OF LOUISVILLE, INC.							
325 W MAIN ST. LOUISVILLE, KY 40202	31-0997017	501 (C) (3)	75,000.				SUPPORT
(4) THE CORNERSTONE SCHOOL, INC.							
2313 S. E. LAKE WEIR AVE OCALA, FL 34471	59-2217451	501 (C) (3)	20,000.				SUPPORT
(5) THE CORPORATION OF MERCER UNI.							
1400 COLEMAN AVE MACON, GA 31207	58-0566167	501 (C) (3)	125,000.				SUPPORT
(6) THE ENGLISH CONCERT IN AMERICA, INC.							
207 DEPEW ST. DUMONT, NJ 07628	26-4409640	501 (C) (3)	24,000.				SUPPORT
(7) THE FDN CENTER							
79 FIFTH AVE NEW YORK, NY 10003	13-1837418	501 (C) (3)	203,000.				SUPPORT
(8) THE FINANCIAL CLINIC							
115 WEST 30TH ST. NEW YORK, NY 10001	76-0833915	501 (C) (3)	30,000.				SUPPORT
(9) THE FORTUNE SOCIETY							
29-76 NORTHERN BOULEVARD	13-2645436	501 (C) (3)	25,000				SUPPORT
(10) THE IMPACT SOCIETY							
370 LEXINGTON AVE, SUITE 1740	46-4657948	501 (C) (3)	15,000				SUPPORT
(11) THE MANKIND PROJECT, INC.					-		
C/O SCOTT MCGREGOR SANTA BARBARA, CA 93109	36-3712913	501 (C) (3)	19,000				SUPPORT
(12) THE MILKEN INSTITUTE							
1101 NEW YORK AVE WASHINGTON, DC 20005	95-4240775		9,000.				SUPPORT
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 to	able		▶	
3 Enter total number of other organizations l	isted in the lir	ne 1 table	<u> </u>			<u></u> ▶	

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

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

2014

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer Identification number

ROCKEFELLER PHILANTHROPY ADVISORS	ROCKEFELLER PHILANTHROPY ADVISORS, INC.						13-3615533		
Part I General Information on Grants and	d Assistanc	e							
1 Does the organization maintain records to si	ubstantiate th	ne amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and			
the selection criteria used to award the grant							X Yes No		
2 Describe in Part IV the organization's proced	dures for moi	nitoring the use	of grant funds in the	United States.					
Part II Grants and Other Assistance to D	omestic Or	ganizations a	nd Domestic Gov	rernments. Com	plete if the organiz	ation answered "Y	es" to Form 990,		
Part IV, line 21, for any recipient the	nat received	more than \$5	,000. Part II can t	be duplicated if a	additional space is	needed.			
(a) Name and address of organization or government	(b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
(1) THE MOUNTAIN SCHOOL									
151 MOUNTAIN RD VERSHIRE, VT 05079	68-0480736	501 (C) (3)	10,000.				SUPPORT		
(2) THE MUSEUM OF MODERN ART									
11 WEST 53RD ST. NEW YORK, NY 10019	13-1624100	501 (C) (3)	100,000.				SUPPORT		
(3) THE NASHVILLE CHAMBER PUBLIC BENEFIT FON									
211 COMMERCE ST STE 100 NASHVILLE, TN 37201	62-1413808	501 (C) (3)	70,000.				SUPPORT		
(4) THE NATURE CONSERVANCY				,					
4245 N FAIRFAX DR ARLINGTON, VA 22203-1637	53-0242652	501 (C) (3)	487,500.				SUPPORT		
(5) THE NORMAN MAILER WRITERS COLONY, INC.			-						
1841 BRDWAY, SUITE 812 NEW YORK, NY 10023	26-2764387	501 (C) (3)	8,000.				SUPPORT		
(6) THE NORTHERN FOREST CENTER, INC.									
PO BOX 210 CONCORD, NH 03302-0210	22-3458955	501 (C) (3)	10,000.			_	SUPPORT		
(7) THE NOYES MUSEUM OF ART									
733 LILY LAKE RD OCEANVILLE, NJ 08231	22-2858713	501 (C) (3)	150,000.				SUPPORT		
(8) THE OHIO STATE UNI. WEXNER MEDICAL CENTER									
376 W. 10TH AVENUE COLUMBUS, OH 43210	31-1145986	501 (C) (3)	73,556				SUPPORT		
(9) THE OLANA PARTNERSHIP		·							
P.O. BOX 199 HUDSON, NY 12534	14-1828430	501 (C) (3)	7,500.				SUPPORT		
(10) THE PARRISH ART MUSEUM					,				
279 MONTAUK HIGHWAY WATERMILL, NY 11976	11-1782495	501 (C) (3)	25,000.				SUPPORT		
(11) THE PARTNERSHIP FOR THE HOMELESS					"				
305 SEVENTH AVE NEW YORK, NY 10001-6008	13-3732698	501 (C) (3)	35,000				SUPPORT		
(12) THE PEW CHARITABLE TRUSTS									
2005 MARKET ST PHILADELPHIA, PA 19103	56-2307147	501 (C) (3)	1,083,000				SUPPORT		
2 Enter total number of section 501(c)(3) and									
3 Enter total number of other organizations li	sted in the lir	ne 1 table <u></u> .	<u> </u>	<u> </u>	<u> </u>	<u> </u>			
For Paperwork Reduction Act Notice, see the Instructi							adula I (Form 990) (2014		

Department of the Treasury

Internal Revenue Service

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.

