Citizen Audit.org

DLN: 93493317072955

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

► Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2	2014 c		g 01-01-2014 , and ending 12-31-	2014		•	
B Ch	eck if ap	pplicable	C Name of organization AMERICAN PETROLEUM INSTITUTE			D Emplo	yer identif	ication number
☐ Add	Iress ch	ange	2			13-0	433430	
┌ Na	ne chai	nge	Doing business as					
┌ Init	ıal retui	rn				F Teleph	one number	
_ Fin			Number and street (or P O box if n 1220 L STREET NW	nail is not delivered to street address) Roor	n/suite			
_		nınated				(202)	682-800	0
_	ended i		City or town, state or province, cou WASHINGTON, DC 20005	ntry, and ZIP or foreign postal code		G Gross	receipts \$ 28	9 861 320
App	lication	pendın	g			G 01033		5,001,320
			F Name and address of pri	ncıpal officer		Is this a group		
			JACK N GERARD 1220 L STREET NW			subordinates?		┌ Yes ┌ No
			WASHINGTON, DC 20005		Н(b)	Are all subord	ınates	┌ Yes ┌ No
			<u> </u>			ıncluded?		
I Ta	x-exem	ıpt statu	s 501(c)(3) 501(c)(6) 4	(insert no) 4947(a)(1) or 527		If "No," attach	nalist (se	e instructions)
J W	ebsite	: :► W	WW API ORG		H(c)	Group exemp	tion numbe	er ►
K For	n of org	janizatio	on 🔽 Corporation 🗌 Trust 🦳 Association	on Cother 🟲	L Yea	r of formation 19	919 M Sta	te of legal domicile DC
Pa	rt I	Sui	mmary					
Governance	- -	THE M STRON AN EF	NG, VIABLE U S OIL AND NATU FICIENT, ENVIRONMENTALLY F	FROLEUM INSTITUTE (API) IS TO RAL GAS INDUSTRY ESSENTIAL RESPONSIBLE MANNER	TO MEET TI	HE ENERGY N	EEDS OF	CONSUMERS IN
ŝ	2 (Check	this box 🔰 if the organization di	scontinued its operations or dispos	ed of more t	han 25% of its	net asset	:S
Activities &	 3 1	Numbe	r of voting members of the govern	ung body (Part VI, line 1a)			3	48
ë				of the governing body (Part VI, line			4	47
톭				calendar year 2014 (Part V, line 2a			5	297
ă				necessary)	•		6	6,000
	 7a ⊺	Γotalu	nrelated business revenue from P		7a	9,318,744		
	ь	Net un	related business taxable income f	rom Form 990-T, line 34			7b	840,073
						Prior Year		Current Year
-	8	Cont	rıbutıons and grants (Part VIII, lı	ne 1 h)			0	0
를	9	Prog	ram service revenue (Part VIII, I	revenue (Part VIII, line 2g)				218,289,099
Revenue	10	Inve	stment income (Part VIII, columi	n (A), lines 3, 4, and 7d)		1,629,	431	289,947
ш.	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		13,121,	592	14,333,983
	12			(must equal Part VIII, column (A),		225,470,	401	232,913,029
	13			IX, column (A), lines 1-3)		5,534,		5,879,574
	14			(X, column (A), line 4)		<u> </u>	0	0
	15	Sala	ries, other compensation, employ	ee benefits (Part IX, column (A), lin	es	49,098,	453	52,226,004
\$		5-1	,			+ J, U J U ,		
Expenses	16a			column (A), line 11e)	• •		0	0
蓋	b	Total	fundraising expenses (Part IX, column (D), line 25) ► <u>0</u>				
	17			lines 11a-11d, 11f-24e)		183,272,		186,169,501
	18			st equal Part IX, column (A), line 2		237,905,		244,275,079
	19	Reve	enue less expenses Subtract line	-12,434,		-11,362,050		
Not Assets or Fund Balances					Begi	inning of Curre Year	ent	End of Year
9 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	20	Tota	l assets (Part X. line 16)			120,286,	655	115,144,135
4.2 4.2 4.4	21		I liabilities (Part X, line 26)	87,565,		124,019,063		
žĒ	22			line 21 from line 20		32,721,	302	-8,874,928
Unde my k	nowled	Sig Ities o	nature Block f perjury, I declare that I have ex	amined this return, including accom nplete Declaration of preparer (othe	ipanying sch			
		lk .						
c:		IB	**** nature of officer			2015-11-13 Date		
Sign Here		'						
	_		CK N GERARD PRESIDENT AND CEO be or print name and title					
			Print/Type preparer's name	Preparer's signature	Date	Check If	PTIN	
Paid	t		DEBORAH G KOSNETT	DEBORAH G KOSNETT		self-employed	P00290720)
	- pare	r	Firm's name ► TATE AND TRYON			Firm's EIN 🟲 5	z-1855942	
	Onl		Firm's address ► 2021 L STREET NW SU	ITE 400		Phone no (202	2) 293-2200	

WASHINGTON, DC 20036

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

┌Yes ┌ No

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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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	Yes	
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		
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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\bullet}	9		N o
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Νo
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{2}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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		No
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	Yes	
		F	orm 99 0	(2014)

	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
La	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 343			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►CH, BR See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_	,	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c).	_		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
)	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			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	-		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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.			
_	m which the organization is necessar to issue qualified health plans	1		
ıa	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N

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

Check if Schedule O contains a response or note to any line in this Part VI		
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Se	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a			Yes	
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes	
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►JOHN E ROBERTSON

Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form 990 (2014)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					1	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustie or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	►			
С	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	►	10,816,033	0	2,438,579
<u> </u>	Total (add lines 10 dia 1c)			_	<u></u>

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►165

			Yes	No			
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No			
4	organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such						
	ındıvıdual	4	Yes				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No			

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)
Name and business address	Description of services	Compensation
BLUE WORLDWIDE INC	ADVERTISING	28,272,065
21992 NETWORK PLACE		
CHICAGO, IL 60673		
FLEISHMAN-HILLARD	ADVERTISING	17,254,064
200 N BROADWAY ST		
ST LOUIS, MO 63102		
DESIGNATED MARKET MEDIA INC	ADVERTISING	8,144,795
1911 N FT MYER DR STE 400		
ARLINGTON, VA 22209		
DEMOCRACY DATA & COMMUNICATIONS LLC	ADVOCACY	6,961,184
174 WATERFRONT STREET 500		l ' '
NATIONAL HARBOR, MD 20745		
MOODY INTERNATIONAL LTD	AUDITING	4,474,099
CUCKFIELD HOUSE HIGH ST		l ' '
HAYWARDS HEATH, WEST SUSSEX RH17 5EL		
UK		
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 193		

Part V	1 🛊 🛊 1	Statement of	of Revenue ule O contains a respoi	aco or noto to any li	no in this Bart VIII			
		CHECK II SCHEU	ule o contains a respon	ise of flote to any fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(0	1a	Federated cam	paigns 1a					
m ta l	ь	Membership du	ıes 1b					
Contributions, Giffs, Grants and Other Similar Amounts	С	Fundraising ev	ents 1c					
F F	_							
<u>.</u> ia 5	d		zations 1d					
š.E	е	Government grant	s (contributions) 1e					
₽ Z	f	All other contributions	ons, gifts, grants, and 1f					
혈훈	g		ions included in lines			ł		
탈입	_	1a-1f \$						
8 원	h	Total. Add line:	s 1 a - 1 f	· · · · •				
<u>e</u>				Business Code				
en	2a	MEMBERSHIP DUE	S	900099	133,983,144	133,983,144		
æ	Ь	CERTIFICATION PI	ROGRAM	900099	67,408,492	67,408,492		
9 <u>2</u>	С	CERTIFICATION F	EES	541900	9,318,744		9,318,744	
Program Serwce Revenue	d	MEETING REVENU	E	900099	7,382,685	7,382,685		
3	е	SUBSCRIPTIONS		900099	190,470	190,470		
₽	f	All other progra	am service revenue		5,564	5,564		
<u>د</u> ا	g	Total. Add lines	s 2a-2f		218,289,099			
	3		ome (including dividen					
		and other sımıl	aramounts)	•	551,988			551,98
	4 -		stment of tax-exempt bond		14,089,761	14,089,761		
	5	Royalties .	· · · · · · · · ·		14,089,761	14,089,761		
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental						
		expenses Rental income						
	С	or (loss)						
	d	Net rental inco	me or (loss)					
	7a	Gross amount	(ı) Securities	(II) O ther				
	, a	from sales of assets other than inventory	56,686,250					
	ь	Less cost or other basis and sales expenses	56,948,291					
	С	Gain or (loss)	-262,041		-262,041			262.04
	d 8a	Gross income f	55)		-202,041			-262,04
Other Revenue	-	events (not inc	luding s reported on line 1c)					
느		,	a					
‡	ь	Less direct ex	penses b					
•	С	Net income or	(loss) from fundraising	events 🛌				
	9a		from gaming activities ne 19 a					
	b	Less direct ex	penses b					
	С		(loss) from gamıng actı	vities				
	10a	Gross sales of inventory, less returns and allowances .						
	ь	less costofa	oods sold b					
		_	(loss) from sales of inv	Lentory ⊾				
		Miscellaneou		Business Code				
	11a		OUS REVENUE	900099	244,222			244,22
	b							
	С							
	d	All other reven	ue					
	e		s 11a-11d	🕨	22			
	12	Total revenue	See Instructions .		244,222			
	l			· · · · •	232,913,029	223,060,116	9,318,744	534,169

	rt IX Statement of Functional Expenses						
Section		1(c)(3) and 501(c)(4) organizations must complete all columns All					
		Check if Schedule O contains a response or note to any line in this	Part IX	 (B)	 (c)		
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses	
1		estic governments See Part IV, line 21	5,490,040				
2		its and other assistance to domestic	27,845				
3	gove	its and other assistance to foreign organizations, foreign ernments, and foreign individuals See Part IV, lines 15	361,689				
4		efits paid to or for members	301,003				
5	Com	pensation of current officers, directors, trustees, and employees	10,773,906				
6	Com (as c	pensation not included above, to disqualified persons defined under section 4958(f)(1)) and persons tribed in section 4958(c)(3)(B)	10,773,300				
7		er salaries and wages	35,935,090				
8	Pens	sion plan accruals and contributions (include section 401(k) 403(b) employer contributions)	1,498,674			_	
9		er employee benefits	1,520,660				
10		oll taxes	2,497,674				
11		for services (non-employees)	_,,,,,,,				
а		agement					
b		1	10,225,349				
c	_	ounting	128,733				
d		bying	10,005,215				
e		essional fundraising services See Part IV, line 17	,				
f		stment management fees	205,432				
g	Othe	er (If line 11g amount exceeds 10% of line 25, column (A) unt, list line 11g expenses on Schedule O)	52,596,553				
12		ertising and promotion	58,144,998				
13	O ffic	e expenses	2,751,408				
14	Infor	mation technology	1,151,254				
15	Roya	alties					
16	Occi	upancy	5,020,836				
17		el	4,055,972				
18		nents of travel or entertainment expenses for any federal,					
19	Conf	erences, conventions, and meetings	6,848,627				
20	Inte	rest					
21	Payr	nents to affiliates					
22	Depr	reciation, depletion, and amortization	5,549,194				
23	Insu	rance	499,161				
24	misc	er expenses Itemize expenses not covered above (List cellaneous expenses in line 24e If line 24e amount exceeds 10% de 25, column (A) amount, list line 24e expenses on Schedule O)					
а		ELATED BUSINESS INCO	688,149				
b	STU	DIES, RESEARCH,AND A	18,978,811				
c		PENSION EXPENSE	3,865,377				
d	POS	TRETIREMENT BENEFIT	3,279,544				
e	Allo	ther expenses	2,174,888				
25	Tota	I functional expenses. Add lines 1 through 24e	244,275,079				
26	repo educ	t costs. Complete this line only if the organization rted in column (B) joint costs from a combined ational campaign and fundraising solicitation. Check					

