

Form **990**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

A For the 2014 calendar year, or tax year beginning JUL 1, 2014 **and ending** JUN 30, 2015

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization KIPP FOUNDATION		D Employer identification number 94-3362724
	Doing business as		E Telephone number (415)399-1556
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	135 MAIN STREET		1700
City or town, state or province, country, and ZIP or foreign postal code SAN FRANCISCO, CA 94105			G Gross receipts \$ 90,175,153.
F Name and address of principal officer: RICHARD BARTH SAME AS C ABOVE			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
J Website: WWW.KIPP.ORG			If "No," attach a list. (see instructions)
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			H(c) Group exemption number
L Year of formation: 2000			M State of legal domicile: CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO CREATE PUBLIC SCHOOLS THAT EQUIP UNDERSERVED STUDENTS WITH SKILLS TO SUCCEED IN COLLEGE & LIFE.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	14
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	236
	6 Total number of volunteers (estimate if necessary)	6	16
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	60,389,192.	63,150,784.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,413,332.	5,230,055.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	34,883.	23,452.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,317.	4,187.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	64,842,724.	68,408,478.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	25,072,623.	23,479,474.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	21,209,498.	22,813,835.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,085,119.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	21,807,809.	25,607,705.
19 Revenue less expenses. Subtract line 18 from line 12	68,089,930.	71,901,014.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	-3,247,206.	-3,492,536.
	21 Total liabilities (Part X, line 26)		
	22 Net assets or fund balances. Subtract line 21 from line 20	Beginning of Current Year	End of Year
	67,203,205.	65,449,107.	
	18,913,760.	20,652,198.	
	48,289,445.	44,796,909.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	GARFIELD BYRD, CFO Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	MAGA E. KISRIV		
	Firm's name	Firm's EIN	Check if self-employed <input type="checkbox"/> PTIN
	HOOD & STRONG LLP	94-1254756	P01008919
	Firm's address	Phone no. 415.781.0793	
	100 FIRST STREET, 14TH FLOOR SAN FRANCISCO, CA 94105		

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE PURPOSE OF THE KIPP FOUNDATION IS TO CREATE A RESPECTED, INFLUENTIAL, AND NATIONAL NETWORK OF FREE, OPEN ENROLLMENT, COLLEGE PREPARATORY PUBLIC SCHOOLS (KIPP SCHOOLS & REGIONS) THAT ARE SUCCESSFUL IN HELPING STUDENTS FROM EDUCATIONALLY UNDERSERVED

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 32,292,742. including grants of \$ 23,479,474.) (Revenue \$ 3,468,022.) NETWORK GROWTH & SUSTAINABILITY:

THE FOUNDATION PROVIDES ON-GOING ASSISTANCE TO EXISTING KIPP SCHOOLS & REGIONS IN THE AREA OF PROFESSIONAL DEVELOPMENT, CURRICULUM, INSTRUCTIONAL SUPPORT, SCHOOL OPERATIONS, SUSTAINABLE GROWTH, FUNDRAISING, AND MARKETING.

4b (Code:) (Expenses \$ 12,793,679. including grants of \$ 0.) (Revenue \$ 1,762,033.) LEADERSHIP DEVELOPMENT:

THE FOUNDATION TRAINS TEACHERS TO BE SCHOOL LEADERS AND TO ESTABLISH NEW KIPP SCHOOLS THROUGH ITS YEAR LONG KIPP SCHOOL LEADERSHIP PROGRAM (KSLP). KSLP HAS FIVE COHORTS: THE FISHER FELLOWSHIP, SUCCESSOR PREPARATION, LEADERSHIP TEAM, TEACHER LEADER, AND THE MILES FAMILY FELLOWSHIP.

THE FISHER FELLOWSHIP IS A YEAR-LONG TRAINING FOCUSED ON OPENING AND LEADING A NEW KIPP SCHOOL. SUCCESSOR PREPARATION IS AN 18-MONTH LONG TRAINING FOCUSED ON ASSUMING LEADERSHIP OF AN EXISTING KIPP SCHOOL. THE LEADERSHIP TEAM, TEACHER LEADER, AND MILES FAMILY FELLOWSHIP PROGRAMS

4c (Code:) (Expenses \$ 9,985,776. including grants of \$ 0.) (Revenue \$ 0.) RESEARCH, DESIGN & INNOVATION:

