Department of the Tressury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

Open to Public Inspection

A	For th	e 2012 calendar year, or tax year beginning and er	nding			
В	Check if	C Name of organization		D Employer ide	ntification	number
	applicat	BARRY GOLDWATER INSTITUTE FOR		}		
	Addr	998				
Γ	Name	Doing Business As GOLDWATER INSTITUTE		86-	0597661	
F	initial	All I was a second of the seco	oom/suite	E Telephone nu		
F	Term		00111700110	l - ·	<u></u>	10
F	ated ated	ded Ott. 1 and 2 and 200 and 2		G Gross receipts \$	-402-300	
-	Ireturr Appli	ng_				4,335,163,
L_	—Jtión pend	PHORNIX AZ 85004-1543		H(a) Is this a gro		
		F Name and address of principal officer:MS. DARCY OLSEN	i	for affiliates		Yes X No
_		500 E CORONADO ROAD, PHOENIX, AZ 85004-1543		H(b) Are all affiliate		
		empt status: x 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or	<u> 527</u>	1	-	ee instructions)
		te: Www.goldwaterinstitute.org	т	H(c) Group exem		
		forganization: x Corporation Trust Association Other	L Year	of formation: 1988	M State	of legal domicile; AZ
L	art i	Summary				
ø	1	Briefly describe the organization's mission or most significant activities: GOLDWATE	R'S MIS	SION IS TO		
Governance		ADVANCE FREEDOM THROUGH PRIMARY RESEARCH, ANALYSIS, AND LITIGA	TION.			
Ë	2	Check this box if the organization discontinued its operations or dispose	d of more	than 25% of its n	et assets.	
Š	3	Number of voting members of the governing body (Part VI, line 1a)			3	10
۳	4	Number of independent voting members of the governing body (Part VI, line 1b)	······································		4	9
ş	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)			5	58
ĄĖ	6	Total number of volunteers (estimate if necessary)			6	27
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.
⋖	b	Net unrelated business taxable income from Form 990-T, ine 34			7b	0.
			V	Prior Year		Current Year
	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 203) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 13) Benefits paid to or for members (Part IX, column (A), line 4)		2,679,3		3.753.262.
2013 Revenue	9	Program service revenue (Part VIII line 2a)	~ \\Q\	1. 395.8		1,046.
<u> </u>	10	Investment income (Part VIII column (A) lines 3.4 and 7d)	<u> </u>	51.9		70,525.
	11	Other revenue (Part VIII) column (A) lines 5, 6d, 8e, 9e, 10e, and 7th) "	63 3		
9	40	Total revenue and lines 8 through 11 (revet squal Bort VIII solumn) (A) lists 10	~~ /	4.190.5		5,433.
3	12	Counts and similar associate point (Part IV column (A) lines 43)		4,190,3		3,830,266.
	13	Crarits and similar amounts paid (Part IX, Column (A), line (1)			<u>•</u>	
Ź			<i>//</i> /		<u>o.</u>	
		Salaries, other compensation, employee benefits (Part IX, column A), lines (13)	····	2,545,0		2,363,063.
ΠÊ		Professional fundraising fees (Part IX, column (A), line 11e)		·	0.	
2	p	Total fundraising expenses (Part IX, column (D), line 25)				
CANE	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,219,8		<u> </u>
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,764,9	08.	3,463,958.
	19	Revenue less expenses. Subtract line 18 from line 12		425,6		<u>366,308.</u>
20°	<u> </u>		Beg	inning of Current Y	ear	End of Year
Net Assets of	20	Total assets (Part X, line 16)		4,952,1	00.	5,351,116.
₹ E	21	Total liabilities (Part X, line 26)		156.4	49.	119 158
2	22	Net assets or fund balances. Subtract line 21 from line 20		4.795.6	51	5,231,958.
P	art II	Signature Block				
Und	der pena	alties of perjury, I declare that I have examined this return, including accompanying schedules a	ind stateme	ents, and to the best	of my knowl	edge and belief, it is
true	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer	has any knowledge.	_	
		x Van A C			DBER	8,2013
Sig	ın	Signature of office;		Date		
He		*DARCY OLSEN, PRESIDENT & CEO				
		Type or print name and title				
		Print/Type preparer's name		ate Chec	k []	PTIN
Pai	d	AMY A, O'LOUGHLIN WWW TO SU	1/	0 · 3 · 13 If self-e	mployed PO	0869687
	parer					
	v v 1		•	Firm's FIM	24.1	994125
jjes	-	Firm's name ► CBIZ MHM, LLC		Firm's EIN	34-1	884125
USE	Опју	Firm's name CBIZ MHM LLC Firm's address 3101 N. CENTRAL AVE., STE. 300	•			
	Only	Firm's name ► CBIZ MHM, LLC			602-264	

	n 990 (2012) · PUBLIC POLICY RESEARCH	86-0597661	L Pag	<u>е 2</u>
Pa	rt III Statement of Program Service Accomplishments			_
	Check if Schedule O contains a response to any question in this Part III	<u></u>	<u> L</u>	<u>لx</u>
1	Briefly describe the organization's mission:			
	THROUGH RESEARCH, INVESTIGATIONS, STRATEGIC LITIGATION, TESTIMONY,			
	ADVOCACY AND EDUCATION, THE GOLDWATER INSTITUTE ADVANCES PUBLIC			
	POLICY AND A RULE OF LAW UNDER WHICH INDIVIDUALS CAN SHAPE THEIR OWN			
	DESTINIES AS FREE MEN AND WOMEN. WE HELP CITIZENS UNDERSTAND AND ADOPT			
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 🗓	40
_	If "Yes," describe these new services on Schedule O.	1		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		L!Yes LX_!≀	10
	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	-		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total ex	penses, and	
	revenue, if any, for each program service reported.			_
4a	(Code:) (Expenses \$	ie \$		-'
	POLICY ANALYSIS, RESEARCH AND EDUCATION; CONDUCT SCHOLARLY RESEARCH AND			—
	ANALYSIS OF STATE-LEVEL PUBLIC POLICY ISSUES AND COMMUNICATE THE			—
	RESULTS OF THAT RESEARCH TO THE PUBLIC IN AREAS SUCH AS ECONOMICS			—
	EDUCATION, AND CONSTITUTIONAL LAW, DISTRIBUTION INCLUDED 18 RESEARCH			—
	REPORTS, 140 SHORT ANALYSES, 88 PUBLIC PRESENTATIONS, 26 EXPERT			
	TESTIMONIES BEFORE STATE LEGISLATIVE BODIES AND U.S. CONGRESSIONAL COMMITTEES, 12 NEWS SPECIAL INVESTIGATIONS, 3 AMICUS BRIEFS TO THE U.S.			—
	SUPREME COURT AND OTHER FEDERAL COURTS, AND 1.030 STORIES OR			—
	APPEARANCES ON TELEVISION, RADIO, AND NEWS OUTLETS.			_
	AFFEARANCES ON TELEVISION, RADIO, AND NEWS COIDEIS.			—
				_
				_
4b	(Code) (Expenses \$ 1,082,155, including grants of \$) (Revenue	e \$		
•	PUBLIC INTEREST LITIGATION: LITIGATE CONSTITUTIONAL ISSUES OF CONCERN			
	TO THE PUBLIC PARTICULARLY UNDER THE STATE CONSTITUTION, ON BEHALF OF			\equiv
	CLIENTS WHO WOULD NOT BE IN A POSITION TO LITIGATE WITHOUT ASSISTANCE			_
	OR EXPERTISE, ONGOING CASE LOAD AVERAGES APPROXIMATELY 15 CASES, IN			
	ADDITION TO LEGAL ANALYSIS. THE INSTITUTE PROVIDES FREEDOM OF			
	INFORMATION ACT REQUESTS AND OTHER LEGAL ACTIONS ON PUBLIC POLICY			
	ISSUES, [SEE SCHEDULE O FOR CASE UPDATE]			
	<u> </u>			
•				
				<u> </u>
. 4c	(Code) (Expenses \$ 5 599 including grants of \$) (Revenue	o\$	1,046	•)
	BOOK FORUMS. SEMINARS AND CONTINUING LEGAL EDUCATION SEMINARS: HELD 6			
	FORUMS FEATURING 12 EXPERTS ON TOPICS INCLUDING EDUCATION REFORM			
ı	PROPERTY RIGHTS, FREE SPEECH, TAX REFORM, STATE POWERS, BUSINESS AND		· · - · · · ·	—
	JOB CREATION GOVERNMENT RED TAPE, GOVERNMENT ACCOUNTABILITY, WORKPLACE			
	FREEDOM, GOVERNMENT SPENDING, CITY AND LOCAL REFORM, CONSTITUTIONAL	<u> </u>		—
	RIGHTS, AND CAMPAIGN FINANCE AND ELECTION.			
			_ 	
				
				—
				_
				—
4d	Other program services (Describe in Schedule O.)			—
+u	The second secon		١	
4=	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses > 2 .681 .129 .			—
<u>-rc</u>	- You program on the expenses - 2,001,127,		Form 990 (20	12)

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86-0597661

Form 990 (2012) PUBLIC POLICY RESEARCH Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	x	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
	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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		
•	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	<u> </u>		
Ū	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	<u> </u>		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X		-	
• •	as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	ŀ		
a		 11a	x	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1.0		
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
м	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
L	the organization's separate or consolidated inhancial statements for the tax year incided a toe-note that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- '''		
ıza	Schedule D. Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
U	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	v	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	<u>x</u>
14a		14a		X
	The state of the s	70		
	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 assistance to any organization	170		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	[х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
10	located outside the United States? 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,			
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
12	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-''-		
18		40		
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	_ж_	
19		19	<u> </u>	v
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
20a	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_ <u>X</u>
D	ii 169 to line 20a, ulu trie organization attach a copy or its addited finational statements to tris return	لال ي	ᆖᆜ	

Form 990 (2012) PUBLIC POLICY RESEARCH
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States 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 and other assistance to individuals in the United States 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			ļ
	Schedule J	23	x	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K, If "No", go to line 25	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?	24d		
	Section 501(c)(3) and 501(c)(4) 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	_	x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	x	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	ı	1	
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	- 1	}	
	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 Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
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	ж	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		1	
	Part V, line 1	34		<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	{	<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		l	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>x</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	_		
	Note. All Form 990 filers are required to complete Schedule O	38	X	

01111 330 (2012)	- PORLIC POLICY	RESEARCH	86
Part V Statements	Regarding Othe	r IRS Filings and Tax Compliance	

	Check if Schedule O contains a response to any question in this Part V	., <u></u>				
		1 (Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		27	4	ļ	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			2	1	l
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			ļ		ļ
	(gambling) winnings to prize winners?	. _;	••••••	1c	X	├ _
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			1		
	filed for the calendar year ending with or within the year covered by this return		58	4	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax ret	urns?		2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ns)				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a_		X
	• • • • • • • • • • • • • • • • • • • •	•••••		<u>3b</u>	L	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	•				
	financial account in a foreign country (such as a bank account, securities account, or other financial	l account)?	•••••	<u>4a</u>	ļ	X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.		{ :		1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action?		5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the organizat	ion solicit			
	any contributions that were not tax deductible as charitable contributions?			6a_		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contribu	utions or gifts	i			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and s	ervices provide	d to the payor?	7a_	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	_ X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was required	'	1		
	to file Form 8282?			7c_		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	 			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contract? .		7e_		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con	tract?		7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file is	Form 8899 as	required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	zation file a F	orm 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.	Oid the suppor	ting	·		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings a	t any time duri	ng the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a_		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders	11a			·	
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n 1041?	J	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		ĺ	Ī		
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c		[
				14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu		i i	14b		