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OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization						Employer Identificat	ion number
ROCKEFELLER PHILANTHROPY ADVISORS	S, INC.					13-3615533	3
Part I General Information on Grants an	d Assistanc	е				<u></u>	
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proces 	ts or assistand	ce?					X Yes N
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient t	omestic Or hat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can t	rernments. Compe duplicated if	nplete if the organiz additional space is i	ation answered "Y needed.	es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE PITTSBURGH FDN							
FIVE PPG PLACE PITTSBURGH, PA 15222	25-0965466	501 (C) (3)	75,000				SUPPORT
(2) THE REGENTS OF THE UNI. OF CALIFORNIA							
300 LAKESIDE DRIVE	94-6036494	501 (C) (3)	222,278.				SUPPORT
(3) THE SAPLING FDN							
C/O TED NEW YORK, NY 10013	94-3235545	501 (C) (3)	14,500.				SUPPORT
(4) THE SYNERGOS INSTITUTE, INC.							
3 EAST 54TH ST. NEW YORK, NY 10022	13-3392006	501 (C) (3)	267,000.				SUPPORT
(5) THE TIDES CENTER							
1014 TORNEY AVE SAN FRANCISCC, CA 94129	94-3213100	501 (C) (3)	76,536.				SUPPORT
(6) THE TIDES CENTER/NLARP				 :			
1203 PRES. PK WAY OAKLAND, CA 94612	51-0198509	501 (C) (3)	10,000.				SUPPORT
(7) THE TRUSTEES OF COLUMBIA UNI							
617 WEST 168TH ST. NEW YORK, NY 10032	13-5598093	501 (C) (3)	73,556.				SUPPORT
(8) THE TRUSTEES OF LELAND STANFORD JUNIOR UNI							
655 KNIGHT WAY STANFORD, CA 94305	94-1156365	501 (C) (3)	1,094,000.				SUPPORT
(9) THE UNI AT ALBANY FDN							
UAB 209 ALBANY, NY 12222	141503972	501 (C) (3)	22,500.				SUPPORT
(10) THE UNI. OF ARKANSAS FDN, INC.							
4301 W. MARKHAM ST. LITTLE ROCK, AR 72205	71-6056774	501 (C) (3)	36,778				SUPPORT
(11) THE UNI. OF CHICAGO							
301 E. GARFIELD BLVD CHICAGO, IL 60637	36-2177139	501 (C) (3)	236,778.				SUPPORT
(12) THE UNI. OF DAYTON							
300 COLLEGE PARK DAYTON, OH 45469	31-0536715	501 (C) (3)	75,000.				SUPPORT
2 Enter total number of section 501(c)(3) an							
3 Enter total number of other organizations I	isted in the lii	ne 1 table					-

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

Name of the organization

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.

Department of the Treasury Internal Revenue Service

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

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

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2014

OMB No 1545-0047

Open to Public Inspection Employer Identification number

13-3615533

Part I General Information on Grants and	d Assistanc	е					
1 Does the organization maintain records to si	ubstantiate th	ne amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant						. .	X Yes No
2 Describe in Part IV the organization's proceed	dures for mor	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE UNI. OF TEXAS MEDICAL BRANCH							
301 UNI. BLVD GALVESTON, TX 77555	76-0682238	501 (C) (3)	36,778.				SUPPORT
(2) THE URBAN INSTITUTE					·		
2100 M ST NW WASHINGTON, DC 20037	52-0880375	501 (C) (3)	164,000.				SUPPORT
(3) THE VILLAGE OF ARTS AND HUMANITES							
2544 GERMANTOWN AVE PHILADELPHIA, PA 19133	22-3045318	501 (C) (3)	280,000.				SUPPORT
(4) TOWN OF GREENBURGH							
177 HILLSIDE AVE GREENBURGH, NY 10607	13-6198294	501 (C) (3)	10,000.				SUPPORT
(5) TRAINING RESOURCES FOR THE ENVIRON COMM.							
600 AGUA FRIA ST. SANTA FE, NM 87501	91-1919141	501 (C) (3)	471,240				SUPPORT
(6) TRINITY LUTHERAN CHURCH	_						
164 WEST 100TH ST. NEW YORK, NY 10025	13-3342240	501 (C) (3)	20,000.				SUPPORT
(7) TROUT UNLIMITED	_						
NATIONAL OFFICE ARLINGTON, VA 22209-2404	38-1612715	501 (C) (3)	10,000.				SUPPORT
(8) TRUSTEES OF TUFTS COLLEGE	_						
44 TEELE AVENUE SOMERVILLE, MA 02144	04-2103634	501 (C) (3)	17,500.				SUPPORT
(9) TUFTS MEDICAL CENTER	_						
800 WASHINGTON ST BOSTON, MA 02111	04-3400617	501 (C) (3)	71,778.				SUPPORT
(10) UNI ENTERPRISES, INC.							
6000 J ST. SACRAMENTO, CA 95819-6111	94-1337638	501 (C) (3)	200,000.				SUPPORT
(11) UNI. HOSPITALS OF CLEVELAND	_						
11100 EUCLID AVE CLEVELAND, OH 44106	34-6512673	501 (C) (3)	36,778.				SUPPORT
(12) UNI. OF ALABAMA AT BIRMINGHAM	╛						
1900 UNIVERSITY BOULEVARD	63-6005396	501 (C) (3)	36,778.				SUPPORT
2 Enter total number of section 501(c)(3) and	d governmen	it organizations	listed in the line 1 t	able		·	
3 Enter total number of other organizations I	isted in the li	ne 1 table					

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.

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OMB No 1545-0047 20**14**

Open to Public Inspection

Department of the Treasury Internal Revenue Service
Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Employer identification number 13-3615533