THROUGH ITS RESEARCH, DESIGN AND INNOVATION WORK, THE FOUNDATION FOCUSES ON SUPPORTING CONTINUOUS LEARNING AND IMPROVEMENT AMONG KIPP SCHOOLS AND REGIONS BY: CREATING ONGOING VISIBILITY INTO NETWORK-WIDE, REGIONAL, AND SCHOOL HEALTH AND PERFORMANCE TRENDS; GENERATING ACTIONABLE INSIGHTS; AND ENSURING HIGH QUALITY DATA AND RESEARCH SUPPORT NETWORK LEADERS IN MAKING DATA-DRIVEN DECISIONS; PROMOTING THE CODIFYING AND DISSEMINATION OF PROMISING PRACTICES AND IDEAS AS WELL AS TOOLS AND RESOURCES WHICH SUPPORT THE IMPLEMENTATION OF THESE PRACTICES AND IDEAS; HOSTING AN ANNUAL GATHERING OF KIPP'S TEACHERS, LEADERS, AND STAFF FOCUSED ON

4d Other program services (Describe in Schedule O.) (Expenses \$ 7,169,211. including grants of \$ 0.) (Revenue \$ 0.)

4e Total program service expenses 62,241,408.

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

Part IV Checklist of Required Schedules (continued)

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

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O response

Main table with columns for question number, description, and Yes/No checkboxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (14); 1b Enter the number of voting members included in line 1a, above, who are independent (8); 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? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed (AK, AL, AR, CA, CT, FL, GA, IL, KS, KY, MA, MD); 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of 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: (GARFIELD BYRD - 415-513-4114, 135 MAIN STREET, SUITE 1700, SAN FRANCISCO, CA 94105)

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(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-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KATHERINE BRADLEY BOARD MEMBER	1.00	X					0.	0.	0.	
(2) PHILIPPE DAUMAN BOARD MEMBER	1.00	X					0.	0.	0.	
(3) DORIS FISHER CO-FOUNDER, BOARD MEMBER	1.00	X					0.	0.	0.	
(4) JOHN FISHER CHAIRMAN OF THE BOARD	1.00	X		X			0.	0.	0.	
(5) REED HASTINGS BOARD MEMBER	1.00	X					0.	0.	0.	
(6) MARTHA KARSH BOARD MEMBER	1.00	X					0.	0.	0.	
(7) MICHAEL LOMAX BOARD MEMBER	1.00	X					0.	0.	0.	
(8) MARK NUNNELLY BOARD MEMBER	1.00	X					0.	0.	0.	
(9) CARRIE WALTON PENNER BOARD MEMBER	1.00	X					0.	0.	0.	
(10) EMMA BLOOMBERG BOARD MEMBER	1.00	X					0.	0.	0.	
(11) RHONDA KALIFEY-ALUISE BOARD MEMBER (THRU 4/24/15)	1.00	X					0.	0.	0.	
(12) JOSE VILLARREAL BOARD MEMBER (THRU 5/31/15)	1.00	X					0.	0.	0.	
(13) RICHARD BARTH CHIEF EXECUTIVE OFFICER	40.00	X		X			432,198.	0.	12,049.	
(14) MIKE FEINBERG CO-FOUNDER, DIRECTOR	40.00	X					187,582.	0.	33,879.	
(15) DAVID LEVIN CO-FOUNDER, DIRECTOR	40.00	X					440,769.	0.	33,923.	
(16) SUSAN SCHAEFFLER BOARD MEMBER	1.00	X		X			10,000.	0.	0.	
(17) TARUN BHATIA CHIEF FINANCIAL OFFICER (THRU 12/15)	40.00			X			206,738.	0.	33,528.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MARISELA MARTINEZ SECRETARY	1.00			X				89,214.	0.	17,734.
(19) JONATHAN COWAN RESEARCH, DESIGN & INNOVATION	40.00				X			229,249.	0.	30,397.
(20) JACK CHOROWSKY CHIEF OPERATING OFFICER	40.00				X			271,859.	0.	40,327.
(21) KELLY WRIGHT CHIEF PROGRAM OFFICER	40.00				X			236,399.	0.	18,398.
(22) DAVID WICK CHIEF DEVELOPMENT OFFICER	40.00					X		227,805.	0.	35,326.
(23) WILLIAM HIGHBAUGH GENERAL COUNSEL	40.00					X		205,431.	0.	19,210.
(24) VALERIE FAILLACE CHIEF STRATEGIC OFFICER	40.00					X		201,162.	0.	17,513.
(25) MIKE WRIGHT SENIOR RELATIONSHIP MANAGER	40.00					X		187,857.	0.	30,166.
(26) LINDA BELANS SR DIRECTOR LEADERSHIP COACHING	40.00					X		189,549.	0.	23,303.
1b Sub-total								3,115,812.	0.	345,753.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								3,115,812.	0.	345,753.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 63