Form 990 (2012) PUBLIC POLICY RESEARCH Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		•	
	Check if Schedule O contains a response to any question in this Part VI			\mathbf{x}
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year1			
	If there are material differences in voting rights among members of the governing body, or if the governing	7	1	}
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		ł	
b	Enter the number of voting members included in line 1a, above, who are independent 1b		ļ	j
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2		X_
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	x	
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	ļ
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	\Box		
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
Sec	tion 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	<u>_x</u>	
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	х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?	1		
a	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).	<u> </u>		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
<u> </u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL AZ AR CA CO CT FL HI IL KY ME MI			
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) and the security inspection, indicate how you made these explicitly inspection.	ıvallaD	IC	
	for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website X Upon request Other (explain in Schedule O)	d 6:	امادا	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	u iinan	UBI	
	statements available to the public during the tax year.	ian. 🕨		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	iion: 🏴		
	ROGER ZETAH - 602-462-5000			
232000	500 E CORONADO ROAD, PHOENIX, AZ 85004-1543	C	000	00461

6

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

(A) Name and Title	(B) Average hours per week	box	not c unle	Pos heck ss pe	more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	institutional trustee	Опісег	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) DARCY OLSEN	60,00									
PRESIDENT/CEO		X		x				272,273.	0.	7,939
(2) PAUL CLIFTON	1.00									•
SECRETARY		X		x				0.	0.	0.
(3) ERIC CROWN	0.00									
DIRECTOR		x						0.	0.	0.
(4) JOHN W. DAWSON	1.00									
DIRECTOR		x						0.	<u> </u>	0,
(5) RENEE GILTNER	5.00									
TREASURER		X		x	ļ	_	L	. 0.	0.	<u> </u>
(6) BARRY GOLDWATER, JR	0.00									
DIRECTOR		X			<u> </u>		_	0.	0.	0,
(7) RANDY P. KENDRICK	0.00									
DIRECTOR		x			_			0.	0.	0.
(8) NORMAN P. MCCLELLAND	1,00			ĺ						
VICE CHAIRMAN		x		X				0.	0.	0.
(9) JOHN NORTON	0.00									
DIRECTOR		X						0.	0.	
(10) THOMAS C. PATTERSON	1.00				•					
CHAIRMAN		X		X				0.	0.	0.
(11) ROGER ZETAH	50,00						,	l		
CHIEF FINANCIAL OFFICER				X				79,020,	0.	<u>7,597</u>
(12) CLINT BOLICK	50.00									
DIRECTOR OF LITIGATION					X			275,423.	0.	11,396.
(13) NICHOLAS DRANIAS	50.00									
DIRECTOR OF POLICY DEVELOPMENT						X		130,426.		10,254.
(14) STARLEE RHOADES	50,00									
EXECUTIVE VICE PRESIDENT			Щ			X	_	118,677.	0.	6,195.
(15) STEPHEN SLIVINSKI	50.00								ļ	
SENIOR ECONOMIST						Х		100,989.	0.	9,803.
									Ì	
	+						Н			

_ PUBLIC POLICY RESEARCH			
	_ PUBLIC	POLICY	RESEARCH

Part VII Section A. Officer, Directors, Trustees, Key Employees, and Highest Compensation Employees (continued) Name and title		1990 (2012) PUBLIC POLIC	Y RESEARCH								86-0597	<u>661</u>		F	⊃age 8
(A) Name and title Average hours per week pour per per per per per per per per per pe	Pa	rt VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees/	, an	d H	ighe	st (Compensated Employe	es (continued)				
organizations below 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2		(A)	(B) Average hours per	(do box offi	not o	Pos heck as pe	C) sitior more erson	than	one than	(D) Reportable compensation	(E) Reportable compensation		an	stimat nount	of
c Total from continuation sheets to Part VII, Section A			hours for related organizations below	raste	institutional trustee	Officer	Key employee	Highest compensated employee	Former		, •		org an	rom th janızai d relai	ne tion ted
c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A													ļ		
c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A				_				-							
c Total from continuation sheets to Part VII, Section A									-					_	
c Total from continuation sheets to Part VII, Section A												\neg			
d Total (add lines 1b and 1c)	1b	Sub-total			!	لــــا				976,808.	·	0.		<u>53</u>	184
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accure compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization is the organization of services.															0,
Section B. Independent Contractors (Including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Services Servi		Total number of individuals (including but n							no r		,000 of reportable				,104,
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization by the organization of the calendar year ending with or within the organization of services.		compensation from the organization									·· ··· ·····			V	T 10 - 5
line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \$ 100,000 of compensation from the organization \$ 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \$ 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \$ 3	3	Did the organization list any former officer,	director, or tru	ıstee	e, ke	y en	nplo	yee,	or	highest compensated er	nployee on	ſ		Yes	NO
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		line 1a? If "Yes," complete Schedule J for s	uch individual										3		x
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	4		-											Ţ	
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation Description of services Compensation Compensation Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation in the organization 0	5												7		
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.	<u> </u>		plete Schedule	9 <i>J f</i>	or su	ıch j	<u>oers</u>	on .		····			5		X_
the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation Name and business address NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization			mpensated inc		nde	nt c	ontr	acto	rs t	hat received more than	\$100,000 of comp		ation f	rom	
Name and business address NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation From the organization 0				-											
\$100,000 of compensation from the organization 0			address	NOI	NE						ervices	С			n _
\$100,000 of compensation from the organization 0															
\$100,000 of compensation from the organization 0															
\$100,000 of compensation from the organization 0									1						
\$100,000 of compensation from the organization 0								_	\dashv						
\$100,000 of compensation from the organization 0			····			_			+						
	2		_	ot lir	nited	d to	thos	se lis	ted	above) who received m	ore than				
		\$100,000 of compensation from the organiz	ration 🕨	_)					Form (<u></u>	2012\

Pa	rt VI				a Alaia Dauk VIIII			
		Check if Schedule O con	· · · · - · · · · · · · · · · · · · · ·	to any question if	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a			1		
200	b	Membership dues						
S, (c	Fundraising events	1c	315,003.				
들声	d	Related organizations	1d			1		
ž E	е	Government grants (contribu	tions) 1e					
	f	All other contributions, gifts, gran	nts, and]		
혈		similar amounts not included abo	ove 1f	3,438,259.				Ì
달의	g	Noncash contributions included in lines	s 1a-1f \$	438,478.				
<u>පි වි</u>	h	Total. Add lines 1a-1f			3,753,262.			
				Business Code				Ì
8	2 a	PUBLIC POLICY EVENTS		900099	1.046	1,046.		
Program Service Revenue	b							
8 <u>2</u>	c							
E a	d							
Par.	е							
<u>.</u>	f	All other program service reve	enue					
	a	Total. Add lines 2a-2f			1.046.			
	3	Investment income (including						
1	•	other similar amounts)			70,525,			70,525
1	4	Income from investment of ta						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	5	Royalties		· ·				
	•	,	(i) Real	(ii) Personal				
l	6 a	Gross rents		(1) 1 3/30/10.				١.
		Gross rents Less: rental expenses						
ļ		Rental income or (loss)		 	1			
		Net rental income or (loss) Gross amount from sales of		T				
l	/ a		(i) Securities	(ii) Other				
1		assets other than inventory	413,643,	-	,]		
	D	Less: cost or other basis		1				
ĺ		and sales expenses	413,643,	T				ĺ
ŀ		Gain or (loss)	0,		_	i		
- 1		Net gain or (loss)		·······	0.			
9	8 a	Gross income from fundraisin		į į				
ē		including \$315		1				
É		contributions reported on line	*	1				ĺ
Other Revenue		Part IV, line 18						
돌		Less: direct expenses						
-		Net income or (loss) from fund	_	, >	<1,735.	<u> </u>		<1.735
	9 a	Gross income from gaming ad]]	ľ			
J		Part IV, line 19						
	þ	Less: direct expenses	b					
	C	Net income or (loss) from gan	ning activities	<u> </u>				
ŀ	10 a	Gross sales of inventory, less	returns	}				
		and allowances	a					
	b	Less: cost of goods sold	b			i		
Ĺ	С	Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenu	16	Business Code				
ſ	11 a	OTHER INCOME		900099	7,168.			7,168,
	b							
1	c							
	d	A						
	ب م	Total. Add lines 11a-11d			7,168.			
	12	Total revenue. See instructions.			3 830 266	. 1 046.	0.	75 958
232009		The second of the second of		··· · · · · · · · · · · · · · · · · ·				Form 990 (2012)

86-0597661

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 response to any question in this Part IX (A) Total expenses Do not include amounts reported on lines 6b, Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 565,799 28,021 649,862 56,042. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 1,406,042 1,074,356 158,675 173,011. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 5,588 4.250 838 50<u>0</u>. Other employee benefits 137,714 14,311 170,145 18,120. Payroll taxes 131,426 105 207 11,789 14.430. Fees for services (non-employees): Management 94,936 94,936 Legal Accounting 31,503 C 31,503 d Lobbying ... 35,771 35,771 Professional fundraising services. See Part IV, line 17 e Investment management fees 9,103 9,103 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 54,237 12,127 10.372 31,738. Advertising and promotion ... 35,898 35,898 12 Office expenses, 8.757 37,995. 13 261,402 214,650 <u>48.0</u>35 Information technology 38.728 4,336 14 4,971. Royalties 15 16 Occupancy 115,369 91.171 11.720 12,478. 17 65,090 35,321 9,259 20,510. Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 7,561 7.392 169 20 Interest 1,106 1,106 Payments to affiliates 21 Depreciation, depletion, and amortization 22 122,191 96.563 12,412 13,216, 23 Insurance 29.724 23,780 2,972 2.972. Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 48.524 48,524 <u>5 116</u>. 48,170 40.876 2,178 b DUES AND SUBSCRIPTIONS C FUNDRAISING EVENTS 39,592 39,592. EQUIPMENT LEASE/REPAIR 9.508 7.006. 1,293 1,209. All other expenses 43,175 11,060 11,654 20,461. Total functional expenses. Add lines 1 through 24e 3,463,958 2,681,129 330,468 25 452,361, Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2012) PUBLIC POLICY RESEARCH
Part X Balance Sheet