Part X Balance Sheet

1 Cash-non-interest-bearing End of year	Par	't X	Check if Schedule O contains a response or note to any line in this Part X			
2 Savings and temporary cash investments 17,189,327 2 11,55 3 Pledges and grants receivable, net 3 3 Pledges and grants receivable, net 5,718,488 4 10,98 4 10,98 5 5 5 5 5 5 5 5 5				(A)		<u>'</u>
3 Fledges and grants receivable, net 3 10,39		1	Cash-non-interest-bearing		1	
4		2	Savings and temporary cash investments	17,189,927	2	11,550,042
Source		3	Pledges and grants receivable, net		3	
## Employees, and highest compensated employees. Complete Part II of Schedule L. Canas and other receivables from other disqualified persons (as defined under section 4958 (f)(1)), persons described in section 4958 (f)(13)(3), and controllurgy employers and spannoring organizations of section 503 (c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L. Fig.		4	Accounts receivable, net	9,718,488	4	10,998,407
Compared and other receivables from other disqualified persons (as defined under section 49 \$8 (f)(1)), persons described in section 49 \$5 (a)(3)(8), and contributing emphasers and sponsoring organizations of section 50 1 (c)(9) voluntary employees beneficiary organizations (see instructions) (complete Part II of Schedule L		5	employees, and highest compensated employees Complete Part II of		5	
1.012 8 1.1.012 8 1.1.012 8 1.1.012 8 1.1.012 8 1.1.012 8 1.1.012 8 1.1.012 8 1.1.012 8 1.1.012 9 4.85 1.002 1.002 1.1.012 1.	ets	6	section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees'			
9 Prepaid expenses and deferred charges	××	7	Notes and loans receivable net		7	
9 Prepaid expenses and deferred charges 1.757,513 9 4.858 10a Land, buildings, and equipment cost or other basis Complete Part V of Schedule D 10b Less accumulated depreciation 10b 17,967,465 17,249,908 10c 18,03 11 Investments—publicly traded securities 74,359,207 11 69,969 12 Investments—publicly traded securities 8ce Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 14 15 Other assets See Part IV, line 11 15 15 Total assets Add lines 1 through 15 (must equal line 34) 120,286,655 16 115,14 15 15 16 Total assets Add lines 1 through 15 (must equal line 34) 120,286,655 16 115,14 16 17 Accounts payable and accrued expenses 20,465,750 17 24,10 18 19 Deferred revenue 15,444,087 19 14,08 19 14,08 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 20 Insecured notes and other payables to current and former officers, directors, trustees, key employees, lighest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Unsecured notes and ions payable to unrelated third parties 24 Unsecured notes and ions payable to unrelated third parties 24 Unsecured notes and ions payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 25 Other liabilities including federal income tax, payables to related third parties 26 Total liabilities. Add lines 17 through 25 Total liabilities. Add lines 17 through 25 Total liabilities. Add lines 17 through 25 Total liabilities. Add lines 33 and 34. 29 Permanently restricted net assets 30 Total incomplete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Pad-in or capital surplus, or land, building or equipment fund 31 Pad-in or capital surplus, or land, building or equipment fund 32 2	₹			11.612		10,807
10a				· ·	9	4,856,718
10		-	Land, buildings, and equipment cost or other basis			· · ·
12 Investments—other securities See Part IV, line 11 13 13 14 14 15 15 15 15 15 15		ь	· · · · · · · · · · · · · · · · · · ·	17,249,908	10c	18,035,682
12 Investments—other securities See Part IV, line 11 13 13 14 14 15 15 15 15 16 16 16 17 16 17 17 18 18 19 19 19 19 19 19		11	Investments—publicly traded securities	74,359,207	11	69,692,479
13		12	Investments—other securities See Part IV, line 11		12	
14		13			13	
15		14			14	
16 Total assets. Add lines 1 through 15 (must equal line 34) 120,286,655 16 115,144 17		15			15	_
17		16		120,286,655	16	115,144,135
18 Grants payable		17		20,465,750	17	24,101,205
Deferred revenue		18			18	
20 Tax-exempt bond liabilities		19	• •	15,444,087	19	14,082,713
21 Escrow or custodial account liability Complete Part IV of Schedule D		20			20	
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21			21	
24 Unsecured notes and loans payable to unrelated third parties	Ò.	22	Loans and other payables to current and former officers, directors, trustees,			
Unsecured notes and loans payable to unrelated third parties	ge		persons Complete Part II of Schedule L		22	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		23	Secured mortgages and notes payable to unrelated third parties		23	
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties		24	
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete Part X of Schedule	54.055.540		05 005 445
Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets						85,835,145
30 Capital stock or trust principal, or current funds	<u>~</u>	26	Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete	87,303,333	26	124,019,063
30 Capital stock or trust principal, or current funds	μÇ			20 704 202		0.074.000
30 Capital stock or trust principal, or current funds	<u>8</u>			32,721,302		-8,874,928
30 Capital stock or trust principal, or current funds	ă					
30 Capital stock or trust principal, or current funds	Ĭ	29	•		29	
30 Capital stock or trust principal, or current funds	or FL		- · · · · · · · · · · · · · · · · · · ·			
33 Total net assets or fund balances	Ş				30	
33 Total net assets or fund balances	SSe	31				
33 Total net assets or fund balances 32,721,302 33 -8,874 34 Total liabilities and net assets/fund balances 120,286,655 34 115,14	đ					
34 Total liabilities and net assets/fund balances	₹				33	-8,874,928
		34	Total liabilities and net assets/fund balances	120,286,655	34	115,144,135

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		232,9	913,029
2	Total expenses (must equal Part IX, column (A), line 25)	2		244,2	275,079
3	Revenue less expenses Subtract line 2 from line 1	3		-11,	362,050
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			721,302
5	Net unrealized gains (losses) on investments	5			225,409
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		-30,4	159,589
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			374,928
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. ┌
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Additional Data

Software ID: Software Version:

EIN: 13-0433430

Name: AMERICAN PETROLEUM INSTITUTE

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	including grants of \$) (Revenue \$)
APPROACH TO HAS LICENSED AROUND THE W	CERTIFYING THAT PRODUCTS M OIL FIELD EQUIPMENT MANUFAC	ITERNATIONAL NATURE OF THE PETRO EET THE INDUSTRY'S EXACTING STAN CTURERS TO USE THE API MONOGRAN LS FOR USE IN BOTH GASOLINE AND D ESSELS, AND PIPING	IDARDS OF QUALITY SINCE 1 1, RECOGNIZED AS A MARK O	1924, API F QUALITY
(Code) (Expenses \$	including grants of \$) (Revenue \$)
IT PROVIDES T		SHOPS AND SYMPOSIA ON ISSUES VI PROFESSIONALS IN THE OIL AND GA		

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ including grants of \$) (Revenue \$)

SAFETY - THE CENTER FOR OFFSHORE SAFETY IS AN INDUSTRY SPONSORED PROGRAM FOCUSED EXCLUSIVELY ON GULF OF
MEXICO OFFSHORE SAFETY THE PROCESS SAFETY SITE ASSESSMENT PROGRAM INCLUDES TRAINING AND CERTIFICATION,
SITE ASSESSMENT, AND STATISTICAL PROCESS SAFETY PRODUCTS TO MAKE INDUSTRY REFINING FACILITIES SAFER