	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>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MATHEMATICA POLICY RESEARCH, INC. P.O. BOX 2393, PRINCETON, NJ 08543	RESEARCH AND DATA COLLECTION SERVICES	973,851.
GREAT MINDS (COMMON CORE, INC.), 100 M STREET SE, STE 500, WASHINGTON, DC 20003	PROGRAMMING RESEARCH AND DEVELOPMENT	818,774.
EVENT TECHNOLOGY, LLC, 1629 PRIME COURT, STE 100, ORLANDO, FL 32809	TECHNICAL EVENT SUPPORT	606,973.
IDEO LP 715 ALMA STREET, PALO ALTO, CA 94301	DESIGN AND STRATEGY DEVELOPMENT FOR KIPP	571,506.
RNM 135 MAIN, LP 135 MAIN STREET, SAN FRANCISCO, CA 94105	RENT AND RENT SERVICES	561,061.

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 37

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	24,065,448.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	39,085,336.				
	g Noncash contributions included in lines 1a-1f: \$		2,862,459.				
	h Total. Add lines 1a-1f		63,150,784.				
Program Service Revenue	2 a LICENSE FEES	Business Code	900099	3,468,022.	3,468,022.		
	b SERVICE FEES & CONF		900099	1,762,033.	1,762,033.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			5,230,055.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			28,824.		28,824.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		21,761,303.					
		b Less: cost or other basis and sales expenses		21,766,675.			
		c Gain or (loss)		-5,372.			
	d Net gain or (loss)			-5,372.		-5,372.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a LOAN ORIG/PTL GUARANTY		900099	2,240.			2,240.	
b MISCELLANEOUS INCOME		900099	1,947.			1,947.	
c							
d All other revenue							
e Total. Add lines 11a-11d			4,187.				
12 Total revenue. See instructions.			68,408,478.	5,230,055.	0.	27,639.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	23,286,112.	23,286,112.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	193,362.	193,362.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,028,320.	1,245,605.	1,334,161.	448,554.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	15,796,294.	12,803,532.	2,061,098.	931,664.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	540,513.	399,979.	113,508.	27,026.
9 Other employee benefits	2,112,364.	1,538,234.	397,305.	176,825.
10 Payroll taxes	1,336,344.	988,895.	280,632.	66,817.
11 Fees for services (non-employees):				
a Management				
b Legal	45,780.	44,855.	925.	
c Accounting	229,625.		229,625.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	8,835,089.	7,457,027.	1,286,607.	91,455.
12 Advertising and promotion	36,419.	36,300.	119.	
13 Office expenses	1,607,055.	1,175,544.	391,562.	39,949.
14 Information technology	396,133.	320,468.	63,081.	12,584.
15 Royalties				
16 Occupancy	1,226,068.	916,067.	251,681.	58,320.
17 Travel	4,098,638.	3,829,535.	109,230.	159,873.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,195,831.	5,143,429.	38,934.	13,468.
20 Interest	409.	190.	206.	13.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	877,248.	333,005.	489,989.	54,254.
23 Insurance	52,901.	39,147.	11,109.	2,645.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FISCAL SPONSORSHIP TOWN	1,444,836.	1,444,836.	0.	0.
b SCHOOL LEADER TRAINING	732,930.	655,115.	77,576.	239.
c EMPLOYEE RECRUITING COS	448,195.	9,623.	437,139.	1,433.
d VIDEO PRODUCTION	90,290.	90,290.		
e All other expenses	290,258.	290,258.		
25 Total functional expenses. Add lines 1 through 24e	71,901,014.	62,241,408.	7,574,487.	2,085,119.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	35,450,810.	2	39,707,565.
	3 Pledges and grants receivable, net	19,845,058.	3	15,927,434.
	4 Accounts receivable, net	3,399,093.	4	2,918,311.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under 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' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net	1,700,000.	7	2,300,000.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	2,634,228.	9	722,416.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,411,981.		
	b Less: accumulated depreciation	10b 3,276,074.	2,188,969.	10c 2,135,907.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11	1,921,242.	13	576,157.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	63,805.	15	1,161,317.
16 Total assets. Add lines 1 through 15 (must equal line 34)	67,203,205.	16	65,449,107.	
Liabilities	17 Accounts payable and accrued expenses	11,249,404.	17	12,818,610.
	18 Grants payable		18	
	19 Deferred revenue	175,625.	19	596,322.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	7,488,731.	25	7,237,266.
	26 Total liabilities. Add lines 17 through 25	18,913,760.	26	20,652,198.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	26,139,010.	27	30,337,508.
	28 Temporarily restricted net assets	22,150,435.	28	14,459,401.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	48,289,445.	33	44,796,909.	
34 Total liabilities and net assets/fund balances	67,203,205.	34	65,449,107.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	68,408,478.
2	Total expenses (must equal Part IX, column (A), line 25)	2	71,901,014.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,492,536.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	48,289,445.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	44,796,909.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	X	