]	(A)		, (B)
			<u>-</u>	Beginning of year		End of year
1	1	Cash · non-interest-bearing		540,479.	1	722,832
2	2	Savings and temporary cash investments		24,299.	2	28,843
] 3	3	Pledges and grants receivable, net		<u>155,293.</u>	3	33,323
4	4	Accounts receivable, net		42,716.	4	4.74
5	5	Loans and other receivables from current and former officers, director	s,			
		trustees, key employees, and highest compensated employees. Com	olete			
		Part II of Schedule L		1,700,000.	5	1,950,000
6	3	Loans and other receivables from other disqualified persons (as define	ed under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and co	ntributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary	<i>'</i>			
.		employees' beneficiary organizations (see instr). Complete Part II of S	ch L 📙		6	
7	7	Notes and loans receivable, net			7	
8 8	3	Inventories for sale or use			8	
9	•	Prepaid expenses and deferred charges		19,880.	9	57,130
10)a	Land, buildings, and equipment: cost or other	1			
		basis. Complete Part VI of Schedule D 10a 2	951,167.			
- [b	Less: accumulated depreciation 10b 1	233,587.	1,709,113.	10c	1,717,580
11	ı	Investments - publicly traded securities	L	760,320.	11	836,661
12	2	Investments - other securities. See Part IV, line 11			12	
13	3	Investments - program-related. See Part IV, line 11	L		13	
14	ŀ	Intangible assets	L		14	
15		Other assets. See Part IV, line 11			15	
<u>-</u> 16	>	Total assets. Add lines 1 through 15 (must equal line 34)		4.952.100.	16	5,351,116
17	,	Accounts payable and accrued expenses		142,836.	17	109,539
18		Grants payable			18	
19		Deferred revenue		_	19	
20		Tax-exempt bond liabilities			20	, ,
21		Escrow or custodial account liability. Complete Part IV of Schedule D			21	
21 22	2	Loans and other payables to current and former officers, directors, tru	stees,			
		key employees, highest compensated employees, and disqualified per	rsons.		ľ	
i		Complete Part II of Schedule L			22	
23		Secured mortgages and notes payable to unrelated third parties		13,613.	23	9,619
24		Unsecured notes and loans payable to unrelated third parties			24	
25		Other liabilities (including federal income tax, payables to related third				
		parties, and other liabilities not included on lines 17-24). Complete Par	t X of		ĺ	
		Schedule D	1		25	
26	.	Total liabilities. Add lines 17 through 25		156.449.	26	119 158
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □x				
:		complete lines 27 through 29, and lines 33 and 34.				
27		Unrestricted net assets		3,518,975.	27	3,629,126
28		Temporarily restricted net assets		412,321,	28	738,477
29		Permanently restricted net assets	í	864.355.	29	864.355
		Organizations that do not follow SFAS 117 (ASC 958), check here				
		and complete lines 30 through 34.			1	
27 28 29 30 31 32		Capital stock or trust principal, or current funds			30	•
31		Paid-in or capital surplus, or land, building, or equipment fund			31	
32		Retained earnings, endowment, accumulated income, or other funds			32	
!		Total net assets or fund balances		4.795.651.	33	5,231,958
33	•					

Form	1 990 (2012) PUBLIC POLICY RESEARCH	86-0597663		Pa	ge 12
	rt XI Reconciliation of Net Assets	00-032700.	•		go
	Check if Schedule O contains a response to any question in this Part XI				
	Orlock is Corlocate Constants a respective to any question in the Factor Special Constants	*** ***********************************	·····	······	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	830	266.
2	Total expenses (must equal Part IX, column (A), line 25)	2			958.
3	Revenue less expenses. Subtract line 2 from line 1	3	-		308
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4		651.
5	Net unrealized gains (losses) on investments	5			999
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	5	231	958.
Pa	rt XII Financial Statements and Reporting				
-	Check if Schedule O contains a response to any question in this Part XII				
		<u> </u>		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	<u></u> O.	1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis x Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir				
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>
			Form	990 ((2012)

232012

SCHEDULE A. (Form 990 or 990-EZ)

Public Charity Status and Public Support

Department of the Treasury Internal Revenue Service 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. ➤ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of	the organizat	ion Barry Gold	WATER INSTITUTE FO	R				1 5	mploye	r identificat	ion nu	ımber
			ICY RESEARCH						. 8	6-0597661	<u> </u>	
Part I	Reason	for Public Char	rity Status (All organi	zations mu	ist comple	te this par	t.) See ins	tructions.				
The organ		•	because it is: (For lines	-								
1 🖳			s, or association of chui			ection 170)(b)(1)(A)(i).				
2			70(b)(1)(A)(ii). (Attach Sc									
3 📙		•	ital service organization									
4 📖		=	operated in conjunction	with a hos	spital desc	nbed in se	ection 170)(b)(1)(A)(i	ii). Enter	the hospita	i's nan	ne,
	city, and stat											
5 📖			benefit of a college or u	iniversity o	wned or o	perated by	y a govern	mental un	nt descri	ped in		
. \Box		(b)(1)(A)(iv). (Compl										
6 ⊢		•	nent or governmental uni						·			
7 Lx	_	•	eives a substantial part	of its supp	ort from a	governm	ental unit o	or from the	e generai	public desc	inbed	in
		(b)(1)(A)(vi). (Comple		6 1 . 4 .	D-4 #3							
8 -	=		section 170(b)(1)(A)(vi).				:Ina					•
9 🗀	_		eives: (1) more than 33									
		· · · · · · · · · · · · · · · · · · ·	nctions - subject to certa	· ·	-					_		
			axable income (less sec	tion 511 ta	DC) Irom DU	sinesses	acquired t	by the orga	anization	atter June	30, 19	75.
40		509(a)(2), (Complete	e Part III.) perated exclusively to te	et for publ	lia nafatu. (Saa maatid	n 500/aV	4 \				
10	_	•	perated exclusively to te perated exclusively for the	•	-			-	ov out the	a numocac	of one	or
" -	•	•	perated exclusively for the sections described in sections.		-				•			Oi
			organization and compl				c). Occ 56	Cuon 309	(<i>a)</i> (<i>0)</i> . O	ICCK LITE DO	LIIAL	
	a Type	• • • • • • • • • • • • • • • • • • • •			nctionally		1 ,		e III - No	n-functional	ilv inte	orated
e 🗀			at the organization is not								•	_
•		-	han one or more publicly		-							
f			tten determination from						υ(α)(·) Ο ·	5001.0.1 000	,(~,,(-,).	
•		rganization, check th										
g			organization accepted ai								•• •••••	•
•			lirectly controls, either a							<i>1</i> .	Yes	No
			upported organization?									
			n described in (i) above?							I	Τ.	
			person described in (i)							4	T	
h		·	about the supported or									
		·		-								
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Did yo	u notify the	(vi) !:	s the	(vii) Amoun	t of mo	netary
• •	nization	(,	(described on lines 1-9 in		sted in your			organizati (i) organiz	zed in the		port	
				governing	governing document? (r support?	U.S	J.S.?	1		
			(acc manachona))	Yes	No	Yes	No	Yes	No			
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Total			l	<u>l</u>	L	<u> </u>	<u> </u>	L	<u> </u>	<u> </u>		
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232021 12-04-1

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 PUBLIC POLICY RESEARCH Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ction A. Public Support						·
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	1					
	include any "unusual grants.")	3,020,092.	2,422,303.	3,117,362.	2,679,324.	3,753,262,	14,992,343,
2	Tax revenues levied for the organ-]	
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to			ľ		[
	the organization without charge						
4	Total. Add lines 1 through 3	3,020,092.	2,422,303.	3,117,362,	2,679,324,	3,753,262.	14,992,343.
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		l			ļ	
	amount shown on line 11,						
	column (f)			-		:	2,538,490,
	Public support. Subtract line 5 from line 4.	Ĺ					12,453,853.
_	ction B. Total Support	<u> </u>					
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	3,020,092.	2,422,303.	3,117,362.	2,679,324.	3,753,262,	14,992,343.
8	Gross income from interest,	1		ĺ			
	dividends, payments received on]					
	securities loans, rents, royalties]	I				
	and income from similar sources	85,365.	45,427.	52,982.	51,981.	70,525.	306,280.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	ļ					
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)		- 1:1	717	3,169.	7,168.	11 054.
11	• • • • • • • • • • • • • • • • • • • •	L				40	15,309,677.
12	Gross receipts from related activities	•				12	2,241,949,
13	First five years. If the Form 990 is for	•			=		► □
Sec	organization, check this box and storection C. Computation of Publi	ic Support Pe	rcentage	<u></u>			·····
	Public support percentage for 2012 (_	olumn (fl)		14	81,35 %
	Public support percentage from 2011						78,23 %
	33 1/3% support test - 2012, If the						
	stop here. The organization qualifies	_					
b	33 1/3% support test - 2011. If the						.,,
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test The organizat	tion qualifies as a p	oublicly supported	organization		▶□
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the						
	organization meets the "facts-and-circ				•		▶□
18	Private foundation. If the organization		_				. —
		-			Sche	dule A (Form 990	or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	1			}		1
	include any "unusual grants.")				<u> </u>		
2	Gross receipts from admissions,			_			
	merchandise sold or services per-	1					
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose					l	
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						Ì
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	or expended on its behalf	i					l
5	The value of services or facilities		1				
•	furnished by a governmental unit to]			
	the organization without charge						
6	Total. Add lines 1 through 5		 			 	
	Amounts included on lines 1, 2, and				 		
,,	3 received from disqualified persons						
	Amounts included on lines 2 and 3 received						
•	from other than disqualified persons that		}			1	
	exceed the greater of \$5,000 or 1% of the					1	
	amount on line 13 for the year				 		
	Add lines 7a and 7b				 -	 	
	Public support (Subtract line 7c from line 6) ction B. Total Support	<u> </u>			<u> </u>		
		4) 0000	# 1 0000	4.10010	(4) 0011	4-1,0040	(0 T -1-1
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6						
102	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
_	and income from similar sources	<u> </u>		<u> </u>	 -	 	
b	Unrelated business taxable income				į	[
	(less section 511 taxes) from businesses	1					
	acquired after June 30, 1975						
	Add lines 10a and 10b				ļ	ļ	
11	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is				ļ	ļ	
	regularly carried on				<u> </u>		
12	Other income. Do not include gain or loss from the sale of capital			1			
	assets (Explain in Part IV.)						<u> </u>
13	Total support. (Add lines 9, 10c, 11, and 12)			<u> </u>	<u> </u>		[
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
	check this box and stop here			<u></u> ,		····· ····· · · · · · · · · · · · · ·	<u></u>
Sec	ction C. Computation of Publ	<u>ic Support Pe</u>	rcentage	 		,	
15	Public support percentage for 2012 (ine 8, column (f) d	ivided by line 13, o	column (f))		15	<u>%</u>
	Public support percentage from 2011					<u> 16 </u>	<u> </u>
Sec	ction D. Computation of Inves	stment incom	<u>e Percentage</u>	<u></u>		,	
17	Investment income percentage for 20	12 (line 10c, colur	mn (f) divided by lir	ne 13, column (f))		17	%
	Investment income percentage from					18	
19a	33 1/3% support tests - 2012. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	ifies as a publicly	supported organiz	ation	
b	33 1/3% support tests - 2011. If the						and
	line 18 is not more than 33 1/3%, che	_					
20	Private foundation. If the organization						
23202	23 12-04-12				Sci	nedule A (Form 99	0 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 PUBLIC POLICY RESEARCH	86-0597661	Page 4
Part IV Supplemental Information. Complete this part to provide the explanations required by Pa	art II, line 10; Part II, line 17a	or 17b;
and Part III, line 12. Also complete this part for any additional information. (See instructions).		
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
SCREDULE A, FART II, DINE IU, EXPLANATION FOR OTHER INCOME:		
A===== ===============================		
OTHER INCOME	<u>.</u>	
2010 AMOUNT: \$ 717.		
2011 AMOUNT: \$ 3,169.		
2012 AMOUNT: \$ 7,168.		
		