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the				
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	_		Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(1) KHALID S ALNAJI	0 50	x						0	0	0
BOARD MEMBER	0 00	_ ^						Ů	Ŭ	
(1) ALAN S ARMSTRONG	0 50	l x						0	0	0
BOARD MEMBER	0 00							_	_	
(2) JOHN BANNERMAN	0 50	×						0	0	0
BOARD MEMBER	0 00									_
(3) JOSEPH BRYANT	0 50	×						0	0	0
BOARD MEMBER (4) THOMAS BURKE	0 00									
		×						0	0	0
BOARD MEMBER (5) STEPHEN I CHAZEN	0 00									
		x		Х				0	0	0
CHAIRMAN OF THE BOARD (6) MARTIN S CRAIGHEAD	0 00									
BOARD MEMBER	0 00	×						0	0	0
(7) TIM J CUTT	0 50									_
BOARD MEMBER	0 00	×						0	0	0
(8) RICARDO DARRE	0 50									
BOARD MEMBER	0 00	×						0	0	0
(9) PETER EVENSEN	0 50									
BOARD MEMBER	0 00	×						0	0	0
(10) DAVID FANTA	0 50							_	_	
BOARD MEMBER	0 00	×						0	0	0
(11) G STEVEN FARRIS	0 50	.,								
BOARD MEMBER	0 00	X						0	0	0
(12) TIMOTHY C FELT	0 50	, , , , , , , , , , , , , , , , , , ,								
BOARD MEMBER	0 00	X						0	0	0
(13) GREG C GARLAND	0 50	V							_	
BOARD MEMBER	0 00	X						0	0	0
(14) JOHN T GREMP	0 50	x						0	0	0
BOARD MEMBER	0 00	^						0	0	0
(15) GARY R HEMINGER	0 50	x		х				0	0	0
BOARD MEMBER & CHAIR FIN CMTE	0 00	^						Ů	Ů	<u> </u>
(16) JOHN B HESS	0 50	l x						0	0	0
BOARD MEMBER	0 00									
(17) PAUL L HOWES	0 50	l x						0	0	0
BOARD MEMBER	0 00									
(18) RAY L HUNT	0 50	×						0	0	0
BOARD MEMBER	0 00									_
(19) W HERBERT HUNT	0 50	x						0	0	0
BOARD MEMBER	0 00									
(20) ROGER JENKINS	0 50	×						0	0	0
BOARD MEMBER	0 00									
(21) TRACY W KROHN	0 50	x						0	0	0
BOARD MEMBER (22) RYAN M LANCE	0 00				1	-				
		x						0	0	0
BOARD MEMBER (23) ROBERT DOUG LAWLER	0 00						\vdash			
		x						0	0	0
BOARD MEMBER (24) VIRGINIA GIGI B LAZENBY	0 00					<u> </u>	_			
		x						0	0	0
BOARD MEMBER	0 00	<u> </u>			1	<u> </u>	<u> </u>	<u> </u>		<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not che more than one box, uperson is both an of and a director/trust						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former			related organizations	
(26) DAVID J LESAR	0 50	x						0	0	0	
BOARD MEMBER	0 00										
(1) BILL MALONEY	0 50	x						0	0	0	
BOARD MEMBER (2) DOUGLAS R MATTHEWS	0 00										
BOARD MEMBER		×						0	0	0	
(3) JAMES P MCGREGOR	0 00										
BOARD MEMBER	0 00	×						0	0	0	
(4) JOHN C MINGE	0 50										
BOARD MEMBER	0 00	X						0	0	0	
(5) AL MONACO	0 50	x						0	0	0	
BOARD MEMBER	0 00	_ ^						Ů	, , , , , , , , , , , , , , , , , , ,		
(6) JACK B MOORE	0 50	×						0	0	0	
BOARD MEMBER (7) DICHARD MUNICIPIE	0 00										
(7) RICHARD MUNCRIEF	0 50	×						0	0	0	
BOARD MEMBER (8) ROD NELSON	0 00										
BOARD MEMBER	0 00	×						0	0	0	
(9) J LARRY NICHOLS	0 50										
BOARD MEMBER	0 00	×						0	0	0	
(10) MARVIN ODUM	0 50	.,									
BOARD MEMBER	0 00	Х						0	0	U	
(11) ROBERT L PARKER JR	0 50	x						0	0	0	
BOARD MEMBER	0 00							Ů,			
(12) HARRY N PEFANIS	0 50	×						0	0	0	
BOARD MEMBER	0 00										
(13) DANIEL W RABUN	0 50	×						0	0	0	
BOARD MEMBER (14) W MATT RALLS	0 00										
BOARD MEMBER	0 00	×						0	0	0	
(15) GARY G RICH	0 50										
BOARD MEMBER	0 00	×						0	0	0	
(16) DAVID T SEATON	0 50										
BOARD MEMBER	0 00	X						0	0	0	
(17) PAUL STEVENS	0 50	x						0	0	0	
BOARD MEMBER	0 00	_ ^						Ů	Ŭ	0	
(18) DOUG J SUTTLES	0 50	×						0	0	0	
BOARD MEMBER	0 00										
(19) TROY W THACKER	0 50	×						0	0	0	
BOARD MEMBER (20) REX TILLERSON	0 00									_	
	0 00	×						0	0	0	
BOARD MEMBER (21) LEE M TILLMAN	0 50										
BOARD MEMBER	0 00	×						0	0	0	
(22) HANK A TRUE III	0 50									_	
BOARD MEMBER	0 00	X		L				0	0	0	
(23) AL WALKER	0 50	×						0	0	0	
BOARD MEMBER	0 00							J			
(24) JOHN S WATSON	0 50	x						0	0	0	
BOARD MEMBER	0 00										

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage	(C)				ock		(D) Reportable	(E) Reportable	(F) Estimated amount	
Name and Title	hours per	Position (do not check more than one box, unless			;	compensation	compensation	of other			
	week (list	perso						from the	from related	compensation	
	any hours	and a	dire	ctor/	trus†	tee)		organization (W-	organizations (W-	from the	
	for related organizations	Q <u>5</u>	=	2	줐	9 🗐	Ţ	2/1099-MISC)	2/1099-MISC)	organization and related	
	below	유물	i st	Office	ڪٽ m	문퇴	Former			organizations	
	dotted line)	[월등	<u>≅</u>	<u> -</u>	景	e	单				
		५ ₹	Institutional		Ke, emplojee	le à					
		Individual trustee or director			8	Highest compensated employee					
		#:	Trustee			l les					
			ď			l 🕏					
(51) DAVID W WILLIAMS	0 50										
		X						0	0	0	
BOARD MEMBER (1) KAREN WRIGHT	0 00										
		x						0	0	0	
BOARD MEMBER (2) JACK N GERARD	0 00										
(2) JACK IN GERARD	40 00	x		Х				4,813,215	0	867,728	
PRESIDENT AND CEO	0 00										
(3) HARRY M NG	40 00			Х				467,907	0	83,279	
GEN COUNSEL & CORP SEC UNTIL 9/30/14	0 00										
(4) JOHN E ROBERTSON	40 00			x				441,988	0	98,201	
VICE PRESIDENT AND CFO	0 00							,		,	
(5) STACY R LINDEN	40 00			X				317,482	0	71,572	
GEN COUNSEL & CORP SEC AS OF 10/24/14	0 00							,	-	,	
(6) LINDA G ROZETT	40 00				X			541,286	0	267,366	
VICE PRESIDENT	0 00										
(7) KYLE B ISAKOWER	40 00				x			513,486	0	128,287	
VICE PRESIDENT	0 00				,			313,100		120,207	
(8) ERIK G MILITO	40 00				x			455,996	0	107,306	
GROUP DIRECTOR	0 00				_^_			433,330	Ů	107,500	
(9) ROBERT L GRECO	40 00				x			452,409	0	142,405	
GROUP DIRECTOR	0 00				^			432,409	0	142,403	
(10) LOUIS A FINKEL	40 00				V			440 F31	0	75 500	
EXECUTIVE VICE PRESIDENT	0 00				Х			440,531	U	75,589	
(11) JOHN D MODINE	40 00				\ ,			402.254		05.610	
VICE PRESIDENT	0 00				X			402,254	0	85,619	
(12) CHARLES R WILLIAMS	40 00					,,		657.050		101.010	
EXEC DIR CTR FOR OFFSHORE SAFETY	0 00					X		657,859	0	181,049	
(13) ROLF W HANSON	40 00								_		
SENIOR DIRECTOR	0 00					X		412,599	0	74,251	
(14) HOWARD J FELDMAN	40 00										
SENIOR DIRECTOR	0 00					X		314,660	0	121,902	
(15) ERIC J WOHLSCHLEGEL	40 00										
DIRECTOR	0 00					×		300,045	0	40,951	
(16) JOHN C FELMY	40 00										
CHIEF ECONOMIST	0 00					X		284,316	0	93,074	
	1 000				<u> </u>			<u> </u>	<u> </u>	<u> </u>	

DLN: 93493317072955

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

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

	me of the organization ERICAN PETROLEUM INSTITUTE			Employer iden	tification number				
——	ENTONI FEIROLLOPI INSTITUTE			13-0433430					
Pai	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.				
1	Provide a description of the org	ganızatıon's dırect and ındırect po	olitical campaign act	civities in Part IV					
2	Political expenditures			▶	\$556,325				
3	Volunteer hours								
Pai	rt I-B Complete if the or	ganization is exempt und	er section 501(c)(3).					
1	Enter the amount of any excise	e tax incurred by the organization	under section 4955	>	\$				
2	Enter the amount of any excise	e tax incurred by organization ma	nagers under sectio	n 4955 🕨	\$				
3	If the organization incurred a s	ection 4955 tax, did it file Form	4720 for this year?		☐ Yes ☐ No				
4a	Was a correction made?				☐ Yes ☐ No				
b	If "Yes," describe in Part IV		-						
Pai	<u> </u>	ganization is exempt und							
1		ended by the filing organization fo			\$ 351,325				
2	Enter the amount of the filing o exempt function activities	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities							
3	Total exempt function expendit	tures Add lines 1 and 2 Enter he	ere and on Form 112	.0-POL, line 17b ►	\$556,325				
4	Did the filing organization file F	Form 1120-POL for this year?			✓ Yes				
5	organization made payments F amount of political contribution	nd employer identification number For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond front in the first front in	om the filing organization's f to a separate political orga	funds Also enter the Inization, such as a tion in Part IV				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-				
See	Additional Data Table								
		1							

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	00				
	Over \$1,000,000 but not over \$1,500,000	000				
	Over \$1,500,000 but not over \$17,000,000	00				
	Over \$17,000,000					
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente					
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

		nization is exempt under section 501(c)(3) and has lection under section 501(h)).					
For ea	ach "Yes" response to lines 1a through 1.	ı below, provide in Part IV a detailed description of the lobbying	(a)		(b)		
activ		,,	Yes	No		A mount	
1		ation attempt to influence foreign, national, state or local influence public opinion on a legislative matter or referendum,					
a b		impensation in expenses reported on lines 1c through 1i)?			╣		
_	Media advertisements?	ompensation in expenses reported on lines 10 tillough 11).			-		
c d	Mailings to members, legislators, or t	the public?			+		
	Publications, or published or broadca				+		
e f					-		
	Grants to other organizations for lobb				+		
g		staffs, government officials, or a legislative body?			+		
h :		onventions, speeches, lectures, or any similar means?			+		
<u>.</u>	Other activities?	•			-		
j	Total Add lines 1c through 1i						
2a b	If "Yes," enter the amount of any tax	organization to be not described in section 501(c)(3)? Incurred under section 4912					
С	If "Yes," enter the amount of any tax	incurred by organization managers under section 4912					
d		ection 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organ 501(c)(6).	nization is exempt under section 501(c)(4), section	501(c)(5),	or s	ection	ì
						Yes	No
1) dues received nondeductible by members?		L	1		Νo
2		use lobbying expenditures of \$2,000 or less?			2		Νo
3		ver lobbying and political expenditures from the prior year?			3	Yes	
	501(c)(6) and if either ine 3, is answered "		No" C		Pai	rt III-	Α,
1	Dues, assessments and similar amou		1		1	30,419	,907
2	expenses for which the section 527(1	ng and political expenditures (do not include amounts of political f) tax was paid).					
а	Current year		2a			83,147	,415
b	Carryover from last year		2b			16,335	
С	Total		2c			99,482	,948
3		n 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			97,814	,930
4		on line 2c exceeds the amount on line 3, what portion of the excess over to the reasonable estimate of nondeductible lobbying and	4			1,668	019
5	Taxable amount of lobbying and polit	ical expenditures (see instructions)	5			1,000	,010
	rt IV Supplemental Inform		1 3 1				
		I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated groundless, complete this part for any additional information	ıp list),	Part I	I-A,	lines 1	and
	Return Reference	Explanation					
PAR	A M INC STA	I CONDUCTS POLITICAL ACTIVITIES THROUGH A SEPARATE S ERICAN PETROLEUM INSTITUTE POLITICAL ACTION COMMIT CURRED ADVERTISING EXPENDITURES OF \$351,325 TO SUPPO ATE OFFICE API ALSO MADE PAYMENTS TOTALING \$205,000 LITICAL ORGANIZATIONS	TEE IN ORT CA	1 2014 NDID <i>A</i>	, AP: ATES	I FOR	