Part I General Information on Grants and	d Assistanc	e					
1 Does the organization maintain records to su	ibstantiate th	e amount of the	e grants or assistai	nce, the grantees	' eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant	s or assistand	e?					X Yes No
2 Describe in Part IV the organization's proced							
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) UNI. OF CALIFORNIA SAN FRANCISCO FDN							
220 MONTGOMERY STREET	94-2829914	501 (C) (3)	25,000.				SUPPORT
(2) UNI. OF CALIFORNIA, SAN DIEGO							
9500 GILMAN DRIVE LA JOLLA, CA 92093	95-6006144	501 (C) (3)	36,778.		:		SUPPORT
(3) UNI. OF CINCINNATI							
231 ALBERT SABIN WAY CINCINNATI, OH 45267	31-0896555	501 (C) (3)	36,778.				SUPPORT
(4) UNI. OF FLORIDA							
1600 SW ARCHER ROAD GAINESVILLE, FL 32610	59-0974739	501 (C) (3)	73,556.				SUPPORT
(5) UNI. OF HAWAII FDN							
MS. MARY BOLAND HONOLULU, HI 96822	99-0085260	501 (C) (3)	206,200.				SUPPORT
(6) UNI. OF KENTUCKY GILL HEART INSTITUTE	j						
900 S. LIMESTONE ST. LEXINGTON, KY 40536	61-6033693	501 (C) (3)	36,778.				SUPPORT
(7) UNI. OF LOUISVILLE RESEARCH FDN							
300 EAST MARKET ST. LOUISVILLE, KY 40202	61-1029626	501 (C) (3)	36,778.				SUPPORT
(8) UNI. OF MAINE SYSTEM	1						
16 CENTRAL ST. BANGOR, ME 04401	01-6000769	501 (C) (3)	12,000.				SUPPORT
(9) UNI OF MINNESOTA FDN							
200 OAK STREET SE, SUITE 500	41-6042488	501 (C) (3)	20,000.		·		SUPPORT
(10) UNI. OF PENNSYLVANIA							
3451 WALNUT ST. PHILADELPHIA, PA 19104-6205	23-1352685	501 (C) (3)	25,000.				SUPPORT
(11) UNI. OF PITTSBURGH PHYSICIANS							
3600 FORBES AVE. PITTSBURGH, PA 15213	23-2919472	501 (C) (3)	36,778.				SUPPORT
(12) UNI. OF ROCHESTER MEDICAL CENTER							
300 EAST RIVER ROAD ROCHESTER, NY 14627	16-0743209	501 (C) (3)	20,000				SUPPORT
2 Enter total number of section 501(c)(3) and	governmen	t organizations	listed in the line 1 to	able			
3 Enter total number of other organizations li						<u></u> . ▶	

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

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

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number ROCKEFELLER PHILANTHROPY ADVISORS, INC. 13-3615533 General Information on Grants and Assistance 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? X Yes No 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.

12 501 (C) (3) 94 501 (C) (3)	20,000.				
)4 501(C)(3)	46,778.			1	SUPPORT
94 501(C)(3)	46.778.	1	I		
	, , , ,		1		SUPPORT
1					
03 501 (C) (3)	36,778.				SUPPORT
25 501 (C) (3)	73,556.				SUPPORT
93 501(C)(3)	20,000				SUPPORT
38 501(C)(3)	175,000.				SUPPORT
34 501 (C) (3)	22,500.				SUPPORT
		, =	·		
31 501 (C) (3)	75,000.				SUPPORT
			17.00		
28 501 (C) (3)	70,000.	i			SUPPORT
58 501 (C) (3)	70,000.	1			SUPPORT
30 501 (C) (3)	70,000	l l	,		SUPPORT
, - / , (- /	, 0,000.	1			I
	,,,,,,,,				
3 2 5	34 501 (C) (3) 81 501 (C) (3) 28 501 (C) (3) 58 501 (C) (3)	34 501 (C) (3) 22,500. 81 501 (C) (3) 75,000. 28 501 (C) (3) 70,000. 58 501 (C) (3) 70,000.	34 501(C)(3) 22,500. 81 501(C)(3) 75,000. 28 501(C)(3) 70,000. 58 501(C)(3) 70,000.	34 501 (C) (3) 22,500. 81 501 (C) (3) 75,000. 28 501 (C) (3) 70,000. 58 501 (C) (3) 70,000.	34 501 (C) (3) 22,500. 81 501 (C) (3) 75,000. 28 501 (C) (3) 70,000.

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

Enter total number of other organizations listed in the line 1 table

Name of the organization

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.

Department of the Treasury
Internal Revenue Service

Information about Sch

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

13-3615533

Part I General Information on Grants and							
 Does the organization maintain records to su 			e grants or assistai	nce, the grantees	' eligibility for the grant	s or assistance, and	
the selection criteria used to award the grant							X Yes No
2 Describe in Part IV the organization's proceed	lures for mor	nitoring the use	of grant funds in the	United States.			
Part IV, line 21, for any recipient the	omestic Or nat received	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can b	ernments. Com be duplicated if a	plete if the organiz additional space is i	ation answered "Y needed.	es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) VALLEY OF THE SUN UNITED WAY - PHOENIX							
1515 E OSBORN RD, PHOENIX, AZ 85014	86-0104419	501 (C) (3)	70,000.				SUPPORT
(2) VANDERBILT UNIVERSITY		-					
401 21ST AVE SOUTH NASHVILLE, TN 37203	62-0476822	501 (C) (3)	36,778.				SUPPORT
(3) VERMONT STUDIO CENTER, INC.							
P.O. BOX 613 JOHNSON, VT 05656	22-2478074	501 (C) (3)	25,000.				SUPPORT
(4) VILLAGE ENTERPRISE FUND							
751 LAUREL ST. SAN CARLOS, CA 94070	22-2852248	501 (C) (3)	20,000.				SUPPORT
(5) VILLAGE HEALTH WORKS]						
45 WEST 36TH ST. NEW YORK, NY 10018	45-0545435	501 (C) (3)	20,000.				SUPPORT
(6) VIRGINIA ARTS FESTIVAL	}						
440 BANK ST. NORFOLK, VA 23510-1295	54-1786140	501 (C) (3)	160,000.				SUPPORT
(7) VIRGINIA COMMONWEALTH UNI. FDN	}						
700 W GRACE ST. RICHMOND, VA 23284	54-0757884	501 (C) (3)	20,000.				SUPPORT
(8) VISITING NURSE SERVICES OF NEW YORK]						
5 PENN PLAZA NEW YORK, NY 10001	13-3189926	501 (C) (3)	22,500.				SUPPORT
(9) VITAL VOICES GLOBAL PARTNERSHIP]						
1625 MASSACHUSETTS AVE WASHINGTON, DC 20036	52-2151557	501 (C) (3)	10,000.				SUPPORT
(10) VOICE OF CALVARY]						
1655 ST CHARLES ST. JACKSON, MS 39209	64-0564343	501 (C) (3)	75,000.				SUPPORT
(11) VOLUNTEERS IN ASIA							
STANFORD UNIVERSITY STANFORD, CA 94309	94-1622372	501(C)(3)	65,000.				SUPPORT
(12) W.E. UPJOHN UNEMPLOYMENT TRUSTEE CORP							
300 S WESTNEDGE AVE KALAMAZOO, MI 49007	38-1360419		175,000.				SUPPORT
2 Enter total number of section 501(c)(3) and	governmen	t organizations	listed in the line 1 t	able		→	
3 Enter total number of other organizations li	sted in the lir	ne 1 table			<u> </u>	<u></u> ▶	
For Paperwork Reduction Act Notice, see the Instructi	ons for Form 9	90.				Sct	nedule i (Form 990) (2014)

JSA

4E1288 1 000 8685FS 700J

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.