		
		·——-
		-
		
		
•		
		
1		
		
		
		
	•	

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

► See separate instructions.

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.

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.

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

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), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Nar	ne of organization BARRY GOLD	WATER INSTITUTE FOR		En	nployer identification number
	PUBLIC POI	ICY RESEARCH			86-0597661
P	art I-A Complete if the or	ganization is exempt und	ler section 501(c)	or is a section 527	organization.
2	Provide a description of the organic Political expenditures Volunteer hours			·	
Pa	irt I-B Complete if the or	ganization is exempt und	ler section 501(c)	(3).	·
	Enter the amount of any excise tax				
	Enter the amount of any excise tax				
	If the organization incurred a section				
					Yes No
De	olf "Yes," describe in Part IV. Int I-C Complete if the or	nanization is exempt und	er section 501(c)	except section 50	1(c)(3)
	Enter the amount directly expende	~			
	Enter the amount of the filing organ				Ψ
~	exempt function activities		_		· \$
3	Total exempt function expenditure				
	line 17b				·\$
	Did the filing organization file Form	1 1120-POL for this year?			Yes No
5	Enter the names, addresses and e made payments. For each organiza contributions received that were p political action committee (PAC). If	ation listed, enter the amount pai romptly and directly delivered to	d from the filing organi a separate political org	zation's funds. Also enter ganization, such as a sepa	the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fron filing organization's funds. If none, enter-	contributions received and

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

Schedule C (Form 990 or 990-EZ) 2012

232041 01-07-13

Schedule C (Form 990 or 990-EZ) 2012

248,202.

5.771.

 Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

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

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? d Mailings to members, legislators, or the public? d Direct contact with legislators, or the public? d Direct contact with legislators, or the public? d Direct contact with legislators, onventions, speeches, lectures, or any similar means? d Direct contact with legislators, seminars, conventions, speeches, lectures, or any similar means? d Direct activities? J Total. Add lines 1 c through 1 i a Direct activities in line 1 causes the organization to be not described in section 501(c)(3)? d If the filing organization and the around of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? a If III.A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). The filing organization make only in-house lobbying expenditures of \$2,000 or less? 2 Dot the organization make only in-house lobbying and political expenditures from the prior year? 3 Did the organization make only in-house lobbying and political expenditures from the prior year? 1 Dues, assessments and similar amounts from members 2 Dot management in a proposal i	1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1§? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 cf if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Ves were substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 Did the organization make only inhouse lobbying expenditures from the prior year? 3 Did the organization agries to carry over to bobbying and political expenditures from the prior year? 1 Dues, assessments and similar amounts from members 5 Dit (c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No." OR (b) Part III-A, line answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures from the prior year? 2 Description of the section 527(f) tax was paid). 3 Aggregate amount rep	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: 2 Volunteers? 4 Wellings to management (include compensation in expenses reported on lines 1c through 1i)? 5 Media advertisements? 6 Media advertisements? 6 Media advertisements? 7 Grants to other organizations for lobbying purposes? 9 Direct contact with legislators, their staffs, government officials, or a legislative body? 1 Fallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 1 Other activities? 1 Total. Add lines 1c through 1i 2 to If 'Yes," enter the amount of any tax incurred under section 4912 2 of If 'Yes, enter the amount of any tax incurred under section 4912 3 of If the filing organization incurred a section 4912 tax, did in file Form 472 (for this year? 3 art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only inhouse lobbying appenditues of \$2,000 or less? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 Did the organization make only inhouse lobbying and political expenditures from the prior year? 3 art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line sanswered "Yes." Dues, assessments and similar amounts from members 5 occion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 occurrent year 2 b Carryover from last year 2 c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 if notices were sent and the amount o	1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Dut 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 c if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 ex, dif if lie Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Ye Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 3 Did the organization organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A answered "Yes." 1 Dues, assessments and similar amounts from members 5 Casciton 162(e) nondeductible lobbying and political expenditures from the prior year? 2 Section 162(e) nondeductible lobbying and political expenditures from the prior year? 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 Aggregate amount reported in section 6033(e)(1)(A) n		" response to lines 1a through 1i below, provide in Part IV a detailed description	(a	1	ļ <u>(</u>	b)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? l Other activities? l Total. Add lines 1c through 1i 22 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 c If the filing organization incurred a section 4912 tax, did if file Form 4720 for this year? orart III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Diet the organization agree to carry over lobbying and political expenditures from the prior year? 1 Dues, assessments and similar amounts from members 5 Occurrent year 2 Description 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 503(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)	local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? l Other activities? l Total. Add lines 1c through 1i label 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 c If 'Yes,' enter the amount of any tax incurred under section 4912 d If the filing organization incurred a section 4912 tax, did if tile Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? l Did the organization argree to carry over lobbying expenditures of \$2,000 or less? l Did the organization make only inhouse lobbying expenditures of \$2,000 or less? l Did the organization agree to carry over lobbying and political expenditures from the prior year? l Dues, assessments and similar amounts from members Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Dear III-B Complete if the organization is exempt under section 162(e) dues Aggregate amount reported in s	local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. 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SUVI SUNDIEMENTALINTOFMATION				Tavable			5		
		Int iv Supplemental Information							
nplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 1; Part II-B, line 4; Part II-C, line 5; Part II-A (affiliated group list); Part II-A, line 1; Part II-B, line 4; Part II-C, line 5; Part II-A (affiliated group list); Part II-A, line 1; Part II-B, line 4; Part II-C, line 5; Part II-A (affiliated group list); Part II-A, line 1; Part II-B, line 4; Part II-C, line 5; Part II-A (affiliated group list); Part II-A, line 1; Part II-B, line 4; Part II-C, line 5; Part II-A (affiliated group list); Part II-A, line 1; Part II-B, line 4; Part II-C, line 5; Part II-A (affiliated group list); Part II-A, line 1; Part II-B, line 4; Part II-A, line 1; Part II-A, line 1					Sunnlemental Information				

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. ➤ See separate instructions. 2012
Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. Inspection

Name of the organization BARRY GOLDWATER INSTITUTE FOR Employer identification number 900. ► See separate instructions. Inspection

Employer identification number 86-0597661

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	panization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e		istorically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			J _a J
C	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel		
	year▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) abov		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furthera	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statemen	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pu	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		> \$

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

Schedule D (Form 990) 2012

1.717.580.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

19321001 134713 0825AN

232053 12-10-12

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) 2012

	dule D (Form 990) 2012 PUBLIC POLICY RESEARCH † XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	86-0597661 Return	Page 4
1	Total revenue, gains, and other support per audited financial statements	1	3,915,733,
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities]	
c	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.) 2d15,468,]	
е	Add lines 2a through 2d	2e_	85,467.
3	Subtract line 2e from line 1	3	3,830,266.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]	
b	Other (Describe in Part XIII.) 4b	[
C	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3 830 266.
Pa	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
1	Total expenses and losses per audited financial statements	1	3,479,426,
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
þ	Prior year adjustments 2b		
C	Other losses		
d	Other (Describe in Part XIII.)	1	
e	Add lines 2a through 2d	2e	15,468.
3	Subtract line 2e from line 1	3	3,463,958,
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,463,958.
	t XIII Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1		V, line 4; Part
X, line	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional informat	on.	
PART	V. LINE 4: THE ENDOWMENT FUNDS ARE USED TO SUPPORT THE DOROTHY D.		
AND	JOSEPH A, MOLLER CENTER FOR CONSTITUTIONAL GOVERNMENT WHICH STUDIES A		
VARI	ETY OF ISSUES INCLUDING PROPERTY RIGHTS, CAMPAIGN FINANCE REGULATION,		
REGU	LATORY BODIES, LEGISLATIVE TERMS, BALANCE OF POWER AMONG LEVELS OF		
GOVE	RNMENT, PROCESSES OF JUDICIAL APPOINTMENT AND STATE SOVEREIGNTY AND		
TWO	FELLOWSHIPS THAT GIVE EXCEPTIONAL STUDENTS THE OPPORTUNITY TO SPEND A		
SEME	STER WORKING ON ECONOMIC POLICY AT THE GOLDWATER INSTITUTE AND TO BE		
GROO	MED FOR A LEADERSHIP ROLE IN THE ONGOING CONTEST FOR FREEDOM.	Schedule D /E	orm 990) 2012

Schedule D (Form 990) 2012 PUBLIC POLICY RESEARCH	86-0597661	Page 5
Part XIII Supplemental Information (continued)		
PART X, LINE 2: THE INSTITUTE EVALUATES ITS UNCERTAIN TAX POSITIONS,	- 	
IF ANY, ON A CONTINUAL BASIS THROUGH REVIEW OF ITS POLICIES AND		}
PROCEDURES, REVIEW OF ITS REGULAR TAX FILINGS, AND DISCUSSIONS WITH		·
OUTSIDE EXPERTS, AT DECEMBER 31, 2012, THE INSTITUTE DID NOT HAVE ANY		
UNCERTAIN TAX POSITIONS.	· 	. <u></u>
		
PART XI LINE 2D - OTHER ADJUSTMENTS:		
EXPENSES FOR FUNDRAISING EVENT INCLUDED IN FUNCTIONAL		
EXPENSE: 15,468.		_
PART XII LINE 2D - OTHER ADJUSTMENTS:		
		-
EXPENSES FOR FUNDRAISING EVENT INCLUDED IN FUNCTIONAL		 -
EXPENSE: 15.468.		
	ı	
		·· ·
	· · · · · · · · · · · · · · · · · · ·	
		
		
	 	

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,

OMB No. 1545-0047

Internal Revenue Service	or if t	he organization entered more Attach to Form 990 <u>or Form 9</u>	e than \$15, 190-EZ. ▶	000 o See s	n Form 990-EZ, line eparate instruction	9 6a. s.	Inspection
Name of the organization		ATER INSTITUTE FOR	<u> </u>		<u> </u>		entification number
-		CY RESEARCH				86-0597661	
Part I Fundraising required to cor	Activities.	Complete if the organization a	nswered "\	es" to	o Form 990, Part IV,		
		ed funds through any of the fo	llowing acti	vities.	Check all that apply		
a Mail solicitation	-	· · —	_		overnment grants		
b Internet and em	ail solicitations	f 🔲 So	licitation of	gove	mment grants		
c Phone solicitation	ons	ig 🔲 Sp	ecial fundr	aising	events		
d In-person solicit	ations						
		r oral agreement with any indiv					—
		art VII) or entity in connection w					
compensated at least	- '	viduals or entities (fundraisers) organization.	pursuant ti	agre	ements under which	the fundraiser is to	De
			(iii)	Did alser		(v) Amount paid	(vi) Amount paid
(i) Name and address of or entity (fundrais		(ii) Activity	fundi have c	auser ustody itrol of	(iv) Gross receipts from activity	to (or retained by)	to (or retained by)
· or they fortunal			contrib	utions?	i i om aosivity	listed in col. (i)	òrganization
			Yes	No			
			_				
				ļ			
			_				
							