Part IV Supplemental Inf	ormation (continued)
Return Reference	Explanation
·	_

Schedule C (Form 990 or 990EZ) 2014

Additional Data

Software ID: Software Version:

EIN: 13-0433430

Name: AMERICAN PETROLEUM INSTITUTE

Form 990, Schedule C, Part 1-C, Line 5

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's own internal funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
AMERICAN PETROLEUM INSTITUTE POLITICAL ACTION COMMITTEE	1220 L STREET NW WASHINGTON, DC 20005	272596972		59208
COMMUNITY LEADERS OF AMERICA	5707 ABILENE TRL AUSTIN,TX 78749	463149989	10000	
DEMOCRATIC GOVERNORS ASSOCIATION	1401 K STREET NW SUITE 200 WASHINGTON, DC 20005	521304889	50000	
MAHONING COUNTY DEMOCRATIC PARTY	4011 HILLMAN WAY YOUNGSTOWN,OH 44512	341628309	10000	
OHIO DEMOCRATIC PARTY	340 EAST FULTON STREET COLUMBUS,OH 43215	314165080	10000	
REPUBLICAN GOVERNORS ASSOCIATION	1747 PENNSYLVANIA AVE NW STE 250 WASHINGTON,DC 20006	113655877	75000	
REPUBLICAN ATTORNEYS GENERAL ASSOCIATION	1747 PENNSYLVANIA AVE NW STE 250 WASHINGTON,DC 20006	464501717	50000	

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DLN: 93493317072955

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

Open to Public Inspection

	me of the organization RICAN PETROLEUM INSTITUTE		Employer identification number				
					0433430		
Pa	rt I Organizations Maintaining Donor Adv organization answered "Yes" to Form 990		her Similar Fu	ınds	or Accoun	ts. Comple	te if the
		(a) Donor adv	sed funds		(b) Funds an	d other acco	unts
	Total number at end of year						
	Aggregate value of contributions to (during year)						
	Aggregate value of grants from (during year)						
	Aggregate value at end of year						
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	_		or advi	sed	☐ Yes	┌ No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?		_			┌ Yes	┌ No
аī	t II Conservation Easements. Complete if	the organization an	swered "Yes" to	Forn	า 990, Part	IV, line 7.	
	Purpose(s) of conservation easements held by the organization of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)	reservation of an reservation of a c	ertifie	d historic str	ucture	
	easement on the last day of the tax year	•	_				
			_		Held at t	he End of the	Year
1	Total number of conservation easements			2a			
)	Total acreage restricted by conservation easements		_	2b			
	Number of conservation easements on a certified histo		` ´	2c			
	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, ai	nd not on a	2d			
	Number of conservation easements modified, transferr	ed, released, extinguis	hed, or terminate	d by th	ie organizatio	n during	
	the tax year 🛌						
	Number of states where property subject to conservati	on easement is locate	d ►	_			
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	he periodic monitoring	, inspection, hand	ling of	violations, a	nd ryes	┌ No
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing co	nservation easem	ents c	luring the yea	ar	
	<u> </u>						
	A mount of expenses incurred in monitoring, inspecting	ı, and enforcıng conser	vation easements	during	g the year		
	* \$						
	Does each conservation easement reported on line 2(dand section 170(h)(4)(B)(II)?	d) above satisfy the rec	quirements of sec	tion 17	70(h)(4)(B)(i)) ┌ Yes	┌ No
	In Part XIII, describe how the organization reports cor balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organ ents	ızatıon's fınancıal	stater	nents that de	scribes	
li	t III Organizations Maintaining Collection Complete if the organization answered "Y			or Otl	ner Simila	r Assets.	
ı	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to ts held for public exhib	report in its reven	r rese	arch in furthe		
•	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to these	16 (ASC 958), to repo	ort in its revenue s	tatem	ent and balaı		lıc
	(i) Revenue included in Form 990, Part VIII, line 1				► \$		
	(ii) Assets included in Form 990, Part X						
	If the organization received or held works of art, historic following amounts required to be reported under SFAS			r finan	-		
	Revenue included in Form 990, Part VIII, line 1				► \$		
)	Assets included in Form 990, Part X				* T		
	A 33EL3 IIICIUUEU III FUIIII 77U, FAIL A				▶ \$		

Part 111 Organizations Maintaining Collections of Art, Historical Trea	asures, or Oth	<u>er Similar Ass</u>	ets (continued)
3 Using the organization's acquisition, accession, and other records, check any of the collection items (check all that apply)	e following that are	a significant use o	of its
a ☐ Public exhibition d ☐ Loan or e	exchange progran	าร	
b Scholarly research e Other			
c Preservation for future generations			
4 Provide a description of the organization's collections and explain how they further t Part XIII	the organization's	exempt purpose ın	I
5 During the year, did the organization solicit or receive donations of art, historical tre			
assets to be sold to raise funds rather than to be maintained as part of the organizate		<u> </u>	Yes No
Part IV Escrow and Custodial Arrangements. Complete if the organiza Part IV, line 9, or reported an amount on Form 990, Part X, line 21.		res to form 95	,
1a Is the organization an agent, trustee, custodian or other intermediary for contributio included on Form 990, Part X?		s not	Yes No
b If "Yes," explain the arrangement in Part XIII and complete the following table			
		Amo	ount
C Beginning balance	10	:	
d Additions during the year	10	1	
e Distributions during the year	16	1	
f Ending balance	1f	,	
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or c	ustodial account	liability?	Yes No
b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been	en provided in Pai	tXIII	
Part V Endowment Funds. Complete if the organization answered "Yes"			
	(c)Two years back (d)Three years back	(e) Four years back
1a Beginning of year balance			
b Contributions			
c Net investment earnings, gains, and losses			
d Grants or scholarships			
e Other expenditures for facilities and programs			
f Administrative expenses			
g End of year balance			
2 Provide the estimated percentage of the current year end balance (line 1g, column ((a)) held as		
a Board designated or quasi-endowment ►			
b Permanent endowment b			
c Temporarily restricted endowment ►			
The percentages in lines 2a, 2b, and 2c should equal 100%			
3a Are there endowment funds not in the possession of the organization that are held a	nd administered fo	or the	
organization by			Yes No
(i) unrelated organizations		3a(i	
(ii) related organizations		3a(ii 3b	<u>) </u>
4 Describe in Part XIII the intended uses of the organization's endowment funds			
Part VI Land, Buildings, and Equipment. Complete if the organization a	answered 'Yes' t	o Form 990. Par	t IV. line
11a. See Form 990, Part X, line 10.			
Description of property (a) Cost or oth basis (investment)		r (c) Accumulated depreciation	(d) Book value
	basis (other)	·	
1a Land	basis (other)		
1a Land	basis (other)		
	8,195,74	2 4,818,990	3,376,752
b Buildings		•	
b Buildings	8,195,74 7,139,86 20,667,53	8 5,640,345	1,499,523

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	omplete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11c
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. Complete if the organization (a) Description		(b) Book value
Tabal (Calumn (b) much aqual Farm 000, Part V cal (D) (no	15)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line : Part X Other Liabilities. Complete if the org		
Form 990, Part X, line 25.		
1 (a) Description of liability	(b) Book value	
Federal Income taxes ACCRUED PENSION LIABILITY	29,159,030	
SUPPLEMENTAL BENEFIT PLANS	8,464,997	
POSTRETIREMENT BENEFITS OTHER THAN PENSION	48,211,118	
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	85,835,145	

Part	Reconciliation of Revenue per Audited Financial Statements With Re the organization answered 'Yes' to Form 990, Part IV, line 12a.	venue pe	r Re	turn Complete ıf
1	Total revenue, gains, and other support per audited financial statements		1	233,069,187
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments 2a	225,409		
b	Donated services and use of facilities			
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII)	136,181		
e	Add lines 2a through 2d		2e	361,590
3	Subtract line 2e from line 1		3	232,707,597
4	Amounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$			
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	205,432		
b	Other (Describe in Part XIII) 4b			
C	Add lines 4a and 4b		4c	205,432
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	232,913,029
Part	Reconciliation of Expenses per Audited Financial Statements With Enfethe organization answered 'Yes' to Form 990, Part IV, line 12a.	xpenses	per I	Return. Complete
1	Total expenses and losses per audited financial statements		1	244,209,065
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			<u> </u>
a	Donated services and use of facilities			
ь	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIII) 2d	139,418		
e	Add lines 2a through 2d		2e	139,418
3	Subtract line 2e from line 1	[3	244,069,647
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	205,432		
b	Other (Describe in Part XIII) 4b			
c	Add lines 4a and 4b		4c	205,432
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	244,275,079
Part	Supplemental Information			
Part	vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete the Martion		rovide	e any additional
	Return Reference Explanation			
PART	UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CONTROL SUBJECT TO THE PAYMENT OF INCOME TAXES ON ACTIVE PURPOSE HOWEVER, THE INSTITUTE IS SUBJECT TO INCOME THE INSTITUTE IS SUBJECT TO INCOME TO BUSINESS INCOME THE INSTITUTE SUPPORT FOR ANY TAX POSITIONS TAKEN ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE INSTITUTE'S INCOME TAX RETURNS ARE GENERALLY	TITIES RELATIONE TAXE TITUTE BEIN, AND AS SO	ATED S O N LIEVE SUCH ANCIA	TO ITS EXEMPT ACTIVITIES S THAT IT HAS , DOES NOT HAVE AL STATEMENTS

PART XII, LINE 2D - OTHER ADJUSTMENTS	API POLITICAL ACTION COMMITTEE CONSOLIDATED IN AUDITED FINANCIAL STATEMENTS 139,418
PART XI, LINE 2D - OTHER ADJUSTMENTS	API POLITICAL ACTION COMMITTEE CONSOLIDATED IN AUDITED FINANCIAL STATEMENTS 136,181
	SUBJECT TO THE PAYMENT OF INCOME TAXES ON ACTIVITIES RELATED TO ITS EXEMPT PURPOSE HOWEVER, THE INSTITUTE IS SUBJECT TO INCOME TAXES ON ACTIVITIES DEEMED TO BE UNRELATED BUSINESS INCOME THE INSTITUTE BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS THE INSTITUTE'S INCOME TAX RETURNS ARE GENERALLY SUBJECT TO EXAMINATION BY THE IRS FOR THREE YEARS AFTER THEY WERE FILED

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Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. 2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