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

2014

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS	S, INC.					13-361553	3
Part I General Information on Grants an	d Assistanc	е					
1 Does the organization maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the gran	ts or assistance, and	
the selection criteria used to award the grant	ts or assistand	e?					X Yes No
2 Describe in Part IV the organization's proced	dures for mor	nitoring the use	of grant funds in the	United States.			
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient to							es" to Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WAKE FOREST UNI. HEALTH SCIENCES							
CARDIOLOGY WINSTON-SALEM, NC 27157	22-3849199	501 (C) (3)	36,778.				SUPPORT
(2) WARREN CITY SCHOOLS							
105 HIGH ST. WARREN, OH 44481	34-6002975	501 (C) (3)	50,000.				SUPPORT
(3) WASH. ST. BOARD FOR COMM. & TECH COLLEGES							,
1300 QUINCE ST. SE OLYMPIA, WA 98504-2495	91-0823768	501 (C) (3)	240,000.				SUPPORT
(4) WASHINGTON OFFICE ON LATIN AMERICA, INC.							
1666 CONNECTICUT AVE WASHINGTON, DC 20009	52-1249353	501 (C) (3)	30,000.				SUPPORT
(5) WASHINGTON PROGRESS ALLIANCE							
1402 3RD AVE, SUITE 201 SEATTLE, WA 98101	20-4258530	501 (C) (4)	10,000.				SUPPORT
(6) WASHINGTON STATE UNI. FDN	_						
16650 STATE RT MOUNT VERNON, WA 98273	91-1075542	501 (C) (3)	15,000.				SUPPORT
(7) WASHINGTON UNI. SCHOOL OF MEDICINE							
660 SOUTH EUCLID AVE ST. LOUIS, MO 63110	43-0653611	501 (C) (3)	25,000.				SUPPORT
(8) WAYNFLETE SCHOOL	_j						
360 SPRING ST. PORTLAND, ME 04102	01-0211565	501 (C) (3)	20,000.				SUPPORT
(9) WE ARE FAMILY FON							
P.O. BOX 1352 NEW YORK, NY 10018	27-0010229	501 (C) (3)	11,000.				SUPPORT
(10) WEILL CORNELL MEDICAL COLLEGE							
CARDIOLOGY NEW YORK, NY 10065	15-0532082	501 (C) (3)	36,778.				SUPPORT
(11) WENDELL GILLEY MUSEUM OF BIRD CARVING							
4 HERRICK RD SOUTHWEST HARBOR, ME 04679	01-0368574	501 (C) (3)	15,500.				SUPPORT
(12) WESTERN ORGANIZATION OF RESOURCE COUNCILS							
220 SOUTH 27TH ST. BILLLINGS, MT 59101	45-035-6819	501 (C) (4)	15,000.				SUPPORT
2 Enter total number of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able		>	
3 Enter total number of other organizations	listed in the lii	ne 1 table	<u> </u>	<u></u>		>	
For Paperwork Reduction Act Notice, see the Instruct	ions for Form 9	90.				Sci	hedule I (Form 990) (2014)

JSA

4E1288 1 000 8685FS 700J

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.

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

2014

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Employer identification number

13-3615533

Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the							es" to Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WGBH EDUCATIONAL FDN							
PO BOX 55875 BOSTON, MA 02205-5875	04-2104397	501 (C) (3)	5,500.				SUPPORT
(2) WILDFLOWERS INSTITUTE							
1144 PACIFIC AVE SAN FRANCISCO, CA 94133	94-2581329	501 (C) (3)	180,000.				SUPPORT
(3) WILLIAM BEAUMONT HOSPITAL							
3601 W. 13 MILE RD ROYAL OAK, MI 48073	38-1459362	501 (C) (3)	36,778.				SUPPORT
(4) WOMEN FOR WOMEN INTERNATIONAL]						
1850 M ST NW STE 1090 WASHINGTON, DC 20036	52-1838756	501 (C) (3)	10,000.				SUPPORT
(5) WOMEN'S HOUSING AND ECONOMIC DEV. CORP	1						
20 EAST 168TH ST, 10TH FLOOR	11-3099604	501 (C) (3)	400,000.				SUPPORT
(6) WORKING AMERICA EDUCATION FUND	<u>]</u>						
815 16TH ST., N.W. WASHINGTON, DC 20006	20-2035052	501 (C) (3)	25,000.				SUPPORT
(7) WORLD WILDLIFE FUND, INC.							
WORLD WILDLIFE FUND ON BEHALF OF THE INT. E	52-1693387	501 (C) (3)	508,000.				SUPPORT
(8) WORLDWIDE FISTULA FUND							
1100 EAST WOODFIELD RD, SUITE 350	30-0139210	501 (C) (3)	15,000.				SUPPORT
(9) YALE UNI.							
PO BOX 402A YALE STATION	06-0646973	501 (C) (3)	10,000				SUPPORT
(10) YOUNG ADULT DEVELOPMENT IN ACTION							
1217 SOUTH 4TH ST. LOUISVILLE, KY 40203	61-1374470	501 (C) (3)	250,000.				SUPPORT
(11) YOUNGSTOWN CITY SCHOOL DISTRICT]						
20 WEST WOOD ST. YOUNGSTOWN, OH 44501	34-6003190	501 (C) (3)	50,000.				SUPPORT
(12)							
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 to	able		<u> </u>	429

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

Schedule I (Form 990) (2014)

Part III	Grants and Other Assistance to Individ Part III can be duplicated if additional spa	States. Com	plete if the or	rganization answered	"Yes" on Form 990, Part IV,	line 22.
			T			