Total				•			
		n is registered or licensed to so		utions	s or has been notified	d it is exempt from r	egistration
			· · · · · · · · · · · · · · · · · · ·				
							· · · · · · · · · · · · · · · · · · ·
							
LHA Paperwork Reduction	n Act Notice, s	ee the Instructions for Form	990 or 990	EZ.		Schedule G (For	m 990 or 990-EZ) 2012

	·	of fundraising event contributions and gr				pts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			ANNUAL DINNER	JOHN STOSSEL EVENT	_ 	col. (c))
<u>o</u>			(event type)	(event type)	(total number)	- Con (C)/
Revenue			}			
훓	1	Gross receipts	394,897.	9,625.		404,522,
		Local Castributions	240 270	2 504		315 003
	2	Less: Contributions	312,379.	2,624.		315,003,
	3	Gross income (line 1 minus line 2)	82,518,	7,001.		89,519
	Ť					
	4	Cash prizes				
			1)
	5	Noncash prizes				
Direct Expenses						
Ģ.	6	Rent/facility costs		 		
Ü	_	Cond and houseween				
jec	7	Food and beverages	75,786,	7,001,		82,787.
	8	Entertainment		5,000.		5,000.
	9	Other direct expenses		3,467.		3,467
	10	Direct expense summary. Add lines 4 through				(91,254)
	11					<1.735.
P	art I	II Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or re	ported more than	<u></u>
<u> </u>		\$15,000 on Form 990-EZ, ine 6a.				
_			(a) Pingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other garring	col. (a) through col. (c))
<u>8</u>						
<u> </u>	1	Gross revenue				
es	2	Cash prizes				
Direct Expenses	_					
꿃	3	Noncash prizes	<u> </u>			
ᇴ		Don't Manifely and to				
ă	4	Rent/facility costs				
	_	Other direct expenses				}
	5	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	•					
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		•	(
		, , ,	(-)			
	8	Net gaming income summary. Combine line 1	, column d, and line 7	·····		
						
9	Ent	ter the state(s) in which the organization opera	tes gaming activities:			
а	ı Is t	the organization licensed to operate gaming ac	tivities in each of these s	states?		Yes No
b	lf "	No," explain:	<u> </u>			
	_		 .			
		ere any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax ye	ear?	. L Yes L No
b) If "`	Yes," explain:				. -
						
	_					
2320	82 01	1-07-13			Schedule G (Foi	rm 990 or 990-EZ) 2012

Sch	edule G (Form 990 or 990-EZ) 2012 PUBLIC POLICY RESEARCH 86-059	7661		Page 3
	Does the organization operate gaming activities with nonmembers?	=	Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility	13a	<u> </u>	%
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🗆	Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of source nunrided .			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
- 4	retain the state gaming license?		Yes	☐ No
ь	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			
Pa	Supplemental Information. Complete this part to provide the explanations 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 complete this part to provide any additional information			
_			_	
	——————————————————————————————————————			
				`

32

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

2012

Open to Public Inspection

Employer identification number

Name of the organization

Department of the Treasury

Internal Revenue Service

BARRY GOLDWATER INSTITUTE FOR

PUBLIC POLICY RESEARCH

______86-0597661

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 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 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, 2 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant x Approval by the board or compensation committee x Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 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) and 501(c)(4) 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: a The organization? b Any related organization? X 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 The organization? 6a b Any related organization? x If "Yes" to line 6a or 6b, describe in Part III. 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 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 in Part III X 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2012

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.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns		
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benents	(B)(i)-(D)	reported as deferred in prior Form 990-	
(1) DARCY OLSEN	(i)	272,273,	0.	0.	2,500.	5,439.	280,212.	0	
PRESIDENT/CEO	(ii)	0.	0.	0.	0.	0.	0.	0	
(2) CLINT BOLICK	(i)	275,423.	0.	0.	2,500.	8,896.	286 819	0	
DIRECTOR OF LITIGATION	(ii)	0.	0.	0.	0.	0.	0.	0	
	(i)								
	(ii)						.,,,,,		
-	(i)								
	(ii)								
	(i)								
	(ii)			, -					
	(i)								
	(ii)								
	(i)								
	(ii)								
	(1)								
	(ii)								
	(i)			-					
	(ii)								
	(i)					···			
	(ii)			· · · · · · · · · · · · · · · · · · ·		·			
· · · · · · · · · · · · · · · · · · ·	(i)								
	(ii)			-			<u> </u>	· · - · · · · · · · · · · · · · · ·	
	(i)							-	
	(ii)								
.	(i)			· · · · · · · · · · · · · · · · · · ·					
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)						<u> </u>		
	(i)	-	-	. <u>. </u>			-		
	(ii)								

SCHEDULE L. (Form 990 or 990-EZ)

Transactions With Interested Persons

➤ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

2012

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

BARRY GOLDWATER INSTITUTE FOR

PUBLIC POLICY RESEARCH

Employer identification number

86-0597661

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (b) Relationship h) Approved (a) Name of (d) Loan to or (i) Written (c) Purpose (e) Original (g) ln (f) Balance due by board or with from the interested person of loan principal amount default? agreement? committee? organization organization? То From Yes Yes Yes No X 1,200,000 1,950,000 X SEE PART SHAMROCK FARMS

Part III Grants or Assistance Benefiting Interested Persons.

_	Complete if the organization answered "Yes" on Form 990, Part IV, line 27.						
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance		
_							
_							
_							
_							
					,		
٠							

▶ \$

950,000

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

Schedule L (Form 990 or 990-EZ) 2012

SEE PART V FOR CONTINUATIONS

<u>Total</u>

Schedule L (Form 990 or 990-EZ) 2012 PUBLIC F	POLICY RESEARCH		<u>86-0597661</u>		Page 2
Part IV Business Transactions Invol		h 00-			
(a) Name of interested person	d "Yes" on Form 990, Part IV, line 28a, 28 (b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		aring of zation's
				Yes	No.
<u> </u>	 				
	 				
		 -			-
Dart V I O		<u> </u>	<u> </u>	<u> </u>	
Part V Supplemental Information	nal information for responses to questions	on Schedule I. (see	instructions)		
Complete this part to provide addition	ial information for responses to questions	ON OCHEGOIC E (Sec	instructions).	·	
SCHEDULE L, PART II, LOANS TO AND FROM	INTERESTED PERSONS:				
(A) NAME OF PERSON: SHAMROCK FARMS CO.		_			
(C) PURPOSE OF LOAN: SEE PART V SUPPLE	MENTAL INFORMATION				
THE INSTITUTE HAS ELECTED TO INVEST IT	S EXCESS CASH IN TWO PROMISSOR				
NOTES WITH A PRIVATELY HELD CORPORATION	N CONTROLLED BY A BOARD MEMBER				
THESE REVOLVING NOTES PROVIDE THE INST	TITUTE WITH THE ABILITY TO REOUR	IST			
PAYMENTS OF THE PRINCIPAL BALANCES PRI	OR TO THEIR MATURITY DATES. THE	<u> </u>			
INSTITUTE MAY REINVEST FUNDS INTO THE	NOTES UP TO THE MAXIMUM AMOUNT				
MINIMAL MAINTENANT TONDO INTO AME	101111				
PROVIDED IN THE NOTE AGREEMENTS.					
					
ON JANUARY 1, 2002, THE INSTITUTE OBTA	INED AN UNSECURED REVOLVING				
DOWLGGODY NOTE TROY & DRIVETING WILLIAM	CONDODATION COMPOSITED BY A POL	, pp			
PROMISSORY NOTE FROM A PRIVATELY HELD	CORPORATION CONTROLLED BY A BOX	AKD			
MEMBER FOR THE SUM OF \$200,000. THE NO	TE BEARS INTEREST AT 10% PER			<u> </u>	
ANNUM UNTIL PAID, TERMS OF THE NOTE CA	LL FOR INTEREST TO BE PAID TO 1	YHE			
INSTITUTE MONTHLY, DURING THE YEAR, TH	E MATURITY OF THE NOTE WAS				
•					
EXTENDED FROM DECEMBER 31, 2011 TO DEC	EMBER 31, 2015.				
					_
NOTES BUT THE PROPERTY OF THE					
JURING THE YEAR ENDED DECEMBER 31, 200	5. THE INSTITUTE OBTAINED ANOTH	IER			
UNSECURED REVOLVING PROMISSORY NOTE FR					

Schedule L (Form 990 or 990-EZ) PUBLIC POLICY RESEARCH	86-0597661	Page 2
Part V Supplemental Information		
Complete this part to provide additional information for responses to questions on Schedule L (see ins	structions).	
		· ·
FOR THE PURPOSE OF INVESTING THE INSTITUTE'S EXCESS CASH WITH A MAXIMUM		
AMOUNT OF \$1,000,000, DURING 2011, THE MAXIMUM AMOUNT WAS INCREASED TO		
\$1,750,000 AND THE MATURITY DATE WAS EXTENDED FROM DECEMBER 31, 2011 TO		
DECEMBER 31, 2015, THE NOTE BEARS INTEREST AT THE RATE CHARGED BY FARM		
CREDIT SERVICES SOUTHWEST (2,25% AT DECEMBER 31, 2012), THE TERMS OF		
CREDIT SERVICES SOUTHWEST (2,23% AT DECEMBER 31, 2012), THE TERMS OF		
THE NOTE CALL FOR INTEREST TO BE PAID TO THE INSTITUTE MONTHLY,		
		
	· · · · - · · · · · · · · · · · · · · ·	· ·
		
		
		
	•	

SCHEDULE M. (Form 990)

Noncash Contributions

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

Attach to Form 990.