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

Open to Public Inspection

Part I General Information on Activities Outside the United States. Complete if the organization answ "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	
"Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	
and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	ered
2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of offices in the region (c) Number of employees, agents, and fundraising, program service, describe specific type of in region (by type) (e.g., a program service, describe specific type of in region (by type) (e.g., a program service, describe in region (by type) (e.g., a	
assistance outside the United States. Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of offices in the region (b) type) (e g, a program service, describe region (b) type) (e g, a program service, describe specific type of in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (b) type) (e g, a program service) (f) Total explored in region (f) type) (f) (f) Total explored in region (f)	┌ No
(a) Region (b) Number of offices in the region (c) Number of employees, agents, and fundraising, program (d) Activities conducted in region (by type) (e g , a program service, describe for and inverse for an and inverse for and inverse for and inverse for an analysis	r
offices in the employees, region (by type) (e g , a program service, describe for and in region agents, and fundraising, program specific type of in re	
independent services, investments, grants service(s) in region to recipients located in the region	estments
(1) See Add'l Data	
(2)	
(3)	
(4)	
(5)	
3a Sub-total 3 7	0,757,827
b Total from continuation sheets to Part I	3,303,802
c Totals (add lines 3a and 3b) 4 8	4,061,629

			nizations or Entitie eived more than \$5,0					' to Form 990,
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		EUROPE	GENERAL SUPPORT	190,322	WIRE TRANSFER			
(2)		NORTH AMERICA	RESEARCH GRANT	59,145	WIRE TRANSFER			
(3)								
(4)								
			ted above that are re e or counsel has pro					1
3 Enter total nu	mber of other	organizations or en	itities					1

Schedule F (Form 990) 2014

Page 3 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (e) Manner of cash (c) Number of (d) A mount of (a) Type of grant or (b) Region (f) A mount of (g) Description (h) Method of assistance recipients cash grant disbursement non-cash of non-cash valuation assistance assistance (book, FMV, appraisal, other) (1) SCHOLARSHIPS 3 11,590 AIRFARE, LODGING AND FAIR MARKET VALUE CENTRALAMERICA ANDTHE MEALS CARIBBEAN -ANTIGUA & BARBUDA, ARUBA, BAHAMAS, (2) SCHOLARSHIPS EAST ASIA AND THE 8 27,443 AIRFARE, LODGING AND FAIR MARKET VALUE PACIFIC MEALS (3) SCHOLARSHIPS EUROPE 19,822 AIRFARE, LODGING AND FAIR MARKET VALUE 6 (INCLUDING MEALS ICELAND & GREENLAND) (4) SCHOLARSHIPS 3,642 AIRFARE, LODGING AND FAIR MARKET VALUE RUSSIA AND 1 NEIGHBORING MEALS STATES 14,798 AIRFARE, LODGING AND FAIR MARKET VALUE (5) SCHOLARSHIPS SOUTH AMERICA 4 MEALS 11,205 AIRFARE, LODGING AND FAIR MARKET VALUE (6) SCHOLARSHIPS SOUTH ASIA 3 MEALS 23,722 AIRFARE, LODGING AND FAIR MARKET VALUE (7) SCHOLARSHIPS SUB-SAHARAN 4 AFRICA MEALS (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Part IV Foreign Forms

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

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page 5

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	ALL GRANTS ARE ASSIGNED AN API STAFF MEMBER AS THE CONTRACT OFFICER THE CONTRACT OFFICER'S RESPONSIBILITIES INCLUDE MONITORING THE ACTIVITIES OF GRANTEES, AS WELL AS THE RECEIPT A ND REVIEW OF PERIODIC PROGRESS REPORTS DURING 2014, API PROVIDED SCHOLARSHIPS IN THE FORM OF AIRFARE, LODGING AND MEALS TO CERTAIN FOREIGN INDIVIDUALS ATTENDING THE INTERNATIONAL OIL SPILL CONFERENCE. THESE SCHOLARSHIPS ARE REPORTED ON SCHEDULE F, PART III

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3	API'S CERTIFICATION PROGRAMS INCLUDE LICENSING OF MANUFACTURERS AND INDIVIDUALS THROUGHOUT THE WORLD AUDITS OF MANUFACTURERS ARE CONDUCTED THROUGH INDEPENDENT CONTRACTORS, WHICH A
	RE PRIMARILY COORDINATED THROUGH A U.SBASED ENTITY THE EVALUATION AND GRANT OF LICENSES IS CONDUCTED AT API'S HEADQUARTERS IN WASHINGTON, D.C. SIMILARLY, API'S INDIVIDUAL CERTIF ICATION EXAMINATIONS ARE OFFERED AT VARIOUS WORLD-WIDE LOCATIONS, PROCTORED BY A U.SBASE
	D INDEPENDENT CONTRACTOR THE EXAMINATION RESULTS AND CERTIFICATIONS ARE ALSO EVALUATED AND AWARDED AT API'S HEADQUARTERS IN WASHINGTON, D.C. API-U TRAINING PROGRAMS, OFFERED IN BO THITHE UNITED STATES AND ABROAD, ENABLE PARTICIPANTS TO MAINTAIN PROFESSIONAL COMPETENCY A
	ND MEET EVER-CHANGING STATUTORY REQUIREMENTS API DEVELOPS COURSE CONTENT WITH A THIRD PAR TY AND PROVIDES TRAIN-THE-TRAINER SESSIONS TO DEVELOP QUALIFIED TRAINERS FOR COURSE MATERI ALS APPROVED TRAINERS DELIVER API-U COURSES ALL OVER THE WORLD

Additional Data

Software ID: Software Version:

EIN: 13-0433430

Name: AMERICAN PETROLEUM INSTITUTE

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	_
CENTRAL AMERICA AND THE CARIBBEAN	0	0		CERTIFICATION PROGRAMS	54,606
CENTRAL AMERICA AND THE CARIBBEAN	0	=	GRANTS & CONTRIBUTIONS		11,590
EAST ASIA AND THE PACIFIC	2	5		CERTIFICATION PROGRAMS	7,409,044

Form 990 Schedule F Part I - Activities Outside The United States							
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
EAST ASIA AND THE PACIFIC	0	_	GRANTS & CONTRIBUTIONS		27,443		
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	l	CERTIFICATION PROGRAMS	1,620,284		
EUROPE (INCLUDING ICELAND & GREENLAND)	0	_	GRANTS & CONTRIBUTIONS		210,144		

Form 990 Schedule F	<u>Part I - Activi</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST AND NORTH AFRICA	1	2	PROGRAM SERVICES	CERTIFICATION PROGRAMS	1,350,506
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	TRAINING PROGRAMS	74,210
NORTH AMERICA	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	832,714

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region					
NORTH AMERICA	0	-	GRANTS & CONTRIBUTIONS		59,145					
RUSSIA AND NEIGHBORING STATES	0	0		CERTIFICATION PROGRAMS	551,242					
RUSSIA AND NEIGHBORING STATES	0		GRANTS & CONTRIBUTIONS		3,642					

Form 990 Schedule F	<u>Part I - Activi</u>	ties Outside 1	The United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) A ctivities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	1	1	PROGRAM SERVICES	CERTIFICATION PROGRAMS	867,254
SOUTH AMERICA	0	_	GRANTS & CONTRIBUTIONS		14,798
SOUTH ASIA	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	786,104

Form 990 Schedule F	<u> Part I - Activi</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	0	=	GRANTS & CONTRIBUTIONS		11,205
SUB-SAHARAN AFRICA	0	0		CERTIFICATION PROGRAMS	153,976
SUB-SAHARAN AFRICA	0		GRANTS & CONTRIBUTIONS		23,722

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Schedule I

(Form 990)

DLN: 93493317072955

OMB No 1545-0047

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

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

Open to Public

Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number AMERICAN PETROLEUM INSTITUTE 13-0433430 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to

Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable cash valuation non-cash assistance grant or assistance or government assistance (book, FMV, appraisal, other) See Additional Data Table

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 34 30

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS	13		27,845	FAIR MARKET VALUE	AIRFARE, LODGING AND MEALS

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.									
Return Reference	Explanation								
,	ALL GRANTS ARE ASSIGNED AN API STAFF MEMBER AS THE CONTRACT OFFICER THE CONTRACT OFFICER'S RESPONSIBILITIES INCLUDE MONITORING THE ACTIVITIES OF GRANTEES, AS WELL AS THE RECEIPT AND REVIEW OF PERIODIC PROGRESS REPORTS DURING 2014, API PROVIDED SCHOLARSHIPS IN THE FORM OF AIRFARE, LODGING AND MEALS TO CERTAIN INDIVIDUALS ATTENDING THE INTERNATIONAL OIL SPILL CONFERENCE THESE SCHOLARSHIPS ARE REPORTED ON SCHEDULE I, PART III								

Schedule I (Form 990) 2014

Additional Data

Software ID:

Software Version:

EIN: 13-0433430

Name: AMERICAN PETROLEUM INSTITUTE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
100 BLACK MEN OF AMERICA INC141 AUBURN AVENUE ATLANTA,GA 30303	58-1974429	501(C)(3)	50,000				EVENT SPONSORSHIP

<u>Form 990,Schedule I, Pa</u>	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
A WIDER CIRCLE9159-C BROOKVILLE ROAD SILVER SPRING,MD 20910	52-2345144	501(C)(3)	10,000				EVENT SPONSORSHIP		

Form 990,Schedule I, Pai	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALZHEIMER'S ASSOCIATION NCAC3701 PENDER DRIVE SUITE 400 FAIRFAX,VA 22030	52-1196162	501(C)(3)	10,000				EVENT SPONSORSHIP		

<u> Form 990,Schedule I, Par</u>	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN ASSOCIATION OF BLACKS IN ENERGY 1625 K ST NW STE 405 WASHINGTON,DC 20006	84-0782569	501(C)(3)	10,000				EVENT SPONSORSHIP		

Form 990,Schedule I, Pa	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN CHEMISTRY COUNCIL INC700 2ND STREET NE WASHINGTON, DC 20002	53-0104410	501(C)(6)	70,000				RESEARCH GRANT		