(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					
2					
3					
4			-		
5					
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2

ROCKEFELLER PHILANTHROPY ADVISORS INC. HAS A STRONG COMMITMENT TO

ACCOUNTABILITY AND SOUND GOVERNANCE, AS EXPRESSED IN ITS BY-LAWS AND

BOARD OF DIRECTORS POLICIES AND PROCEDURES. TO REDUCE THE LIKELIHOOD THAT

GRANTS RECOMMENDED OR ADMINISTERED BY ROCKEFELLER PHILANTHROPY ADVISORS,

INC., WILL BE DIVERTED FOR INAPPROPRIATE PURPOSES, THE ORGANIZATION HAS

ADOPTED GENERAL PRINCIPLES, PRACTICES, AND DUE DILIGENCE PROCEDURES THAT

INCLUDE COMPLIANCE WITH IRS GUIDELINES AND OTHER INDUSTRY BEST PRACTICES

AND MORE SPECIFICALLY INCLUDE THE FOLLOWING:

1. CHARITABLE PURPOSE AND INTENT

Schedule I (Form 990) (2014)

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on 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
3					
4		-			
5		- 1			
5					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

- 2.ANTI-TERRORISM SCREEN
- 3. VERIFICATION OF EXEMPT STATUS
- 4.RISK ASSESMENT AND IF NECESSARY MORE DETAILED REVIEW
- 5.WRITTEN AGREEMENTS
- 6.POST GRANT MONITORING FOR COMPLIANCE BASED ON INDIVIDUAL CIRCUMSTANCES

FOR BOTH PROGRAM AND FINANCIAL REPORTING.

ALL GRANTS ISSUED BY ROCKEFELLER PHILANTHROPY ADVISORS ARE GENERAL

SUPPORT GRANTS; TO THE EXTENT ANY ADDITIONAL INFORMATION IS REQUIRED

ABOUT A SPECIFIC GRANT, THAT INFORMATION IS AVAILABLE UPON REQUEST.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990
► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. 2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Employer identification number 13-3615533

Pari	Questions Regarding Compensation			
			Yes	No
1a	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	1b		ļ
2	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		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the	1,2	».	
	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	Ì	K	
	X Compensation committee Written employment contract		Í	V
	X Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4			. 29.1	*: 3
4	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	i	. st	1
а	Receive a severance payment or change-of-control payment?	4a	ataban tun	x
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	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.	*		
5	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			
а	The organization?	5a		Х
ь	Any related organization?	5b		Х
•	If "Yes" to line 5a or 5b, describe in Part III			
6	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:			
a h	The organization?	6a		X
b	Any related organization?	6b		├ ^-
7	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	Х	
8	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			
	ın Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	اما		

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

Schedule J (Form 990) 2014

Page 2

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

	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(ili) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	in column (B) reported as deferred in prior Form 990
MELISSA A. BERMAN (i	330,017.	30,000		23,400.	26,762.	410,179.	0
1 PRESIDENT AND CEO (iii		(0	2 626		
LUTHER M. RAGIN, JR. (i				22,500.	2,696.	273,775.	0
CHRIS B. PAGE	265,131.	37,147		23,340.	18,476.	344,094.	
WALTER SWEET		21,796.		17,904.	26,325.	237,313.	
4 VICE PRESIDENT&CORP SECRETARY (iii		(q			
YOLANDA A. ARIAS-BROWNE (i	´ 	17,006		15,546.	19,035.	204,921.	0
JEFFREY NESBIT	22-22	(19,225.	819.	247,950.	
6 EXEC. DIRECTOR, SPONSORED PROJ JANE M LEVIKOW		22,295.		15,041.	9,581.	205,324.	
JANE M LEVIKOW 7 VICE PRESIDENT (iii	′ 	22,295	<u> </u>	d 13,041.	9,561.	205,324.	
ANDREW GEORGE SALKIN (i				15,000.	1,559.	266,400.	
BRYNA ANNE LIPPER (1	221 122	(9,400.	9,233.	253,129.	
9 VP FOR RELATIONSHIP, SPONS. PROJ (ii		(9 0 605	0.406	212 500	_
JAMIE L. BENNETT 10 EXECUTIVE DIRECTOR (ARTPLACE) (iii				8,625.	8,486.	243,500.	
(i	<u>'</u>						
11 (11							
					-		
(1)							
13 (ji	- 1						
	i)						
15 (ii							
16 (1	1						

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014

Page 3

Part | Supplemental Information

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

PART I, LINE 7

RPA HAS A PERFORMANCE BASED INCENTIVE COMPENSATION PLAN. EMPLOYEES OF

RPA CAN EARN INCENTIVE COMPENSATION IF THEY MEET THE CRITERIA OUTLINED IN

THEIR WORK PLANS. THESE WORK PLANS ARE REVIEWED AND APPROVED BY EACH

EMPLOYEE'S RESPECTIVE SUPERIORS AND RPA'S CEO. CEO COMPENSATION IS

REVIEWED AND APPROVED BY THE BOARD.

Noncash Contributions

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30

► Attach to Form 990.

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

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

Employer identification number 13-3615533

Par	Types of Property	··					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of dete noncash contribution		
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household						
	goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	Х	27.	1,852,963.	FMV		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC,						
	or trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation		• • •				
	contribution - Historic						
	structures						
14	Qualified conservation						
	contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy [-		
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ▶()						
26	Other ►()	_					
27	Other ►()	•					
28	Other ►()						
29	Number of Forms 8283 received	by the org	anization during the tax ye	ear for contributions for			
	which the organization completed F				29		
						Yes	No
30a	During the year, did the organizati	on receive	by contribution any prope	rty reported in Part I, line:	s 1 through		
	28, that it must hold for at least the	ree years fr	om the date of the initial c	ontribution, and which is i	not required		
	to be used for exempt purposes for	the entire h	olding period?		30a	_	Х
b	If "Yes," describe the arrangement in	Part II					
31	Does the organization have a	gift accept	ance policy that require	s the review of any n	on-standard		
	contributions?			•	1	<u>x</u>	L
32a	Does the organization hire or use						
	contributions?	•	•			x	
b	If "Yes," describe in Part II.						
33	If the organization did not report an	amount in	column (c) for a type of pro	perty for which column (a)) is checked.		
	describe in Part II						L

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

Part II Cumple

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

PART I, LINE 31

CONTRIBUTIONS MUST BE ACCEPTABLE TO ROCKEFELLER PHILANTHROPY ADVISORS,
WHICH RESERVES THE RIGHT TO DECLINE ANY CONTRIBUTIONS, VERIFY THE SOURCE
OF ANY FUNDS, AND IN THE CASE OF NONMARKETABLE ASSETS REQUIRE AN
INDEPENDENT APPRAISAL OF VALUE.