ZU IZ

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

BARRY GOLDWATER INSTITUTE FOR

Employer identification number 86-0597661

	PUBLIC POLICY RESEARCH					97661		
Pa	rt I Types of Property							
<u> </u>		(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 d noncash contrib	etermini		ts
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	5	428,335,	STOCK QUOTE			
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	x	25	5.732.	SALES PRICE			
19	Food inventory			3,702,	DINDED TIMES			
20	Drugs and medical supplies						-	
21	Taxidermy							
22	Historical artifacts							
_								
23	Scientific specimens			•				
24	Archeological artifacts		1	4.411.	SALES PRICE			
25	Other (AIRFARE)	<u>X</u>	<u> </u>	3,411,	SALES PRICE			
26	Other ()							
27	Other ()	-						
28	Other ()				<u> </u>			
29	Number of Forms 8283 received by the organi							
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement	-		<u> </u>	
				. I De II Beer 400 II-	- 4 75 4 5 1-1 6		Yes	NO
30a	During the year, did the organization receive b							
	at least three years from the date of the initial							
						30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance					31	X	<u> </u>
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell noncash				1
	contributions?					32a	X	
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) 1	or a type of prope	rty for which column (a) is ch	ecked,			
	describe in Part II.					<u> </u>		

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

Schedule M (Form 990) (2012)

Schedule M (Form 990) (2012) PUBLIC POLICY RESEARCH	86-0597661	Page 2
Supplemental Information. Complete this part to provide the information required by the organization is reporting in Part I, column (b), the number of contributions, the number of Also complete this part for any additional information.	y Part I, lines 30b, 32b, and 33, items received, or a combination	and whether on of both.
SCHEDULE M, LINE 32B: THE INSTITUTE USES A COMPANY TO PROVIDE AUCTION		
ITEMS AT THEIR ANNUAL DINNER (COLLECTIBLES, TRIPS, ETC.).		
•		
		
		
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1	•	

SCHEDULE O ,

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization BARR	Y GOLDWATER INSTITUTE FOR	Employer identification number
PUBL	IC POLICY RESEARCH	86-0597661
FORM 990 PART III LINE 1	DESCRIPTION OF ORGANIZATION MISSION:	
POLICIES THAT SUSTAIN AND RE	STORE ECONOMIC LIBERTY, EDUCATIONAL	
FREEDOM, PERSONAL RESPONSIBI	LITY AND CONSTITUTIONAL LIMITS ON	
GOVERNMENT POWER CONSISTENT	WITH THE FOUNDING PRINCIPLES OF OUR	
CONSTITUTIONAL REPUBLIC. WHE	N GOVERNMENT OVERSTEPS ITS PROPER BOUNDS.	
THE GOLDWATER INSTITUTE USES	PUBLIC INTEREST LITIGATION TO ENFORCE	
INDIVIDUAL RIGHTS AND CONSTR	AINTS ON GOVERNMENT POWER GUARANTEED BY OUR	
STATE AND FEDERAL CONSTITUTI	ONS.	
FORM 990, PART III, LINE 4B		
CASE UPDATE		
BOICE V, AUNE		
THE GOLDWATER INSTITUTE REPR	ESENTS SMALL BUSINESS OWNER LAUREN BOICE.	
WHO CONNECTS THE HOMEBOUND E	LDERLY, SICK, AND TERMINALLY ILL WITH	
INDEPENDENT, BOARD-LICENSED	COSMETOLOGISTS WHO CAN PERFORM SALON	
SERVICES RIGHT IN THE CLIENT	S' HOMES AND ASSISTED-LIVING FACILITIES,	
ALTHOUGH LAUREN NEITHER PRAC	TICES COSMETOLOGY NOR RUNS A COSMETOLOGY	
BUSINESS (SHE MERELY SERVES	AS A MIDDLEMAN WHO BOOKS APPOINTMENTS). THE	
BOARD OF COSMETOLOGY SUBJECT	ED LAUREN TO A HOST OF COSMETOLOGY	
REGULATIONS, INCLUDING FORCE	NG HER TO OPEN A PHYSICAL SALON THOUGH SHE	
WILL NEVER USE IT BECAUSE HE	R CLIENTS ARE HOMEBOUND. THE INSTITUTE	
DEFENDED LAUREN'S CONSTITUTI	ONAL RIGHT TO BARN AN HONEST LIVING FREE	
FROM ARBITRARY GOVERNMENT IN	TERFERENCE AND SUCCESSFULLY DEFENDED	
AGAINST A MOTION TO DISMISS	THE LAWSUIT, THE CASE WAS SETTLED	
SUCCESSFULLY, WITH THE BOARD	AGREEING TO CEASE REGULATING LAUREN'S	
BUSINESS AND BUSINESSES LIKE	HERS. THE INSTITUTE DID NOT SEEK	
LHA For Paperwork Reduction Act 232211 01-04-13	Notice, see the instructions for Form 990 or 990-EZ.	Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or	990-EZ) (2012)	Page 2
Name of the organization	BARRY GOLDWATER INSTITUTE FOR PUBLIC POLICY RESEARCH	Employer identification number 86-0597661
ATTORNEY'S FEES.		
CHEATHAM V. GORDON	·	-
ON BEHALF OF TAXPAYE	RS. THE GOLDWATER INSTITUTE SUED THE CITY OF	
PHOENIX TO ENJOIN IT	S CONTRACT WITH THE PHOENIX LAW ENFORCEMENT	
ASSOCIATION. THE CO	NTRACT PERMITS SIX OFFICERS TO WORK FOR THE UNION	
FULL TIME WITHOUT LO	SS OF PAY, IT PERMITS MANY OTHER OFFICERS TO DO SO	
ON A PART-TIME BASIS	. THE INSTITUTE'S LAWSUIT SEEKS TO ENJOIN THIS	
PRACTICE ON THE THEO	RY THAT IT IS A GIFT TO A PRIVATE ASSOCIATION, IN	
VIOLATION OF THE ARI	ZONA CONSTITUTION'S GIFT CLAUSE, THE INSTITUTE HAS	
ACHIEVED A PRELIMINA	RY INJUNCTION ON THE PRACTICE OF RELEASE TIME, THAT	
RULING IS BEING APPE	ALED AS THE INSTITUTE AWAITS A FINAL RULING ON THE	
MERITS IN THE TRIAL	COURT, NO ATTORNEY'S FEES HAVE BEEN AWARDED SO FAR	
(BUT THEY WERE REQUE	STED IN THE COMPLAINT).	
COONS V. GEITHNER		
ON BEHALF OF AN ARIZ	ONA TAXPAYER AND DOCTOR THE GOLDWATER INSTITUTE	
FILED THIS LAWSUIT C	HALLENGING THE PATIENT PROTECTION AND AFFORDABLE	
CARE ACT (PPACA) FOR	EXCEEDING THE POWERS OF CONGRESS, VIOLATING	
INDIVIDUAL RIGHTS, I	NTERFERING WITH THE AUTHORITY OF STATES, AND	
VIOLATING THE SEPARA	TION OF POWERS DOCTRINE BY SETTING UP A NEW	
BUREAUCRACY WITHOUT	MEANINGFUL CONGRESSIONAL OVERSIGHT OR JUDICIAL	
REVIEW (THE INDEPEND	ENT PAYMENT ADVISORY BOARD). IN 2011, THE CASE WAS	
FULLY BRIEFED IN THE	TRIAL COURT BUT STAYED PENDING THE OUTCOME OF THE	
UNITED STATES SUPREM	E COURT IN NFIB V. SEBELIUS. THE TRIAL COURT	
DISMISSED THE REMAIN	ING CLAIMS, AND THE CASE IS CURRENTLY ON APPEAL IN	
THE NINTH CIRCUIT,	NO ATTORNEY'S FEES HAVE BEEN AWARDED SO FAR (BUT	
THEY WERE REQUESTED 232212 01-04-13	IN THE COMPLAINT).	Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 9	990-EZ) (2012)	Page 2
Name of the organization	BARRY GOLDWATER INSTITUTE FOR PUBLIC POLICY RESEARCH	Employer identification number 86-0597661
COONS V. HALLMAN		
ON BEHALF OF TAXPAYE	RS, THE GOLDWATER INSTITUTE SUED THE CITY OF TEMPE	
CHALLENGING ITS DEAL	WITH SEA LIFE AQUARIUM AS A VIOLATION OF THE	
ARIZONA CONSTITUTION	'S GIFT CLAUSE AND STATUTES, THE CASE SOUGHT TO	· · · · · · · · · · · · · · · · · · ·
ELIMINATE CORPORATE	WELFARE, FOSTER AN EQUITABLE ARIZONA BUSINESS	
ENVIRONMENT THAT DOE	S NOT FAVOR THE POLITICALLY CONNECTED OVER SMALL	
BUSINESS OWNERS, AND	ENSURE TRANSPARENCY IN GOVERNMENT SPENDING, AFTER	
FILING THE LAWSUIT,	THE CITY AMENDED ITS DEAL WITH SEA LIFE AQUARIUM TO	
BRING IT IN LINE WIT	H THE CONSTITUTE AND STATUTES. THE TRIAL COURT	
AWARDED THE INSTITUT	E APPROXIMATELY \$40,000 IN ATTORNEY'S FEES FOR	
BEING THE CATALYST I	N THAT OUTCOME. THE FEE AWARD WAS REVERSED BY THE	
COURT OF APPEALS.		
FRIEDMAN V. CCUSD		· · · · · · · · · · · · · · · · · · ·
THE GOLDWATER INSTIT	UTE FILED A LAWSUIT ON BEHALF OF JAYNE FRIEDMAN AND	
RICHARD BAIL, RESIDE	NTS AND TAXPAYERS OF THE CAVE CREEK UNIFIED SCHOOL	
DISTRICT, TO STOP TH	E DISTRICT FROM USING BOND MONEY IN WAYS THE VOTERS	
DID NOT APPROVE. TH	E LAWSUIT SEEKS TO HOLD GOVERNMENTS ACCOUNTABLE TO	
VOTERS AND TAXPAYERS	BY ENFORCING THE CONTRACTS CLAUSES IN THE ARIZONA	
AND UNITED STATES CO	NSTITUTIONS AND THE SPECIAL LAWS CLAUSE IN THE	
ARIZONA CONSTITUTION	. THE INSTITUTE WAS SUCCESSFUL ON ALL CLAIMS IN	
THE TRIAL COURT, AND	THE RULING WAS AFFIRMED ON APPEAL. THE INSTITUTE	
WAS AWARDED ATTORNEY	'S FEES IN THE AMOUNT OF \$34,346.80,	
GOLDWATER V. GLENDAL	В	
THE GOLDWATER INSTIT	UTE SUED THE CITY OF GLENDALE TO ENFORCE PUBLIC	
RECORDS LAWS AND ENS	URE THE RESPONSIBLE USE OF TAXPAYER FUNDS AND	Schedule 0 (Form 990 or 990-F7) (2012)