<u> Form 990,Schedule I, Par</u>	orm 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN CHEMISTRY COUNCIL INC700 2ND STREET NE WASHINGTON, DC 20002	53-0104410	501(C)(6)	17,500				EVENT SPONSORSHIP		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
AMERICAN CHEMISTRY COUNCIL INC700 2ND STREET NE WASHINGTON,DC 20002	53-0104410	501(C)(6)	15,000				RESEARCH GRANT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN CONSERVATIVE UNION FOUNDATION1007 CAMERON STREET ALEXANDRIA,VA 22314	52-1294680	501(C)(3)	7,500				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN SOCIETY FOR TESTING AND MATERIALS (ASTM)100 BARR HARBOR DRIVE WEST CONSHOHOCKEN,PA 19428	23-1352024	501(C)(3)	6,000				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICANS FOR TAX REFORM722 12TH STREET NW 4TH FLOOR WASHINGTON,DC 20005	52-1403587	501(C)(4)	75,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ASSOCIATION FOR ENVIRONMENTAL HEALTH & SCIENCES FOUNDATION (AEHS)150 FEARING STREET SUITE 21 AMHERST, MA 01002	26-2624347	501(C)(3)	30,000				RESEARCH GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ASSOCIATION FOR ENVIRONMENTAL HEALTH & SCIENCES FOUNDATION (AEHS)150 FEARING STREET SUITE 21 AMHERST,MA 01002	26-2624347	501(C)(3)	13,000				EVENT SPONSORSHIP		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BOY SCOUTS OF AMERICA 9190 ROCKVILLE PIKE BETHESDA, MD 20814	43-6075050	501(C)(3)	10,000				EVENT SPONSORSHIP		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BRYCE HARLOW FOUNDATION THE1701 PENNSYLVANIA AVENUE NW SUITE 400 WASHINGTON, DC 20006	52-1266620	501(C)(3)	7,500				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BUILDING & CONSTRUCTION TRADES DEPT (BCTD) AFL-CIO815 16TH STREET NW SUITE 600 WASHINGTON, DC 20006	53-0025755	501(C)(5)	50,000				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CENTENNIAL INSTITUTE CO COLORADO CHRISTIAN UNIVERSITY 8787 W ALAMEDA AVENUE LAKEWOOD,CO 80226	84-0442429	501(C)(3)	10,000				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COLORADANS FOR RESPONSIBLE REFORMP O BOX 18950 DENVER,CO 80218	80-0517438	501(C)(6)	1,493,247				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COMMITTEE FOR ECONOMIC DEVELOPMENT 2000 L STREET NW SUITE 700 WASHINGTON, DC 20036	13-1623973	501(C)(3)	10,000				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
COMMON GROUND ALLIANCE1421 PRINCE STREE SUITE 410 ALEXANDRIA,VA 22314	41-1984081	501(C)(3)	10,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COMMUNITY LEADERS OF AMERICA5707 ABILENE TRL AUSTIN,TX 78749	46-3149989	SEC 527	10,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CONGRESSIONAL BLACK CAUCUS FOUNDATION INC 1720 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	52-1160561	501(C)(3)	100,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
CONGRESSIONAL COALITION ON ADOPTION INSTITUTE311 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20002	54-2035617	501(C)(3)	50,000				GENERAL SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CONGRESSIONAL HISPANIC CAUCUS INSTITUTE911 SECOND STREET NE WASHINGTON, DC 20002	52-1114225	501(C)(3)	55,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CONGRESSIONAL HISPANIC CAUCUS INSTITUTE911 SECOND STREET NE WASHINGTON, DC 20002	52-1114225	501(C)(3)	55,000				EVENT SPONSORSHIP		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COORDINATING RESEARCH COUNCIL INC 3650 MANSELL ROAD SUITE 140 ALPHARETTA,GA 30022	58-1483100	501(C)(3)	10,000				GENERAL SUPPORT			

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DEMOCRATIC GOVERNORS ASSOCIATION1401 K ST NW STE 200 WASHINGTON, DC 20005	52-1304889	SEC 527	50,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ENERGY EQUIPMENT AND INFRASTRUCTURE ALLIANCE INC601 PENNSYLVANIA AVE NW SUITE 900 SOUTH BLDNG WASHINGTON, DC 20004	32-0374377	501(C)(6)	75,000				RESEARCH GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ENERGY EQUIPMENT AND INFRASTRUCTURE ALLIANCE INC601 PENNSYLVANIA AVE NW SUITE 900 SOUTH BLDNG WASHINGTON, DC 20004	32-0374377	501(C)(6)	75,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ENERGY POLICY RESEARCH FOUNDATION INC1201 WISCONSIN AVENUE WASHINGTON, DC 20007	13-1512139	501(C)(6)	50,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ENVIRONMENTAL COUNCIL OF THE STATES (ECOS)50 F STREET NW SUITE 350 WASHINGTON, DC 20001	36-3962169	501(C)(6)	22,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FIGHT FOR CHILDREN1726 M STREET NW SUITE 202 WASHINGTON,DC 20036	52-1706059	501(C)(3)	11,000				EVENT SPONSORSHIP		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FORD'S THEATRE514 TENTH ST NW WASHINGTON,DC 20004	52-6073157	501(C)(3)	10,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GEORGE MASON UNIVERSITY FOUNDATION 3301 FAIRFAX DRIVE ARLINGTON,VA 22201	54-1603842	501(C)(3)	40,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GREATER NORTH DAKOTA CHAMBER OF COMMERCE PO BOX 2639 BISMARCK,ND 58502	45-0141100	501(C)(6)	107,193				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GROUND WATER PROTECTION COUNCIL 7728 EAST 98TH PLACE TULSA,OK 74133	73-1210455	501(C)(6)	200,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GROUND WATER PROTECTION COUNCIL 7728 EAST 98TH PLACE TULSA,OK 74133	73-1210455	501(C)(6)	75,000				RESEARCH GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GROUND WATER RESEARCH & EDUCATION FOUNDATION133308 N MACARTHUR BOULEVARD OKLAHOMA CITY,OK 73142	73-1271210	501(C)(3)	30,000				ENVIRONMENTAL RESEARCH			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
GROUND WATER RESEARCH & EDUCATION FOUNDATION133308 N MACARTHUR BOULEVARD OKLAHOMA CITY,OK 73142	73-1271210	501(C)(3)	10,000				GENERAL SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
IHS GLOBAL INC15 INVERNESS WAY EAST ENGLEWOOD,CO 80112	22-2721160	NONE	250,000				EVENT SPONSORSHIP		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ILLINOIS AFL-CIO534 S 2ND STREET STE 200 SPRINGFIELD,IL 62701	36-2388785	501(C)(5)	10,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ILLINOIS INSTITUTE OF TECHNOLOGY3300 S FEDERAL STREET CHICAGO,IL 60616	36-2170136	501(C)(3)	10,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
INDEPENDENT PETROLEUM ASSOCIATION OF AMERICA (IPAA)1201 15TH STREET NW SUITE 300 WASHINGTON, DC 20005	73-0296927	501(C)(6)	500,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MAHONING COUNTY DEMOCRATIC PARTY4011 HILLMAN WAY YOUNGSTOWN,OH 44512	34-1628309	SEC 527	10,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MASSACHUSETTS INSTITUTE OF TECHNOLOGY (MIT)77 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	16,500				ENERGY OUTREACH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MASSACHUSETTS INSTITUTE OF TECHNOLOGY (MIT)77 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	16,500				ENERGY OUTREACH		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MULTICULTURAL FESTIVAL OF WEST VIRGINIA INC707 VIRGINIA STREET E STE 400 CHARLESTON, WV 25301	55-0726301	501(C)(3)	7,500				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NATIONAL ASSOCIATION OF MANUFACTURERS1331 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	13-1084430	501(C)(6)	362,500				RESEARCH GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NATIONAL ASSOCIATION OF MANUFACTURERS1331 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	13-1084430	501(C)(6)	275,000				RESEARCH GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NATIONAL ASSOCIATION OF WHOLESALER- DISTRIBUTORS (LIFO COALITION)1325 G ST NW STE 1000 WASHINGTON, DC 20005	53-0188893	501(C)(6)	25,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NATIONAL BLACK CHAMBER OF COMMERCE 1350 CONNECTICUT AVENUE NW SUITE 405 WASHINGTON, DC 20036	35-1889294	501(C)(3)	22,500				RESEARCH GRANT			

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEVADA STATE AFL-CIO 1891 WHITNEY MESA DRIVE HENDERSON,NV 89014	88-0025636	501(C)(5)	15,000				EVENT SPONSORSHIP		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEW MEXICO COMMUNITY CAPITAL801 UNIVERSITY BLVD SE SUITE 102 ALBUQUERQUE,NM 87106	20-1798654	501(C)(3)	10,000				EVENT SPONSORSHIP		

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OFFSHORE ENERGY CENTER200 N DAIRY ASHFORD HOUSTON,TX 77079	76-0280571	501(C)(3)	15,000				EVENT SPONSORSHIP			

form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OFFSHORE ENERGY CENTER200 N DAIRY ASHFORD HOUSTON,TX 77079	76-0280571	501(C)(3)	10,000				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OHIO DEMOCRATIC PARTY 340 EAST FULTON STREET COLUMBUS,OH 43215	31-4165080	SEC 527	10,000				GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OHIO OIL & GAS ENERGY EDUCATION PROGRAM 1718 COLUMBUS ROAD SW GRANVILLE, OH 43023	31-1596043	501(C)(6)	200,000				ENERGY EDUCATION			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PETROLEUM ASSOCIATION OF WYOMING951 WERNER COURT SUITE 100 CASPER,WY 82601	83-0325299	501(C)(6)	20,000				RESEARCH GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PIPELINE RESEARCH COUNCIL INTERNATIONAL 3141 FAIRVIEW PARK DRIVE SUITE 525 FALLS CHURCH, VA 22042	52-2202924	501(C)(6)	60,000				RESEARCH GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PLUMBERS & PIPEFITTERS LOCAL 396493 BEV ROAD BLDG 3 BOARDMAN,OH 44512	34-0945178	501(C)(5)	100,000				EDUCATIONAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PLUMBERS & PIPEFITTERS LOCAL 396493 BEV ROAD BLDG 3 BOARDMAN,OH 44512	34-0945178	501(C)(5)	92,500				EDUCATIONAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RADIO TELEVISION DIGITAL NEWS ASSOCIATION (RTDNA) 529 14TH STREET NW STE 425 WASHINGTON, DC 20045	52-1452178	501(C)(3)	6,000				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RADIO TELEVISION DIGITAL NEWS ASSOCIATION (RTDNA) 529 14TH STREET NW STE 425 WASHINGTON, DC 20045	52-1452178	501(C)(3)	6,000				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REPUBLICAN ATTORNEYS GENERAL ASSOCIATION 1747 PENNSYLVANIA AVE NW STE 250 WASHINGTON, DC 20006	46-4501717	SEC 527	50,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REPUBLICAN GOVERNORS ASSOCIATION1747 PENNSYLVANIA AVE NW STE 250 WASHINGTON, DC 20006	11-3655877	SEC 527	75,000				GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SAJ MEDIA (GREATER WILMINGTON BUSINESS JOURNAL)219 STATION ROAD SUITE 202 WILMINGTON, DE 28405	26-0204929	NONE	40,000				EVENT SPONSORSHIP			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SMALL BUSINESS AND ENTERPRENEURSHIP COUNCIL301 MAPLE AVENUE WEST - SUITE 690 VIENNA,VA 22180	36-3756240	501(C)(4)	25,000				GENERAL SUPPORT		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
STANFORD UNIVERSITY TERMAN ENGINEERING CENTER ROOM 452 STANFORD,CA 94305	94-1156365	501(C)(3)	20,000				ENERGY EDUCATION					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
STATE REVIEW OF OIL AND NATURAL GAS ENVIRONMENTAL REGULATIONS13308 N MACARTHUR OKLAHOMA CITY, OK 73142	31-1666039	501(C)(3)	100,000				RESEARCH GRANT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
SUSTAINABLE REMEDIATION FORUMC/O KL GATES LLP 1 NEWARK CTR FL 10 10 NEWARK,NJ 07102	27-1954162	501(C)(3)	30,000				GENERAL SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
THE GEORGE WASHINGTON UNIVERSITY 45155 RESEARCH PLACE SUITE 160 ASHBURN,VA 20147	53-0196584	501(C)(3)	12,000				EDUCATIONAL SUPPORT				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
THE NATIONAL CENTER FOR AMERICAN INDIAN ENTERPRISE DEVELOPMENT953 EAST JUANITA AVENUE MESA,AZ 85204	95-2627645	501(C)(3)	15,000				EVENT SPONSORSHIP				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
UNITED STATES ASSOCIATION FOR ENERGY ECONOMICS (USAEE)28790 CHARGIN BLVD SUITE 350 CLEVELAND,OH 44122	04-2685180	501(C)(6)	15,000				EVENT SPONSORSHIP				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
US NEWS AND WORLD REPORT - US NEWS STEM SOLUTIONS125 THEODORE CONRAD DRIVE JERSEY CITY,NJ 07305	52-1399776	NONE	85,000				EVENT SPONSORSHIP				