Form **990** (2014)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

2014

Open to Public Inspection

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

Name of the organization **KIPP FOUNDATION** Employer identification number **94-3362724**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see Instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	45,419,200.	52,851,211.	62,452,414.	59,585,599.	61,843,473.	282,151,897.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	45,419,200.	52,851,211.	62,452,414.	59,585,599.	61,843,473.	282,151,897.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						82,112,437.
6 Public support. Subtract line 5 from line 4.						200,039,460.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	45,419,200.	52,851,211.	62,452,414.	59,585,599.	61,843,473.	282,151,897.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	89,889.	65,082.	49,492.	35,505.	28,824.	268,792.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	10,578.	5,995.	2,442.	5,317.	4,187.	28,519.
11 Total support. Add lines 7 through 10						282,449,208.
12 Gross receipts from related activities, etc. (see instructions)					12	21,117,773.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	70.82 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	71.31 %
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer (b) below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
2a			
2b			
3a			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS

2010 AMOUNT: \$ 10,578.

2011 AMOUNT: \$ 5,995.

2012 AMOUNT: \$ 2,442.

2013 AMOUNT: \$ 5,317.

2014 AMOUNT: \$ 4,187.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2014

Name of the organization

KIPP FOUNDATION

Employer identification number

94-3362724

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization KIPP FOUNDATION	Employer identification number 94-3362724
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ 8,570,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ 7,931,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ 6,703,633.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ 3,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____ _____ _____	\$ 11,667,430.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization KIPP FOUNDATION	Employer identification number 94-3362724
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/> <hr/>	\$ 12,398,018.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization KIPP FOUNDATION	Employer identification number 94-3362724
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	54,960 SHARES OF ALTRIA GROUP	\$ 2,771,633.	12/10/14
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization KIPP FOUNDATION	Employer identification number 94-3362724
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2014

Department of the Treasury
Internal Revenue Service

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.**

Open to Public Inspection

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

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

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

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

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

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

Name of organization <p style="text-align: center;">KIPP FOUNDATION</p>	Employer identification number <p style="text-align: center;">94-3362724</p>
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 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.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2014

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10-21-14

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b 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))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2014

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ...	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?	X		566,061.
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		113,769.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		5,988.
i Other activities?		X	
j Total. Add lines 1c through 1i			685,818.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1:

THE FOUNDATION HAS A SENIOR GOVERNMENT AFFAIRS AND POLICY DIRECTOR WHO

LOBBIES TO MODERNIZE THE CHARTER SCHOOLS PROGRAM ON THE NATIONAL LEVEL.

EXPENSES IN LINE 1G AND 1H INCLUDE A PORTION OF THE SALARY OF THIS

INDIVIDUAL. EXPENSES IN LINE 1F REFER TO A PORTION OF GRANTS GIVEN BY THE

FOUNDATION TO THE KIPP SCHOOLS AND REGIONS. THESE GRANTS PRIMARILY HELP

Part IV Supplemental Information (continued)

THE REGIONS GET APPROVAL TO GROW NEW SCHOOLS, RENEW EXISTING CHARTERS, AND

ENGAGE FAMILIES. NONE OF THESE EXPENSES ARE USED FOR POLITICAL ACTIVITIES

PROHIBITED BY THE INTERNAL REVENUE CODE FOR 501 (C)(3)S.

Multiple horizontal lines for supplemental information.

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.