PART I, LINE 32B

THE ORGANIZATION USES JP MORGAN CHASE TO RECEIVE AND SELL DONATED SECURITIES.

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Open to Public

Inspection

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Employer identification number

13-3615533

FORM 990, PART V, LINE 1(A)

IN CALENDAR YEAR 2014, ROCKEFELLER PHILANTHROPY ADVISORS ISSUED 165 1099S VIA ITS OWN EIN# (13-3615533). THE ORGANIZATION ALSO ISSUED 68 1099S THROUGH THE EIN# (46-4698925) OF ITS DISREGARDED ENTITY, ARTPLACE AMERICA LLC. ROCKEFELLER IS PROVIDING THIS INFORMATION IN THE INTERESTS OF FULL DISCLOSURE.

FORM 990, PART VI, SECTION A, LINE 2

KEVIN P.A. BRODERICK AND WENDY O'NEILL HAVE A FAMILY RELATIONSHIP.

MICHAEL ROCKEFELLER AND PETER ROCKEFELLER HAVE A FAMILY RELATIONSHIP.

PROCESS USED TO REVIEW FORM 990

PART VI, SECTION B - QUESTION 11B

RPA HIRES AN INDEPENDENT ACCOUNTING FIRM TO PREPARE AND REVIEW THE ORGANIZATION'S FORM 990 BASED ON INFORMATION PROVIDED BY RPA'S ACCOUNTING STAFF. A COPY OF THE FORM 990 IS DISTRIBUTED TO THE ORGANIZATION'S AUDIT AND FINANCE COMMITTEE FOR REVIEW PRIOR TO FILING WITH THE IRS. A COPY OF THE FORM 990 IS DISTRIBUTED TO THE FULL BOARD OF DIRECTORS ONCE THE AUDIT AND FINANCE COMMITTEE HAS APPROVED IT FOR FILING.

PART VI, SECTION B - QUESTION 12C

THE SECRETARY OF RPA ANNUALLY CIRCULATES A DISCLOSURE FORM FOR DIRECTORS

13-3615533

AND STAFF TO LIST ORGANIZATIONS IN WHICH EITHER THE DIRECTOR, STAFF OR
EITHER OF THEIR SPOUSES OR CHILDREN PLAY A FIDUCIARY OR LEADING ROLE. IN
ADDITION, DIRECTORS AND STAFF WILL LIST THOSE ORGANIZATIONS IN WHICH
THEY, A SPOUSE OR A CHILD HOLD A SIGNIFICANT FINANCIAL INTEREST AND WHICH
HAVE A BUSINESS RELATIONSHIP WITH RPA. ON THE SAME FORM, DIRECTORS AND
STAFF ACKNOWLEDGE THAT THEY UNDERSTAND AND ADHERE TO RPA'S CONFLICT OF
INTEREST POLICY AND PROCEDURE. DIRECTORS AND STAFF WILL INFORM THE
SECRETARY OF RPA OF ANY CHANGES OR NEW RELATIONSHIPS. IF A POTENTIAL
CONFLICT EXISTS, INVOLVED PARTIES WILL DISCLOSE THE POTENTIAL CONFLICT

AND EXCUSE THEMSELVES FROM DISCUSSION OR ANY VOTE RELATED TO THE MATTER.

PART VI, SECTION B - QUESTIONS 15A & 15B

RPA IS COMMITTED TO RECRUITING, RETAINING, AND MOTIVATING HIGHLY

QUALIFIED AND HIGH-PERFORMING STAFF, AND PROVIDING A MARKET COMPETITIVE

COMPENSATION AND BENEFITS PACKAGE, LINKED TO THE SUCCESS OF THE

INDIVIDUAL, THE ORGANIZATION AND ITS MISSION-DRIVEN OUTCOMES. RPA

PRIMARILY COMPARES ITS COMPENSATION TO THE LARGER FOUNDATIONS IN THE NEW

YORK CITY REGION AS WELL AS TO SMALL TO MID-SIZE CONSULTING ORGANIZATIONS

NATIONWIDE, WHILE ALSO MONITORING PRACTICES AND TRENDS IN THE BROADER

NONPROFIT AND GENERAL EMPLOYMENT MARKETS. RPA IS COMMITTED TO BOTH

EXTERNAL COMPETITIVENESS AND INTERNAL EQUITY FOR ITS COMPENSATION PROGRAM

PRACTICES.

EMPLOYEE POLICIES:

RPA'S PERFORMANCE AND COMPENSATION PLANS, INCLUDING BUDGETS ARE APPROVED ANNUALLY BY THE BOARD OF DIRECTORS. THE FOLLOWING IS A SUMMARY OF THE