<u> Form 990,Schedule I, Par</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
UTILITIES TELECOM COUNCIL1129 20TH STREET SUITE 350 WASHINGTON,DC 20036	52-6042453	501(C)(6)	5,100				EVENT SPONSORSHIP				

Form 990,Schedule I, Pai	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
WASHINGTON HUMANE SOCIETY4590 MACARTHUR BLVD NW STE 200 WASHINGTON, DC 20007	53-0219724	501(C)(3)	10,000				EVENT SPONSORSHIP					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
WESTERN MICHIGAN UNIVERSITYDEPARTMENT OF GEOSCIENCES 1184 ROOD HALL KALAMAZOO,MI 49008	38-2138856	501(C)(3)	18,000				EDUCATION PRO GRAM				

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DLN: 93493317072955

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization AMERICAN PETROLEUM INSTITUTE **Employer identification number**

13-0433430

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	▼ Travel for companions			
	▼ Tax idemnification and gross-up payments			
	Discretionary spending account Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		V	
	andecors, trastees, officers, including the electric birector, regulating the items effected in fine 14	2	Yes	
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 ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization	ו		
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5b		
	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			
а	The organization?	6a		
b	Any related organization?	6b		
	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	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		<u> </u>
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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)(1)-(111) 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 o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of	(F) Compensation in	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation			columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2014

Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

FIRST CLASS OR CHARTER TRAVEL - FIRST CLASS AIR TRAVEL IS LIMITED TO EXECUTIVE STAFF MEMBERS AND MAY BE BOOKED ONLY WHEN BUSINESS CLASS IS UNAVAILABLE ON QUALIFYING FLIGHTS OTHER STAFF MEMBERS MAY TRAVEL FIRST OR BUSINESS CLASS ONLY
WHEN ACCOMPANYING AN EXECUTIVE STAFF MEMBER, A MEMBER COMPANY EXECUTIVE OR GOVERNMENTAL OFFICIAL WHO TRAVELS FIRST CLASS OR BUSINESS CLASS, OR, FOR INTERNATIONAL FLIGHTS, WHEN EXTENUATING CIRCUMSTANCES JUSTIFYING TRAVELING BUSINESS CLASS FIRST OR BUSINESS CLASS AIR TRAVEL MUST BE APPROVED IN ADVANCE BY AN EXECUTIVE STAFF MEMBER, AND THE EMPLOYEE MUST PROVIDE THE JUSTIFICATION ON THE EXPENSE REPORT FIRST CLASS TRAIN PASSAGE IS AN ACCEPTABLE ALTERNATIVE TO COACH AIR FARES OF EQUAL OR GREATER VALUE IT IS NOT API'S PRACTICE TO CHARTER TRAVEL, EXCEPT IN THE LIMITED CIRCUMSTANCE IN WHICH COMMERCIAL TRAVEL SCHEDULES DO NOT ACCOMMODATE THE PRESIDENT AND CEO'S ITINERARY NO FLIGHTS WERE CHARTERED DURING 2014 TRAVEL FOR COMPANIONS - INSTANCES IN WHICH A SPOUSE ACCOMPANIES AN EMPLOYEE TRAVELING ON BUSINESS AT API EXPENSE ARE LIMITED AND APPROVED IN ADVANCE IN SUCH AUTHORIZED CASES, UNLESS THE STRICT LEGAL DEFINITION OF BUSINESS PURPOSE IS MET, THE REIMBURSEMENT IS TREATED AS TAXABLE INCOME TO THE EMPLOYEE TAX INDEMNIFICATION AND GROSS UP PAYMENTS - FOR EMPLOYEES WHO QUALIFY TO PARTICIPATE IN THE NONQUALIFIED RETIREMENT INCOME PLAN, API PAYS TAXES DUE ON THE ACCRUED BENEFITS AS THEY ARE AWARDED TO THE PARTICIPANTS THESE TAX PAYMENTS ARE TREATED AS AN ADVANCE AND NETTED FROM THE ACCRUED BENEFITS TO THE PARTICIPANTS UPON DISTRIBUTION HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES - REIMBURSEMENT OF CLUB DUES TO AN EMPLOYEE IN ANY CLUB ORGANIZED FOR PLEASURE, RECREATION, OR OTHER SOCIAL PURPOSE (I E COUNTRY CLUBS, LUNCHEON CLUBS, AND AIRLINE AND HOTEL CLUBS) IS LIMITED AND REQUIRES EXECUTIVE STAFF APPROVAL EMPLOYEES WHO HAVE BEEN REIMBURSED FOR CLUB DUES MUST ANNUALLY ACCOUNT FOR THEIR BUSINESS USE, AND NON-BUSINESS USE IS TREATED AS TAXABLE INCOME TO THE EMPLOYEE API OFFERS ALL WASHINGTON, D C EMPLOYEES AN OPPORTUNITY TO JOIN A LOCAL HEALTH CLUB AT A DISCOUNTED RATE API PAYS A PORTION OF THE DUES (\$14 75 PER SEMI-MONTHLY PAY PERIOD) AND TREATS THIS PORTION AS TAXABLE INCOME TO THE EMPLOYEE PERSONAL SERVICES - API PROVIDES AN A
PARTICIPANTS IN THE AMERICAN PETROLEUM INSTITUTE SUPPLEMENTAL BENEFIT PLANS RECEIVED CONTRIBUTIONS IN 2014 AS FOLLOWS GERARD, JACK N - \$2,050,023 - INCLUDES NONVESTED ACCRUAL OF \$782,793 NG, HARRY M - \$149,218 ROBERTSON, JOHN E - \$85,451 - INCLUDES NONVESTED ACCRUAL OF \$38,766 LINDEN, STACY R - \$38,883 - INCLUDES NONVESTED ACCRUAL OF \$22,971 ROZETT, LINDA G - \$232,641 - INCLUDES NONVESTED ACCRUAL OF \$225,191 ISAKOWER, KYLE B - \$180,437 - INCLUDES NONVESTED ACCRUAL OF \$35,775 MILITO, ERIK G - \$116,721 - INCLUDES NONVESTED ACCRUAL OF \$34,498 GRECO, ROBERT L - \$107,148 - INCLUDES NONVESTED ACCRUAL OF \$53,715 MODINE, JOHN D - \$110,279 WILLIAMS, CHARLES R - \$169,718 - INCLUDES NONVESTED ACCRUAL OF \$105,149 HANSON, ROLF W - \$76,838 FELDMAN, HOWARD J - \$43,116 WOHLSCHLEGEL, ERIC J - \$7,306 - NONVESTED ACCRUAL ONLY FELMY, JOHN C - \$11,661 THE FOLLOWING PARTICIPANT IN THE AMERICAN PETROLEUM INSTITUTE SUPPLEMENTAL BENEFIT PLANS RECEIVED A PAYMENT IN 2014 NG, HARRY M - \$66,634

Software ID: Software Version:

EIN: 13-0433430

Name: AMERICAN PETROLEUM INSTITUTE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of	fW-2 and/or1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B)
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
1 JACK N GERARD, PRESIDENT AND CEO	(I) (II)		860,240 0	1,294,280 0	837,725 0	30,003 0	5,680,943 0	0
1 HARRY M NG, GEN COUNSEL & CORP SEC UNTIL 9/30/14	(I) (II)		0	181,235 0	71,615 0	11,664 0	551,186 0	0
2 JOHN E ROBERTSON, VICE PRESIDENT AND CFO	(I) (II)		90,300	33,600 0	81,351 0	16,850 0	540,189 0	0
3 STACY R LINDEN, GEN COUNSEL & CORP SEC AS OF 10/24/1	(I) (II)	257,824 0	56,900 0	2,758 0	61,538 0	10,034 0	389,054 0	0
4 LINDA G ROZETT, VICE PRESIDENT	(I) (II)		122,700	12,810 0	264,661 0	2,705 0	808,652 0	0
5 KYLE B ISAKOWER, VICE PRESIDENT	(I) (II)		83,200 0	130,473 0	102,207	26,080 0	641,773 0	0
6 ERIK G MILITO, GROUP DIRECTOR	(I) (II)		80,700 0	66,889 0	81,160 0	26,146 0	563,302 0	0
7 ROBERT L GRECO, GROUP DIRECTOR	(I) (II)		66,200 0	65,696 0	112,435 0	29,970 0	594,814 0	0
8 LOUIS A FINKEL, EXECUTIVE VICE PRESIDENT	(I) (II)	349,680 0	87,500 0	3,351 0	59,166 0	16,423 0	516,120 0	0
9 JOHN D MODINE, VICE PRESIDENT	(I) (II)		0	95,241 0	59,508 0	26,111 0	487,873 0	0
10 CHARLES R WILLIAMS, EXEC DIR CTR FOR OFFSHORE SAFETY	(I) (II)		100,100	59,385 0	168,990 0	12,059 0	838,908 0	0
11 ROLF W HANSON, SENIOR DIRECTOR	(I) (II)		59,500 0	61,331 0	48,218 0	26,033 0	486,850 0	0
12 HOWARD J FELDMAN, SENIOR DIRECTOR	(I) (II)		44,500 0	29,048 0	99,658 0	22,244 0	436,562 0	0 0
13 ERIC J WOHLSCHLEGEL, DIRECTOR	(I) (II)	248,524 0	50,700 0	821	29,828 0	11,123 0	340,996 0	0
14 JOHN C FELMY, CHIEF ECONOMIST	(I) (II)		21,100	5,092 0	83,049 0	10,025	377,390 0	0

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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.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization AMERICAN PETROLEUM INSTITUTE	Employer identification number
	13-0433430