OMB No. 1545-0047

2014

Open to Public Inspection

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

Name of the organization **KIPP FOUNDATION** Employer identification number **94-3362724**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
- Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- Number of states where property subject to conservation easement is located ▶ _____
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____
- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
- In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
 - If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(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 _____ %
- 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 and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,065,639.	381,359.	684,280.
d Equipment		1,267,877.	775,417.	492,460.
e Other		3,078,465.	2,119,298.	959,167.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,135,907.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GUARANTEES	15,905.
(3) GOVERNMENT ADVANCE	7,221,361.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	7,237,266.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	68,804,179.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	1,840,537.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,840,537.
3	Subtract line 2e from line 1	3	66,963,642.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	1,444,836.
c	Add lines 4a and 4b	4c	1,444,836.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	68,408,478.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	72,296,715.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,840,537.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,840,537.
3	Subtract line 2e from line 1	3	70,456,178.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	1,444,836.
c	Add lines 4a and 4b	4c	1,444,836.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	71,901,014.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE FOUNDATION HAS RECEIVED RULINGS FROM THE INTERNAL REVENUE SERVICE

UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND FROM THE STATE OF

CALIFORNIA FRANCHISE TAX BOARD GRANTING EXEMPTION FROM TAXATION ON RELATED

INCOME. THE FOUNDATION MAY BE SUBJECT TO TAX ON UNRELATED BUSINESS INCOME,

IF ANY, GENERATED BY ITS INVESTMENTS.

MANAGEMENT HAS EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT

THE FOUNDATION HAS MAINTAINED ITS TAX EXEMPT STATUS AND HAS TAKEN NO

UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL

STATEMENTS. THEREFORE, NO PROVISION OR LIABILITY FOR INCOME TAXES HAS BEEN

INCLUDED IN THE CONSOLIDATED FINANCIAL STATEMENTS.

Part XIII Supplemental Information (continued)

PART XI, LINE 4B - OTHER ADJUSTMENTS:

FISCAL SPONSORSHIP RECORDED AS A LIABILITY ON FINANCIAL

STATEMENTS 1,444,836.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

FISCAL SPONSORSHIP RECORDED AS A LIABILITY ON FINANCIAL

STATEMENTS 1,444,836.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization **KIPP FOUNDATION** Employer identification number **94-3362724**

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIPP LA SCHOOLS 3601 E. FIRST STREET LOS ANGELES, CA 90022	26-1607268	501(C)(3)	2,567,070.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP HOUSTON 10711 KIPP WAY HOUSTON, TX 77099	13-3875888	501(C)(3)	1,827,522.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP DC 1003 K STREET NW, SUITE 700 WASHINGTON, DC 20001	74-2974642	501(C)(3)	1,574,362.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP MEMPHIS COLLEGIATE SCHOOLS 2670 UNION AVENUE EXTENDED #1100 MEMPHIS, TN 38112	68-0502820	501(C)(3)	1,476,429.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP BAY AREA SCHOOLS 1404 FRANKLIN STREET SUITE 500 OAKLAND, CA 94612	20-5010766	501(C)(3)	1,242,933.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP DALLAS-FORT WORTH 1401 SOUTH LAMAR STREET, LWR LEVEL DALLAS, TX 75215	82-0578155	501(C)(3)	1,060,602.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 31.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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