GENERAL PRINCIPLES ON WHICH RPA'S PERFORMANCE ASSESSMENT AND COMPENSATION PROCESSES ARE BASED. PERFORMANCE REVIEW AND COMPENSATION DECISIONS AT RPA ARE MADE ON THE BASIS OF A BOARD-APPROVED PERFORMANCE APPRAISAL FORM, WHICH ESTABLISHES PERFORMANCE STANDARDS AND IMPORTANT VALUES THAT ARE EXPECTED OF ALL EMPLOYEES. AT THE BEGINNING OF EACH CALENDAR YEAR, EACH RPA EMPLOYEE DEVELOPS A PERFORMANCE PLAN THAT HIS/HER SUPERVISOR AND THE PRESIDENT OF RPA MUST APPROVE. ELIGIBLE EMPLOYEES ALSO ESTABLISH SPECIFIC GOALS FOR INCENTIVE COMPENSATION (BONUS) PAYMENTS. AT THE END OF THE CALENDAR YEAR, AN EMPLOYEE AND HIS/HER SUPERVISOR REVIEW HOW THE EMPLOYEE HAS PERFORMED AGAINST THIS PLAN AND THE PERFORMANCE STANDARDS. SUPERVISORS COMPLETE THE PERFORMANCE APPRAISAL FORM IN WRITING, AND RECOMMEND SALARY INCREASES (AS WELL AS INCENTIVE PAYMENTS FOR ELIGIBLE EMPLOYEES) BASED ON PERFORMANCE. BOTH SUPERVISOR AND EMPLOYEE MUST SIGN THE PERFORMANCE APPRAISAL FORM. SALARY ADJUSTMENTS AND BONUS PAYMENTS MUST BE APPROVED BY THE PRESIDENT OF RPA.

PART VI, SECTION C - QUESTION 19

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A COPY AT ITS PLACE OF BUSINESS. THE FORM 990 IS LIKEWISE PUBLISHED ON THE INTERNET AT WWW.GUIDESTAR.ORG. THE ORGANIZATION'S FINANCIAL STATEMENTS, GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT ORDINARILY MADE AVAILABLE TO THE PUBLIC, BUT, IF REQUESTED, WILL BE PROVIDED AT MANAGEMENT'S DISCRETION.

FORM 990, PART XI, LINE 9
PENSION RELATED COSTS OTHER

Name of the organization ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Employer identification number 13-3615533

THAN NET PERIODIC PENSION EXPENSE

\$ 169,695

TOTAL

\$ 169,695

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

ROCKEFELLER PHILANTHROPY ADVISORS (RPA) AIMS TO ENCOURAGE THOUGHTFUL,
EFFECTIVE PHILANTHROPY THROUGHOUT THE WORLD. TO THIS END, RPA

DEVELOPS AND MANAGES CHARITABLE PROGRAMS; CONDUCTS RESEARCH, AUTHORS
PUBLICATIONS AND PROVIDES GUIDANCE ON CHARITABLE GIVING AND
PHILANTHROPY; AND OFFERS PROGRAMMATIC, ADMINISTRATIVE AND
GRANT-MAKING SUPPORT TO DONORS, ASSISTING INDIVIDUALS, INSTITUTIONS,
GOVERNMENT AGENCIES AND GROUPS IN ACHIEVING THEIR PHILANTHROPIC
GOALS. CURRENTLY, RPA WORKS WITH MORE THAN 450 DONORS, FACILITATING
\$200 MILLION IN GRANTS AND SOCIAL INVESTMENTS TO MORE THAN 22
COUNTRIES IN AFRICA, ASIA, THE CARIBBEAN, EUROPE, LATIN AMERICAN AND
NORTH AMERICA. RPA'S BROAD RANGE OF WORK INCLUDES:

- 1. ADVISING DONORS REGARDING THE ARTICULATION AND IMPLEMENTATION OF CHARITABLE PROGRAMMING;
- 2. MANAGING A CHARITABLE GIVING FUND TO PROVIDE DONORS WITH A FLEXIBLE, COST-EFFECTIVE WAY TO REACH THEIR CHARITABLE GOALS;
- 3. PROVIDING FISCAL, ADMINISTRATIVE AND PROGRAMMATIC SUPPORT TO INDIVIDUALS AND GROUPS SEEKING TO PURSUE A VARIETY OF SPECIALIZED CHARITABLE PROGRAMMING CONSISTENT WITH THE GENERAL MISSION OF RPA; AND
- 4. SERVING AS A THOUGHT-LEADER IN THE PHILANTHROPIC COMMUNITY,
 AUTHORING PUBLICATIONS AND CONVENING EXPERTS TO DISCUSS CURRENT

Name of the organization

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Employer identification number

13-3615533

ATTACHMENT 1 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TOPICS IN PHILANTHROPY AND STRENGTHEN THE SECTOR.

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4B

SPONSORED PROJECTS - RPA'S SPONSORED PROJECT PROGRAM ENABLES
INDIVIDUALS AND GROUPS TO PURSUE A VARIETY OF SPECIALIZED
CHARITABLE GRANT-MAKING PROJECTS AND ACTIVITIES CONSISTENT WITH
THE GENERAL MISSION OF RPA.

RPA PROVIDES ADMINISTRATIVE AND PROGRAMMATIC SUPPORT TO ENABLE

FUNDERS TO DEVELOP LAUNCH AND PROMOTE HIGH-IMPACT PROJECTS AROUND

THE GLOBE. FISCAL SPONSORSHIP SUBSTANTIALLY REDUCES THE COSTS

TYPICALLY ASSOCIATED WITH DEVELOPING NONPROFIT GOVERNANCE,

MANAGEMENT AND OPERATIONAL INFRASTRUCTURE.

RPA HAS EXTENSIVE EXPERIENCE INCUBATING START-UP, INNOVATIVE AND COMPLEX PROJECTS IN THE U.S AND OVERSEAS. RPA CAN:

- PROVIDE STRONG ACCOUNTING, HR, FINANCE & IT INFRASTRUCTURE
- 2. DEVELOP AND MONITOR SOPHISTICATED PROJECT BUDGET AND GRANT REPORTING
- 3. OFFER RESEARCH, ANALYSIS, GRANTMAKING AND EVALUATION SERVICES
- 4. ADOPT PROJECT GOVERNANCE STRUCTURES THAT ENGAGE EXTERNAL ADVISORS, FUNDERS AND OTHER PRINCIPALS.