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization BARRY GOLDWATER INSTITUTE FOR PUBLIC POLICY RESEARCH	Employer identification number 86-0597661
TRANSPARENCY IN GOVERNMENT. THE PARTIES REACHED A SETTLEMENT AGREEMENT	
BASED ON AN INITIAL COURT ORDER REQUIRING GLENDALE TO PRODUCE THE	
REQUESTED DOCUMENTS. THE INSTITUTE AGREED TO DISMISS THE ACTION	·
BECAUSE IT OBTAINED THE PUBLIC RECORDS IT REQUESTED. THE CITY	
COMPENSATED THE INSTITUTE \$13,000 IN ATTORNEY'S FEES,	
KORWIN V. COTTON	
THE GOLDWATER INSTITUTE FILED A LAWSUIT ON BEHALF OF ALAN KORWIN AND	
HIS BUSINESS TRAINMEAZ, LLC, TO CHALLENGE THE PHOENIX PUBLIC TRANSIT	
DEPARTMENT'S DECISION TO REMOVE POSTERS AT 50 BUS SHELTERS ADVERTISING	
THE COMPANY'S WEBSITE. THE LAWSUIT SEEKS TO VINDICATE ALAN'S RIGHTS TO	
FREE SPEECH, DUE PROCESS, AND EQUAL PROTECTION UNDER THE ARIZONA AND	
UNITED STATES CONSTITUTIONS. THE INSTITUTE WAS UNSUCCESSFUL IN THE	
TRIAL COURT, AND THE CASE IS CURRENTLY ON APPEAL, NO ATTORNEY'S FEES	
HAVE BEEN AWARDED SO FAR (BUT THEY WERE REQUESTED IN THE COMPLAINT).	
NIEHAUS V, HUPPENTHAL	
THE GOLDWATER INSTITUTE HAS JOINED THE STATE OF ARIZONA IN DEFENDING	
AGAINST A LAWSUIT THAT HAS BEEN BROUGHT TO CHALLENGE THE EMPOWERMENT	
SCHOLARSHIP ACCOUNT PROGRAM, THIS PROGRAM ALLOWS PARENTS OF	
SPECIAL-NEEDS CHILDREN TO WITHDRAW THEIR CHILDREN FROM PUBLIC SCHOOLS	
AND USE A PORTION OF THE MONEY THAT WOULD HAVE GONE TO THE LOCAL	
DISTRICT TO DESIGN THEIR OWN EDUCATIONAL PLAN. THE INSTITUTE ARGUES	
THAT EVEN THOUGH PARENTS MAY SPEND THE MONEY ON PRIVATE AND RELIGIOUS	
SCHOOLING, THE GOVERNMENT IS SUFFICIENTLY INSULATED FROM THE DECISION	
SO AS TO NOT CONSTITUTE A GOVERNMENT EXPENDITURE FOR RELIGIOUS	
SCHOOLING, THE STATE (AND THE INSTITUTE) PREVAILED IN THE TRIAL COURT,	
AND THE CASE IS CURRENTLY ON APPEAL. THE INSTITUTE DOES NOT SEEK 232212 Schee	dule O (Form 990 or 990-EZ) (2012)

Schedule Q (Form 990 or 9		Page 2
Name of the organization	BARRY GOLDWATER INSTITUTE FOR PUBLIC POLICY RESEARCH	Employer identification number 86-0597661
ATTORNEY'S FEES.		
NLRB V. STATE		
IN 2010, ARIZONA VOT	ERS APPROVED AN AMENDMENT TO THE STATE CONSTITUTION	
TO EXPAND PROTECTION	FOR A WORKER'S RIGHT TO VOTE BY SECRET BALLOT IF	
ASKED TO JOIN A UNIO	N. THE NATIONAL LABOR RELATIONS BOARD SUED ARIZONA	
TO PREVENT ENFORCEME	NT OF THE AMENDMENT. THE GOVERNMENT ARGUES THAT	
THE NLRB'S AUTHORITY	OVER THIS AREA PREEMPTS STATE ACTION. THE	
GOLDWATER INSTITUTE	HAS JOINED THE STATE IN DEFENDING THE LAWSUIT ON	
BEHALF OF INDIVIDUAL	WORKERS WHO WISH TO HAVE THE RIGHT TO A SECRET	
BALLOT IN THE EVENT	THE DECISION OF WHETHER OR NOT TO UNIONIZE ARISES	
IN THEIR WORKPLACES.	THE INSTITUTE WAS SUCCESSFUL IN THE TRIAL COURT	
AND THE GOVERNMENT D	ID NOT APPEAL. THE INSTITUTE DID NOT SEEK	
ATTORNEY'S FEES.		
NTMP V. LANG		
ON BEHALF OF TAXPAYE	R BALLOT MEASURE COMMITTEE "NO TAXPAYER MONEY FOR	
POLITICIANS, THE GO	LDWATER INSTITUTE FILED A LAWSUIT TO ENJOIN THE	
ARIZONA CITIZENS CLE	AN ELECTIONS COMMISSION'S ACTS OF SELF PROMOTION	
WHICH VIOLATE STATE	STATUTE, THE LAWSUIT ASKED THE COURT TO DECLARE	
THAT THE COMMISSION	ILLEGALLY EXPENDED PUBLIC FUNDS AND ATTEMPTED TO	
INFLUENCE THE OUTCOM	E OF AN ELECTION, ENJOIN THE COMMISSION FROM	
CONTINUING THE ILLEG.	AL CONDUCT, ORDER REPAYMENT OF THE ILLEGAL PUBLIC	
EXPENDITURES, AND AS	SESS FINES AND PENALTIES PURSUANT TO STATUTE, ON	
BEHALF OF TAXPAYERS	THE INSTITUTE SOUGHT TO ELIMINATE ILLEGAL SPENDING	
AND GUARANTEE FAIR E	LECTIONS, THE INSTITUTE WAS UNSUCCESSFUL IN THIS	
	COURT AND FILED AN APPEAL. NEW LEGISLATION	
	THE ACTIVITIES CHALLENGED BY THE INSTITUTE IN ITS	
232212 01-04-13		Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 990-EZ) (2012)		Page 2
Name of the organization BARRY GOLDWATER INSTITUT	E FOR	Employer identification number
PUBLIC POLICY RESEARCH		86~0597661
LAWSUIT, AND THE APPEAL WAS WITHDRAWN. NO AT	TORNEY'S FEES WERE	
AWARDED.		
TOMBSTONE V. UNITED STATES		
THE GOLDWATER INSTITUTE IS REPRESENTING THE C	ITY OF TOMBSTONE IN A	
LAWSUIT AGAINST THE U.S. FOREST SERVICE IN A	FIGHT OVER WATER RIGHTS	
AND RIGHTS OF WAY TO ACCESS THOSE RIGHTS, CI	TING THE WILDERNESS ACT	
THE FOREST SERVICE IS REFUSING TO ALLOW THE C	ITY TO REPAIR ITS	
WATERLINES TO SPRINGS IT HAS OWNED FOR NEARLY	SEVENTY YEARS-AND WHICH	
DATE BACK TO THE 1880S, THIS REFUSAL IS THREE	ATENING RESIDENTS, PRIVATE	
PROPERTY AND PUBLIC SAFETY WITH THE RISK OF A	TOTAL LOSS OF FIRE	
PROTECTION BECAUSE THE SPRING WATER IS NEEDED	TO FILL RESERVES NEEDED	
FOR FIRE SUPPRESSION IN THE TOWN, ADDITIONAL	LY, THE REFUSAL THREATENS	,
PUBLIC HEALTH AND WELFARE BY FORCING RESIDENTS	S AND TOURISTS TO DRINK	
LOCAL WELL WATER THAT HAS HIGH LEVELS OF ARSE	NIC. THE INSTITUTE WAS	
UNSUCCESSFUL IN SEEKING A PRELIMINARY INJUNCT	ION AGAINST THE FOREST	
SERVICE TO ALLOW TOMBSTONE EMERGENCY ACCESS TO	O ITS SPRINGS, AND THE	
CASE IS CURRENTLY IN THE TRIAL COURT ON THE MI	ERITS, NO ATTORNEY'S FEES	
HAVE BEEN AWARDED SO FAR (BUT THEY WERE REQUES	STED IN THE COMPLAINT).	
VONG V. AUNE		
THE ARIZONA BOARD OF COSMETOLOGY BANNED THE US	SE OF SPA FISH AS A	
THERAPY TO REMOVE DEAD SKIN FROM A PERSON'S FI	EET, THE GOLDWATER	
INSTITUTE SUED THE BOARD ON BEHALF OF THE ONLY	Y KNOWN SALON IN ARIZONA	
USING THIS THERAPY, SEEKING TO ENFORCE CONSTITUTE	TUTIONAL LIMITS ON	
GOVERNMENT AUTHORITY AND PROTECT ENTREPRENEUR	IAL FREEDOM AFTER	···
SURVIVING A MOTION TO DISMISS IN THE COURT OF	APPEALS, THE TRIAL COURT	
RULED AGAINST THE INSTITUTE ON THE MERITS. TH	HE CASE IS ON APPEAL, AND	Schedule O (Form 990 or 990-EZ) (2012)
01-04-13		

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization BARRY GOLDWATER INSTITUTE FOR	Employer identification number
PUBLIC POLICY RESEARCH	86-0597661
NO ATTORNEY'S FEES HAVE BEEN REWARDED SO FAR (BUT THEY WERE REQUESTED	
NO INTOINING S PARS MANY DEEM NEWANDED SO I'M (BOT THEIR WARE NEW COLUMN	
IN THE COMPLAINT).	
	
FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERS OF THE BOARD OF	
D	
DIRECTORS ARE ALSO MEMBERS OF THE CORPORATION,	
FORM 990 PART VI SECTION A LINE 7A: NEW DIRECTORS ARE ELECTED BY THE	
TORM 770, FART VI, DECITOR A, DIRE TA: NEW DIRECTORS ARE EDUCIDE DI THE	
REMAINING BOARD OF DIRECTORS,	
FORM 990, PART VI, SECTION B, LINE 11: AN OUTSIDE ACCOUNTING FIRM PREPARES	
THE FORM 990 AND IT IS REVIEWED BY THE TREASURER, CFO, AND EXECUTIVE	
COMMITTEE PRIOR TO BEING PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW, THE	
TREASURER AND CFO ADDRESS ANY ISSUES RAISED BY THE BOARD BEFORE THE RETURN	
IS FILED WITH THE IRS.	
- TIME THE LAW.	
FORM 990 PART VI SECTION B. LINE 12C: IN CONNECTION WITH ANY ACTUAL OR	
	•
POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE	
EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO	
DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH	
DISCHOOL ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH	
GOVERNING BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR	
ARRANGEMENT. ANY DIRECTOR PRINCIPAL OFFICER OR MEMBER OF A COMMITTEE	
WITH GOVERNING BOARD DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT	
FINANCIAL INTEREST IS AN INTERESTED PERSON. AFTER DISCLOSURE OF THE	<u> </u>
<u> </u>	
FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH	
THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE	
MEETING WHILE THE DETERMINATION OF THE CONFLICT OF INTEREST IS DISCUSSED	
MESTING WILLIAM THE DESIGNATION OF THE CONFESC. OF INTEREST 15 DISCUSSED	
AND VOTED UPON, THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DISCUSS IF A 232212	O-b-1-1-0/F
01-04-13	Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 9	<u>190-EZ) (2012)</u>	Page 2
Name of the organization	BARRY GOLDWATER INSTITUTE FOR	Employer identification number
	PUBLIC POLICY RESEARCH	86-0597661
CONFLICT OF INTEREST	EXISTS.	
	ONFLICT OF INTEREST POLICY REQUIRES ANNUAL DISCLOSURE	
THE ORGANIZATION S C	ONFLICT OF INTEREST POLICY REQUIRES ANNUAL DISCLOSURE	
FROM ALL MEMBERS OF	THE BOARD OF DIRECTORS AND OFFICERS. A STATEMENT IS	
FILED BY EACH BOARD	MEMBER REQUIRING THE DISCLOSURE OF ANY CONFLICTS AND TO)
STATE THE RESOLUTION	OF THAT CONFLICT, IF ANY,	
FORM 990, PART VI, S	ECTION B, LINE 15: THE ORGANIZATION LOOKS AT THE FORM	
990 OF SIMILAR ORGAN	IZATIONS AND COMPARES COMPENSATION FOR THE CEO, KEY,	
AND HIGHLY COMPENSAT	ED EMPLOYEES. THIS INFORMATION IS PRESENTED TO THE	
EXECUTIVE COMMITTEE	ANNUALLY FOR REVIEW AND APPROVAL IN SETTING EXECUTIVE	
COMPENSATION, ALL CO	MPENSATION DECISIONS ARE DOCUMENTED IN THE BOARD	·
MINUTES.		
FORM 990, PART VI, L	INE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
AL, AZ, AR, CA, CO, CT, FL	HI, IL, KY, ME, MI, MN, MS, NJ, NM, NY, OR, PA, RI, SC, VA, WV, WI, AK	
GA, KS, MD, MA, NH, OH, OK	,UT,TN	
FORM 990 PART VI SI	ECTION C, LINE 19: THE FINANCIAL STATEMENTS ARE	
AVAILABLE TO THE PUB	LIC UPON REQUEST. THE ORGANIZATION DOES NOT MAKE ITS	
GOVERNING DOCUMENTS A	AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE	
PUBLIC.		·
	•	
· · · · · · · · · · · · · · · · · · ·		