Schedule I (Form 990) (2014)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIPP AUSTIN PUBLIC SCHOOLS INC 8509 FM 969, BUILDING 513 AUSTIN, TX 78724	01-0639602	501(C)(3)	1,014,845.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP CHICAGO 1945 SOUTH HALSTED STREET #101 CHICAGO, IL 60608	30-0075271	501(C)(3)	988,630.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP NYC 470 7TH AVENUE, 10TH FLOOR NEW YORK, NY 10018	20-3971209	501(C)(3)	973,506.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP METRO ATLANTA 350 TEMPLE STREET NW ATLANTA, GA 30314	11-3723114	501(C)(3)	911,270.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP SAN ANTONIO 731 FREDERICKSBURG ROAD SAN ANTONIO, TX 78201	41-2090713	501(C)(3)	910,647.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP NASHVILLE 3410 KNIGHT DRIVE NASHVILLE, TN 37207	20-2799123	501(C)(3)	897,928.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP MASSACHUSETTS 90 HIGH ROCK STREET LYNN, MA 01902	74-3153091	501(C)(3)	873,076.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP ST. LOUIS 2647 OHIO AVENUE ST. LOUIS, MO 63118	01-0916759	501(C)(3)	838,569.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP JACKSONVILLE 1440 MCDUFF AVENUE NORTH JACKSONVILLE, FL 46205	26-4046741	501(C)(3)	712,561.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIPP EASTERN NORTHERN CAROLINA 320 PLEASANT HILL ROAD GASTON, NC 64127	74-2991314	501(C)(3)	712,453.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP INDIANAPOLIS 1740 EAST 30TH STREET INDIANAPOLIS, IN 77099	30-0145826	501(C)(3)	674,315.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP COLORADO SCHOOLS 451 SOUTH TEJON STREET DENVER, CO 80223	80-0037534	501(C)(3)	584,827.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS
TEAM ACADEMY CHARTER SCHOOLS INC 60 PARK PLACE SUITE 802 NEWARK, NJ 02141	01-0660264	501(C)(3)	533,068.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, PHILANTHROPIC PASS THROUGH, SCHOOL START-UP,
KIPP NEW ORLEANS 2514 THIRD STREET NEW ORLEANS, LA 70113	20-2277213	501(C)(3)	497,550.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP MINNESOTA 5034 N. OLIVER AVENUE MINNEAPOLIS, MN 55403	20-8877750	501(C)(3)	443,525.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP DELTA PUBLIC SCHOOLS 415 OHIO STREET HELENA, AR 72342	31-1807400	501(C)(3)	415,933.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP COLUMBUS 2750 AGLER ROAD COLUMBUS, OH 43224	20-8627107	501(C)(3)	380,086.	0.			PRINCIPAL PIPELINE & DEVELOPMENT, SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP BALTIMORE INC 4701 GREENSPRING AVE RM 115 BALTIMORE, MD 21209	52-2342513	501(C)(3)	362,020.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIPP ENDEAVOR ACADEMY 2700 E 18TH ST # 155 B KANSAS CITY, MO 32254	20-8552002	501(C)(3)	174,038.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP PHILADELPHIA SCHOOLS 5900 BALTIMORE AVENUE PHILADELPHIA, PA 19132	05-0546103	501(C)(3)	138,646.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP ADELANTE PREPARATORY ACADEMY 1475 SIXTH AVE, #100 SAN DIEGO, CA 92101	48-1291867	501(C)(3)	132,631.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP TECH VALLEY 1 DUDLEY HEIGHTS ALBANY, NY 12210	20-1347748	501(C)(3)	116,157.	0.			SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP REACH COLLEGE PREPARATORY 1901 NE 13TH STREET OKLAHOMA CITY, OK 73117	30-0005794	501(C)(3)	108,134.	0.			PHILANTHROPIC PASS THROUGH, FEDERAL SUB-GRANTS
KIPP CHARLOTTE 931 WILANN DRIVE CHARLOTTE, NC 28215	20-5664061	501(C)(3)	73,704.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS
KIPP TULSA COLLEGE PREPARATORY 1661 EAST VIRGIN STREET TULSA, OK 74106	11-3740269	501(C)(3)	69,075.	0.			PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
KIPPSTER OF THE YEAR (TRAVEL AND TUITION)	11	32,678.	0.		
HARRIET BALL TEACHING IN EXCELLENCE AWARD	10	100,000.	0.		
KIPP SIX AWARD	6	60,000.	684.	FAIR MARKET VALUE	

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

PART I, LINE 2:

THE FOUNDATION CHOOSES RECIPIENTS OF SCHOLARSHIPS BASED ON REVIEW OF APPLICATIONS AND RECOMMENDATIONS FROM THROUGHOUT THE KIPP FOUNDATION NETWORK. EACH GRANT HAS A SEPARATE SET OF CRITERIA AND IS REVIEWED BY FOUNDATION STAFF FOR COMPLIANCE AND MERIT.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: KIPP LA SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

Part IV Supplemental Information

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP HOUSTON

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP DC

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP MEMPHIS COLLEGIATE SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP BAY AREA SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP DALLAS-FORT WORTH

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP AUSTIN PUBLIC SCHOOLS INC

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP CHICAGO

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

Part IV Supplemental Information

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP NYC

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP METRO ATLANTA

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP SAN ANTONIO

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP NASHVILLE

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP MASSACHUSETTS

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP ST. LOUIS

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP JACKSONVILLE

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

Part IV Supplemental Information

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: KIPP EASTERN NOTHERN CAROLINA