Return Reference	Explanation
FORM 990,	API'S EXECUTIVE COMMITTEE CONSISTS OF UP TO 14 MEMBERS OF THE BOARD (BUT NO LESS THAN 12) MEMBERS
PART VI,	INCLUDE THE APICHAIRMAN OF THE BOARD AND THE CHAIR OF THE FINANCE COMMITTEE, WITH REPRESENTATION OF THE $$
SECTION A,	TOP SIX (6) DUES-PAYING MEMBERS, AND THE REMAINING MEMBERS CHOSEN FROM THE REMAINING DUES-PAYING
LINE 1	MEMBERS THE API PRESIDENT AND CEO SERVES AS AN EX-OFFICIO VOTING MEMBER THE EXECUTIVE COMMITTEE HAS
	THE AUTHORITY TO EXERCISE ALL OF THE POWERS OF THE BOARD OF DIRECTORS IN THE ABSENCE OF ACTION BY THE
	BOARD, EXCEPT TO AMEND THE BY LAWS OR AS OTHERWISE LIMITED BY LAW ITS RESPONSIBILITIES INCLUDE LONG-
	RANGE PLANNING, STRATEGIC ISSUES, PROGRAM AND BUDGET DEVELOPMENT, OVERSIGHT AND ADMINISTRATION

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	FAMILY RELATIONSHIP HUNT, RAY L , HUNT, W HERBERT

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	API IS A TRADE ASSOCIATION WITH MEMBERSHIP DRAWN FROM THE OIL AND NATURAL GAS INDUSTRY AS DESCRIBED BELOW, API'S MEMBERS PARTICIPATE IN THE ELECTION OF THE BOARD REGULAR ELECTED BOARD MEMBERS HAVE FULL VOTING RIGHTS API'S PRESIDENT IS AN EX OFFICIO VOTING MEMBER OF THE BOARD OTHER EX OFFICIO MEMBERS DO NOT HAVE VOTING RIGHTS HONORARY DIRECTORS HAVE NO VOTING RIGHTS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE BOARD MEMBERS ARE ELECTED BY THE BOARD OF DIRECTORS AT THE ANNUAL MEETING EACH DIRECTOR SHALL HOLD OFFICE FOR A TWO YEAR TERM OR UNTIL THE DIRECTOR HAS CEASED TO HAVE A SUBSTANTIAL FULLTIME CONNECTION WITH THE MEMBER COMPANY THE DIRECTOR SERVED WHEN ELECTED

Return Reference	Explanation
VI, SECTION B, LINE	API'S FORM 990 WAS PREPARED BY API STAFF AND REVIEWED BY ITS EXTERNAL ACCOUNTING FIRM PRIOR TO FILING, THE FORM 990 WAS INCLUDED WITH THE MATERIALS FOR THE FINANCE COMMITTEE'S MEETING IN OCTOBER 2015, AND REVIEWED DURING THE MEETING A COPY OF THE FORM 990 WAS PROVIDED TO THE EXECUTIVE COMMITTEE PRIOR TO FILING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	API'S STANDARDS OF CONDUCT POLICY INCLUDES PROVISIONS RELATED TO AVOIDING ANY ACT THAT MAY RESULT IN A CONFLICT OF INTEREST ON AN ANNUAL BASIS, ALL EMPLOYEES ARE ASKED TO CONFIRM THEIR COMPLIANCE WITH THE STANDARDS OF CONDUCT POLICY ANY EMPLOYEE WHO IS AWARE OF A VIOLATION OF THIS POLICY MUST TAKE APPROPRIATE ACTION SO THAT THE VIOLATION IS PROMPTLY ADDRESSED THIS MAY INCLUDE REPORTING A VIOLATION TO AN EXECUTIVE STAFF MEMBER OR TO AN EXTERNALLY-OPERATED ETHICS HOTLINE ALL REPORTS ARE ASSIGNED TO AN APPROPRIATE EXECUTIVE STAFF MEMBER FOR INVESTIGATION AND RESOLUTION AND A REPORT OF ALL INCIDENTS ARE PROVIDED TO THE FINANCE COMMITTEE EACH YEAR THE BOARD OF DIRECTORS ADOPTED A CONFLICT OF INTEREST POLICY IN 2008 THAT REQUIRES FULL DISCLOSURE OF ALL ACTUAL AND POTENTIAL CONFLICTS THE DISINTERESTED MEMBERS OF THE API EXECUTIVE COMMITTEE SHALL MAKE A DETERMINATION AS TO WHETHER A CONFLICT EXISTS AND WHAT SUBSEQUENT ACTION IS APPROPRIATE (IF ANY) A COPY OF THE POLICY IS PROVIDED ANNUALLY TO ALL BOARD MEMBERS WHO ARE REQUESTED TO COMPLETE AND SIGN AN ACKNOWLEDGMENT AND DISCLOSURE FORM

Return Reference	Explanation
VI, SECTION B, LINE 15	COMPENSATION FOR API'S PRESIDENT & CEO, OTHER OFFICERS, AND KEY EMPLOYEES IS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE, BASED ON PERFORMANCE REVIEWS, EXTERNAL COMPARABLE DATA OBTAINED FROM CONSULTANTS, AND OTHER RELEVANT INFORMATION THE PRESIDENT & CEO'S COMPENSATION IS BASED ON A WRITTEN CONTRACT APPROVED BY THE EXECUTIVE COMMITTEE. A REVIEW WAS LAST CONDUCTED IN 2014 FOR THE PRESIDENT AND CEO, OTHER OFFICERS, AND KEY EMPLOYEES

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	NO DOCUMENTS AVAILABLE TO THE PUBLIC

Return Reference	Explanation
FORM 990, PART VI, LINE 10B	EXPLANATION OF STATE PETROLEUM COUNCILS API OPERATES STATE PETROLEUM COUNCILS LOCATED IN VARIOUS STATE CAPITALS THESE ARE NOT SEPARATE LEGAL ENTITIES BUT OPERATE AS BRANCH OFFICES OF API UNDER LOCAL TRADE NAMES THERE ARE ALSO SEVERAL UNRELATED LOCAL CHAPTERS THAT EXIST THAT MAY USE THE API NAME, BUT THEY ARE SEPARATE LEGAL ENTITIES FROM API EXPLANATION OF CENTER FOR OFFSHORE SAFETY THE CENTER FOR OFFSHORE SAFETY IS AN INDUSTRY SPONSORED PROGRAM FOCUSED EXCLUSIVELY ON GULF OF MEXICO OFFSHORE SAFETY THE CENTER FOR OFFSHORE SAFETY IS NOT A SEPARATE LEGAL ENTITY BUT OPERATES AS A BRANCH OFFICE OF API UNDER A TRADE NAME EXPLANATION OF FOREIGN REPRESENTATIVE OFFICES AS THE MARKETS FOR API'S PROGRAMS HAVE BECOME INCREASINGLY GLOBAL, API MAINTAINS OFFICES IN CHINA, UNITED ARAB EMIRATES (UAE), SINGAPORE AND BRAZIL TO SERVE INTERNATIONAL CUSTOMERS THE OFFICES ARE RESPONSIBLE FOR PROVIDING INFORMATION ABOUT API'S STANDARDS, CERTIFICATION PROGRAMS AND OTHER INDUSTRY SERVICES TO COMPANIES THROUGHOUT THE WORLD THE CHINA, UAE AND SINGAPORE OFFICES ARE NOT SEPARATE LEGAL ENTITIES BUT OPERATE AS REPRESENTATIVE OFFICES THE BRAZIL OFFICE IS A SEPARATE LEGAL ENTITY BUT HAS ELECTED TO BE TREATED AS A DISREGARDED ENTITY OF API FOR TAX PURPOSES

Return Reference	Explanation
· '	ADVOCACY CONSULTING 22,917,560 CONTRACTED AUDIT SERVICES 16,558,447 IT CONSULTING 6,277,160 OTHER CONSULTING SERVICES 6,843,386

Return Reference Explanation						
FORM 990, PART XI, LINE 9	PENSION-RELATED CHANGES OTHER THAN NET PERIODIC PENSION COSTS -30,459,589					

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

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DLN: 93493317072955

2014

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R

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

► Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization AMERICAN PETROLEUM INSTITUTE

(2) API-BRASIL CONSULTORIA LTDA

PRAIA DE BOTAFOGO 228-16 ANDAR RIO DE JANEIRO 22250-040

98-1154471

Employer identification number

13-0433430

37,518

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.													
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity								
(1) AMERICAN PETROLEUM INSTITUTE HOLDINGS LLC 1220 L STREET NW WASHINGTON, DC 20005	HOLDS A MINORITY INTEREST IN API-BRASIL CONSULTORIA LDTA	I .											

BR

CERTIFICATION PROGRAMS

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section (b)(contro entr	n 512 13) olled
					'	Yes	No
1220 L STREET NW	POLITICAL ACTION COMMITTEE/SEPARATE SEGREGATED FUND	DC	527			Yes	

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	(j))	(k)
Name, address, and EIN of	Primary activity		Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	end-of-year	allocati	ions?	amount in box	mana	ging	ownership
		(state or	entity	unrelated,		assets			20 of	partn	ier?	
		foreign		excluded from					Schedule K-1			
		country)		tax under					(Form 1065)			
				sections 512-								
				514)								
				,			Yes	No		Yes	No	
			l									

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets	1	controlled	
		country)		or trust)			1	entity?	
								Yes No	
							<i>'</i>		_

No

Schedule K (1 offil 550) 2014		Paç	
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)	1b		
c Gift, grant, or capital contribution from related organization(s)	1c		

- **f** Dividends from related organization(s)
- **g** Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)

e Loans or loan guarantees by related organization(s)

Loans or loan guarantees to or for related organization(s)

- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- **k** Lease of facilities, equipment, or other assets from related organization(s)
- 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)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- **p** Reimbursement paid to related organization(s) for expenses
- **q** Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)

2	If the answer to any of the above is "Ves	see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	
_	Ti the answer to any of the above is Tes,	see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) API POLITICAL ACTION COMMITTEE	L	47,004	FAIR MARKET VALUE - IN-KIND
(2) API POLITICAL ACTION COMMITTEE	N	103,000	FAIR MARKET VALUE - IN-KIND
(3) API POLITICAL ACTION COMMITTEE	0	161,528	FAIR MARKET VALUE - IN-KIND

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

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

4 <u> </u>													
(a) Name, address, and EIN of entity	Primary activity Legal domicile inc (state or (rel foreign country) exclud tax		(d) Predominant income (related, unrelated, excluded from tax under sections 512-	50 orga	(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
				\Box					\Box				

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
PART V,	API PAYS CERTAIN ADMINISTRATIVE EXPENSES RELATED TO THE API POLITICAL ACTION COMMITTEE THESE INCLUDE PERSONNEL AND OTHER SERVICES AND ARE PAID DIRECTLY BY API

Schedule R (Form 990) 2014