SCHEDULE'R (Form 990)

Related Organizations and Unrelated Partnerships

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

OMB No. 1545-0047 2012

Open to Public Department of the Treasury ➤ Attach to Form 990. ► See separate instructions. Internal Revenue Service Inspection · Name of the organization BARRY GOLDWATER INSTITUTE FOR Employer identification number PUBLIC POLICY RESEARCH 86-0597661 Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part I (a) (b) (c) (d) (e) (f) Legal domicile (state or Name, address, and EIN (if applicable) Primary activity Total income End-of-year assets Direct controlling of disregarded entity foreign country) entity GOLDWATER INSTITUTE HOLDING COMPANY, LLC -86-1023067 500 E, CORONADO RD, PHOENIX, AZ 85004 REAL ESTATE ARIZONA 0 1,717,580.N/A Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt Part II organizations during the tax year.) (a) (b) (c) (d) (g) Section 512(b)(13) (e) (f) Name, address, and EIN Legal domicile (state or Primary activity **Exempt Code** Public charity Direct controlling controlled of related organization section status (if section entity foreign country) entity? 501(c)(3)) Yes No

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

Schedule R (Form 990) 2012

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	Direct controlling Predominant income Share of total Share of Dispression		hare of total Share of		Disproportion		(i) Code V-UBI amount in box 20 of Schedule	Gene	j) eral or aging ner?	(k) ' Percentage ownership
		country)		SECTIONS 2 (2-2) (4)			Yes	No_	K-1 (FORM 1065)	Yes	No		

Part IV Identification of Related Organization's Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to 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	(d) Direct controlling entity	(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		tion b)(13) rolled tity?	
		country)						Yes	No
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Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

	Consolete line 1 if any antity is listed in Ports II. III. or IV of the schodule		 -			Yes	No
	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. During the tax year, did the organization engage in any of the following transactions with organization.	nne or more re	lated organizations listed	in Parts II-IV?		163	NO
	Receipt of (i) interest (ii) annurties (iii) royalties or (iv) rent from a controlled entity				1a	<u> </u>	-
	Gift, grant, or capital contribution to related organization(s)				1b	†	
	Gift, grant, or capital contribution from related organization(s)				1c		
	Loans or loan guarantees to or for related organization(s)				1d	1	.
	Loans or loan guarantees by related organization(s)				1e		<u> </u>
-	Loans or loan guarantees by related organization(b)						
f	Dividends from related organization(s)	· · · · · · · · · · · · · · · · · · ·			1f		
g	Sale of assets to related organization(s)				1g		<u> </u>
	Purchase of assets from related organization(s)				1h		ļ
	Exchange of assets with related organization(s)				1i	<u> </u>	<u> </u>
j	Lease of facilities, equipment, or other assets to related organization(s)				1 <u>j</u>	<u> </u>	ļ
l.	Lease of facilities, equipment, or other assets from related organization(s)				1k	8	ľ
	I Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s)						
						 	\vdash
	•						
	Sharing of paid employees with related organization(s)				10		
	•			•	1.		
	Reimbursement paid to related organization(s) for expenses				1p	 	ļ
q	Reimbursement paid by related organization(s) for expenses				1q	╁	-
	Other transfer of cash or property to related organization(s)				<u>1r</u>		┼──
	Other transfer of cash or property from related organization(s)				<u> 1s</u>		1
2	If the answer to any of the above is "Yes," see the instructions for information on who mu						-
		(b) ansaction ype (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved		
(1)			 				
' 0\							
<u>(2)</u>							
(3)							
<u>-,</u>						•	
(4)							
	•	,					
(5)					,		
(e)							

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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)	(b)	(c)	(d)	(e))	(f)	(g)	(h)	(i)	ſ	j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are a partners 501 (c) orgs.	ill s sec.)(3)	Share of total	Share of end-of-year	Disp	ropor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene) man	ral or aging	Percentage
<u> </u>		country)	under section 512-514)	Yes	No	income	assets	Yes	No	of Schedule K-1 (Form 1065)	Yes	NO.	O 111.0101#p
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BARRY GOLDWATER INSTITUTE FOR

Schedule F	(Form 990) 2012.	PUBLIC POLICY RESEARCH	86-0597661	Page 5
Part VII	Supplemental Infor	mation		
1	Complete this part to pro	vide additional information for responses to questions on Schedule R (see instru	ictions).	
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Form 8868 (Rev. 1-2013)	·				Page 2
If you are filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II and check thi	s box		▶ 🗓
Note. Only complete Part II if you have already been granted a	an automatic	3-month extension on a previously f	iled Form	886	8.
• If you are filing for an Automatic 3-Month Extension, com	plete only P	art I (on page 1).			
Part II Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the origin	al (no c	opi	es needed).
		Enter filer's	identifyi	ng n	umber, see instructions
Type or Name of exempt organization or other filer, see ins	tructions		Employe	r ide	ntification number (EIN) or
print BARRY GOLDWATER INSTITUTE	_				
File by the PUBLIC POLICY RESEARCH				8	6-0597661
due date for Number, street, and room or suite no. If a P.O. box	c, see instruc	tions.	Social se	curi	ty number (SSN)
return See 500 EAST CORONADO ROAD		·			
City, town or post office, state, and ZIP code. For	a foreign add	dress, see instructions.			
PHOENIX, AZ 85004-1543	•				
Enter the Return code for the return that this application is for	(file a separa	te application for each return)			0 1
Application	Return	Application		-	Return
Is For	Code	ls For			Code
Form 990 or Form 990-EZ	01				
Form 990-BL	02	Form 1041-A	_		08
Form 4720 (individual)	03	Form 4720		-	09
Form 990-PF	04	Form 5227			、 10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already grant	ted an autor	natic 3-month extension on a prev	iously file	ed Fo	orm 8868.
ROGER ZETAH					
• The books are in the care of ▶ 500 E CORONAD	O ROAD	- PHOENIX, AZ 850	04-15	43	
Telephone No. ► 602-462-5000		FAX No. ► 602-256-70			
If the organization does not have an office or place of busing	ess in the Ur	nited States, check this box			D
If this is for a Group Return, enter the organization's four dig					
box . If it is for part of the group, check this box					
4 I request an additional 3-month extension of time until	NOVEM	BER 15, 2013.			
5 For calendar year 2012, or other tax year beginning		, and ending	<u> </u>		·
6 If the tax year entered in line 5 is for less than 12 months	, check reas	on: Initial return	Final r	eturi	n
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS NEEDED IN	ORDER	TO GATHER THE NEC	CESSA	RY	INFORMATION
TO PREPARE AN ACCURATE AND C	OMPLET:	E RETURN.	<u> </u>		
				,	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720	0, or 6069, e	nter the tentative tax, less any			
nonrefundable credits. See instructions.		·	8a	\$	<u> </u>
b If this application is for Form 990-PF, 990-T, 4720, or 606	9, enter any	refundable credits and estimated			
tax payments made. Include any pnor year overpayment	allowed as a	credit and any amount paid			
previously with Form 8868.			8b	\$	
c Balance due. Subtract line 8b from line 8a. Include your	payment wit	h this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See ins			8c	\$	_0.
		st be completed for Part II o			
Under penalties of perjury, I declare that I have examined this form, incl it is true, correct and complete, addition I am authorized to prepare this	uding accomp	anying schedules and statements, and to	the best o	f my	knowledge and belief,
	s iorm.				7-21-12
Signature ► WWW WMZU Title ►	<u> </u>		Date	<u> </u>	1017
Į U					Form 8868 (Rev. 1-2013)

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Form **8868**

(Rev. January 2013)
Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

						▶ [X]	
 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). 						🕨 🔼	
Do not co	omplete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	siy illed FC	R months for	a comoration	
Electroni	c filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of the	ile to lile (0 11101111115 101 060 to mario	a corporation	
	o file Form 990-T), or an additional (not automatic) 3-mo						
	file any of the forms listed in Part I or Part II with the ex						
	Benefit Contracts, which must be sent to the IRS in par		(see instructions). For more details	on the elec	stronic ming c	or this form,	
Part I		- Only).		
A corpora	tion required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		_	
Part I only						▶ ∟	
	corporations (including 1120-C filers), partnerships, REM ome tax retums.	IICs, and t	rusts must use Form 7004 to reques	st an exter	nsion of time		
Type or	Name of exempt organization or other filer, see instructions. Employer identification number of exempt organization or other filer, see instructions.				n number (EIN) or		
print	BARRY GOLDWATER INSTITUTE FOR						
•	PUBLIC POLICY RESEARCH 86-05976					97661	
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.			Social se	Social security number (SSN)		
	500 EAST CORONADO ROAD	<u> </u>		<u>.</u>			
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHOENIX, AZ 85004-1543						
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			01	
Application		Return	Application			Return	
ls For		Code	ls For			Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individual)		03	Form 4720			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above)		06	Form 8870			12	
	ROGER ZETAH						
	oks are in the care of > 500 E CORONADO	ROAD			43		
Teleph	one No. ► 602-462-5000		FAX No. ► 602-256-70	45			
If the o	rganization does not have an office or place of business	s in the Ur	nited States, check this box			▶ 📖	
If this is	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	f this is fo	r the whole g	roup, check this	
box ▶	. If it is for part of the group, check this box 🕨 🔙	and atta	ch a list with the names and EINs o	f all memb	ers the exten	sion is for.	
	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until			
	AUGUST 15, 2013 , to file the exemp	t organiza	tion return for the organization name	ed above.	The extension	n	
	or the organization's return for:						
► X calendar year 2012 or							
►L	tax year beginning	, an	d ending		_·		
2 If th	e tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on:. Initial return	Final retur	n		
	3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
nonrefundable credits. See instructions.					\$	0.	
b If th	is application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			•	
	mated tax payments made. Include any prior year overp			Зь	\$	0.	
c Bala	ance due. Subtract line 3b from line 3a. Include your pa	yment wit	h this form, if required,			_	
by u	sing EFTPS (Electronic Federal Tax Payment System).	<u>See instru</u>	ctions.	3c	\$	0.	
Caution. I	f you are going to make an electronic fund withdrawal v	vith this Fo	orm 8868, see Form 8453-EO and Fo	orm 8879-	EO for payme	nt instructions.	