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

NAME OF ORGANIZATION OR GOVERNMENT: TEAM ACADEMY CHARTER SCHOOLS INC

(H) PURPOSE OF GRANT OR ASSISTANCE: PRINCIPAL PIPELINE & DEVELOPMENT,

PHILANTHROPIC PASS THROUGH, SCHOOL START-UP, FEDERAL SUB-GRANTS

SCHEDULE I, PART I, LINE 2

U.S. DEPARTMENT OF EDUCATION (US ED) SCHOOL GRANTS ARE APPLIED FOR BY

THE INDIVIDUAL SCHOOLS THROUGH SUBMISSION OF DETAILED BUDGET REQUESTS,

WHICH ARE ULTIMATELY APPROVED FOR FUNDING BY THE U.S. DEPARTMENT OF

EDUCATION. UPON AWARD, GRANT LETTERS ARE PROVIDED TO EACH OF THE

SCHOOLS STATING SPECIFIC TERMS FOR COSTS ACCEPTED FOR FUNDING AND

BUDGET COMPLIANCE. IN ADDITION, A CONFERENCE CALL IS HELD DIRECTLY WITH

A U.S. DEPARTMENT OF EDUCATION REPRESENTATIVE AND A REPRESENTATIVE FROM

EACH OF THE KIPP SCHOOLS AWARDED FUNDING TO REVIEW THE AWARD

GUIDELINES. COMPLIANCE THROUGHOUT THE YEAR IS MONITORED BY THE KIPP

FOUNDATION FINANCE TEAM THROUGH THE REVIEW OF THE QUARTERLY DRAWDOWN

REQUESTS AND SITE VISITS AS APPLICABLE. EACH RECIPIENT SCHOOL IS

REQUIRED TO SUBMIT APPROPRIATE DOCUMENTATION AND RECORDS FOR ALL

EXPENSES FOR WHICH THEY ARE REQUESTING TO DRAWDOWN FUNDS. KIPP

FOUNDATION REVIEWS EACH REQUEST FOR ACCURACY AND ALLOWABILITY, IN

ACCORDANCE WITH THE ORIGINAL BUDGET REQUEST. RECIPIENT SCHOOLS ARE

SUBJECT TO AN ANNUAL SINGLE AUDIT AS APPLICABLE AND REVIEW OF SCHOOL

FINANCIAL STATEMENTS TO ENSURE THAT EACH SCHOOL RECEIVED AN UNQUALIFIED

Part IV Supplemental Information

OPINION. FINALLY, KIPP FOUNDATION PROVIDES AN ANNUAL REPORT TO THE U.S.

DEPARTMENT OF EDUCATION REGARDING FUNDS RECEIVED DURING THE PREVIOUS

FISCAL YEAR TO ENSURE COMPLIANCE.

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2014

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

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

▶ Attach to Form 990.

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

KIPP FOUNDATION

Employer identification number

94-3362724

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

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.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 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:

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2014

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) RICHARD BARTH CHIEF EXECUTIVE OFFICER	(i)	432,198.	0.	0.	10,653.	1,396.	444,247.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MIKE FEINBERG CO-FOUNDER, DIRECTOR	(i)	187,582.	0.	0.	7,764.	26,115.	221,461.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DAVID LEVIN CO-FOUNDER, DIRECTOR	(i)	440,769.	0.	0.	10,400.	23,523.	474,692.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) TARUN BHATIA CHIEF FINANCIAL OFFICER (THRU 12/15)	(i)	206,738.	0.	0.	10,400.	23,128.	240,266.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JONATHAN COWAN RESEARCH, DESIGN & INNOVATION	(i)	229,249.	0.	0.	8,400.	21,997.	259,646.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JACK CHOROWSKY CHIEF OPERATING OFFICER	(i)	271,859.	0.	0.	9,562.	30,765.	312,186.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KELLY WRIGHT CHIEF PROGRAM OFFICER	(i)	236,399.	0.	0.	9,411.	8,987.	254,797.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DAVID WICK CHIEF DEVELOPMENT OFFICER	(i)	227,805.	0.	0.	8,656.	26,670.	263,131.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) WILLIAM HIGHBAUGH GENERAL COUNSEL	(i)	197,931.	7,500.	0.	8,250.	10,960.	224,641.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) VALERIE FAILLACE CHIEF STRATEGIC OFFICER	(i)	197,388.	0.	3,774.	7,883.	9,630.	218,675.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MIKE WRIGHT SENIOR RELATIONSHIP MANAGER	(i)	187,857.	0.	0.	6,966.	23,200.	218,023.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) LINDA BELANS SR DIRECTOR LEADERSHIP COACHING	(i)	186,143.	0.	3,406.	4,864.	18,439.	212,852.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2014