Name of the organization ROCKEFELLER PHILANTHROPY ADVISORS, INC. Employer identification number 13-3615533

ATTACHMENT 3

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,

DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI,

MN, MS, NH, NJ, NM, NY, ND, OH, OK, OR, PA,

RI, SC, TN, UT, VA, WA, WV, WI,

ATTACHME	NT	4	

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
EDUCATION FIRST CONSULTING, LLC P.O. BOX 22871 SEATTLE, WA 98122-0871	CONSULTING	2,736,821.
MCKINSEY & COMPANY, INC UNITED STATES P.O. BOX 7247-7255 PHILADELPHIA, PA 19170-7255	CONSULTING	1,865,000.
CONTEXT PARTNERS, INC. 2009 NE ALBERTA STREET SUITE 201 PORTLAND, OR 97211	CONSULTING	878,728.
BANKABLE FRONTIER ASSOCIATES LLC 259 ELM STREET SUITE 200 SOMERVILLE, MA 02144	CONSULTING	819,213.
MERCURY PUBLIC AFFAIRS, LLC 250 GREENWICH STREET, 36TH FLOOR, 7 WTC NEW YORK, NY 10007	COMMUNICATIONS	691,273.

ATTACHMENT 5

FORM 990, PART IX - OTHER FEES

	(A) TOTAL	(B) PROGRAM	(C) MANAGEMENT	(D) FUNDRAISING
DESCRIPTION	TOTAL PROGRAM MANAGEMENT FUNDRAISIN FEES SERVICE EXP. AND GENERAL EXPENSES MMATIC 10,547,155. 10,369,337. 395,474217,65	EXPENSES		
CONSULTANT - PROGRAMMATIC	10,547,155.	10,369,337.	395,474.	-217,656.
CONSULTANT - DESIGN	689,253.	689,253.	0	0

Schedule O (Form 990 or 990-EZ) 2014

Name of the organization ROCKEFELLER PHILANTHROPY ADVISORS, INC.					
ROCKEFELLER	PHILANTHROPY	ADVISORS.	INC.		

Employer identification number

13-3615533

ATTACHMENT 5 (CONT'D)

FORM 990, PART IX - OTHER FEES

	(A) TOTAL	(B) PROGRAM	(C) MANAGEMENT	(D) FUNDRAISING
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES
CONSULTANT - COMMUNICATION	1,820,940.	1,820,940.	0	0
TOTALS	13,057,348.	12,879,530.	395,474.	-217,656.

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No 1545-0047 Open to Public Inspection

ROCKEFELLER PHILANTHROPY ADVISORS, INC.

Employer identification number

13-3615533

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
1) ARTPLACE AMERICA, LLC 46-4698925					
5 METROTECH CENTER, 7TH FLOOR BROOKLYN, NY 11201	ARTS/CULTURE	NY	37,461,987.	22,189,065.	RPA
2)	-				
3)					
4)					
5)					
6)					

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity		(g) 512(b)(13 trolled tity?
(1)							Yes	No
<u> </u>								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)							-	

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

Schedule R (Form 990) 2014

JSA 4E1307 1 000

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	11 00 0 10 10 10 10 T 11 10 D 1 11	Object to the first of the control o	- 000 D 10/1 01
Down III	Identification of Related Organizations Taxable as a Partnership	Complete if the organization answered "Yes" on F	-orm 990. Part IV. line 34
r art III	because it had one or more related organizations treated as a partr	sorobin during the tay year	
	Decause it had one of more related organizations treated as a parti	iershib during the tax year.	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(f) Share of total Income	(g) Share of end-of- year assets	Dimprop affoci	h) partaneta stone?	(t) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		General or managing partner?		General or managing partner?		General or managing partner?		General or managing partner?		(k) Percentage ownership
		oou,,				Yes	No		Yes	No									
(1)																			
(2)										ļ .									
(3)																			
(4)																			
(5)			 																
(6)																			
(7)																			

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b) contro	ion)(13) olled ty?
								Yes N	٧o
(1)									
(2)			-						_
(3)			1,						
(4)									_
(5)									_
(6)									_
(7)									

JSA 4E1308 1 000 Schedule R (Form 990) 2014

Schedule R (Form 990) 2014

Part V	Transactions With Related Org	anizations Complete if the	organization answered "Ye	es" on Form 990, Part IV	line 34, 35b, or 36.

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes No
1	During the tax year, did the organization engage in any of the following transactions with one or more in	elated organizations lis	sted in Parts II-IV?	
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			
b	Gift, grant, or capital contribution to related organization(s)			1b
c	Gift, grant, or capital contribution from related organization(s).			1c
d	Loans or loan guarantees to or for related organization(s)			1d
۵.	Loans or loan guarantees by related organization(s)			1e
·	Edulis of loan guarantees by related organization(s)			
	Duudanda fram ralatad arganization(a)			
	Dividends from related organization(s)			
	Sale of assets to related organization(s)			
n	Purchase of assets from related organization(s)			1h
ı	Exchange of assets with related organization(s).			1i
j	Lease of facilities, equipment, or other assets to related organization(s)			<u> 1j </u>
				* * * * * * * * * * * * * * * * * * *
k	Lease of facilities, equipment, or other assets from related organization(s)			
ł	Performance of services or membership or fundraising solicitations for related organization(s)			11
m	Performance of services or membership or fundraising solicitations by related organization(s)			1m
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n
	Sharing of paid employees with related organization(s)			
р	Reimbursement paid to related organization(s) for expenses			1p
	Reimbursement paid by related organization(s) for expenses			
•	, , , , , , , , , , , , , , , , , , , ,			4. * May 2. * * * * * * * * * * * * * * * * * *
r	Other transfer of cash or property to related organization(s)			1r
s	Other transfer of cash or property from related organization(s)			1s
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete t	his line, including cove	ered relationships and trans	action thresholds
	(a)	(b)	(c)	(d)
	Name of related organization	Transaction	Amount involved	Method of determining
		type (a-s)		amount involved
1)				
<u>'/</u> _				
21				
2)				
3)				
4)				
5)			· · · · · · · · · · · · · · · · · · ·	
		,		
6)	·····			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec 501 organia	e) partners tion (c)(3) rations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentag ownershi
	<u> </u>		sections 512-514)	Yes	No			Yes	No		Yes	No	
)	_												
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3)		-						-					
)								-					
5)				_									
6)					*	4							
7)								├			-		
3)							.,				-		
9)						<u>.</u>		├			-		
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2)								1		<u> </u>		_	_
3)						-		-					_
4)								<u> </u>					
5)					-					-			
6)							<u> </u>						
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Part Víi **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)