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

Open To Public Inspection

Name of the organization KIPP FOUNDATION	Employer identification number 94-3362724
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Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
DORIS & DONALD FISHER FUND	DORIS FISHER-TRUSTE	266,949.	DORIS FISHE		X

Part V Supplemental Information

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: DORIS & DONALD FISHER FUND

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

DORIS FISHER-TRUSTEE AND JOHN FISHER-ADVISOR OF THE FUND.

(D) DESCRIPTION OF TRANSACTION: DORIS FISHER IS A TRUSTEE OF THE DORIS &

DONALD FISHER FUND AND JOHN FISHER IS AN ADVISOR OF THE FUND AND THE SON

OF DORIS FISHER. BOTH DORIS AND JOHN ARE ON THE BOARD OF DIRECTORS OF THE

KIPP FOUNDATION. AN EMPLOYEE OF THE DORIS & DONALD FISHER FUND SERVED AS

AN INDEPENDENT CONTRACTOR TO THE KIPP FOUNDATION.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2014

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **KIPP FOUNDATION** Employer identification number **94-3362724**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	12	2,771,633.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (SPORTING GOOD)	X	1	90,826.	FAIR MARKET VALUE
26 Other				
27 Other				
28 Other				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2014)

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

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF CONTRIBUTORS REFLECTS THE NUMBER OF DONORS, NOT THE NUMBER OF ITEMS DONATED.

Multiple horizontal lines for data entry.

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

KIPP FOUNDATION

Employer identification number

94-3362724

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMMUNITIES DEVELOP THE KNOWLEDGE, SKILLS, CHARACTER AND HABITS NEEDED

TO SUCCEED IN COLLEGE AND THE COMPETITIVE WORLD BEYOND.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

ARE YEAR-LONG TRAININGS, FOCUSING ON DEVELOPING STAFF TO TAKE OVER

LEADERSHIP ROLES (ASSISTANT PRINCIPAL, DEAN, GRADE LEVEL OR DEPARTMENT

CHAIR) WITHIN THEIR CURRENT KIPP SCHOOL.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

LEARNING, PROFESSIONAL DEVELOPMENT, AND SHARING; PROVIDING THE

TECHNOLOGY INFRASTRUCTURE AND APPLICATION DEVELOPMENT SUPPORT FOR KIPP

FOUNDATION TEAMS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

KIPP THROUGH COLLEGE:

THE FOUNDATION HAS CREATED A SET OF NATIONAL INITIATIVES AND PROGRAMS

DESIGNED TO SUPPORT AND PROVIDE RESOURCES TO LOCAL KIPP THROUGH COLLEGE

PROGRAMS ACROSS THE COUNTRY. THESE PROGRAMS INCLUDE BUILDING COLLEGE

PARTNERSHIPS, BUILDING SUPPORT FOR COLLEGE STUDENTS, SUPPORTING SITES

AND PROFESSIONAL DEVELOPMENT THROUGH TRAINING AND WEBSITE COLLABORATION

TOOLS.

TEACHING & LEARNING LABS:

THE FOUNDATION FOCUSES ON EQUIPPING TEACHERS, SCHOOLS AND REGIONS WITH

TRAINING AND RESOURCES TO MAXIMIZE THEIR INSTRUCTIONAL EFFECTIVENESS

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

Schedule O (Form 990 or 990-EZ) (2014)

432211
08-27-14

Name of the organization KIPP FOUNDATION	Employer identification number 94-3362724
---	--

AND OUTCOMES.

EXPENSES \$ 7,169,211. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 2:

DORIS FISHER IS THE MOTHER OF JOHN FISHER.

JACK CHOROWSKY IS THE BROTHER-IN-LAW OF DAVE LEVIN.

FORM 990, PART VI, SECTION A, LINE 8B:

THE AUDIT COMMITTEE AND FINANCE COMMITTEE DO NOT HAVE AUTHORITY TO ACT ON
BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11:

MEMBERS OF THE FINANCE TEAM PREPARED THE 2014 990 ORGANIZER TABS, WHICH
WERE EITHER REVIEWED BY THE CONTROLLER OR GRANTS CONTROLLER. ALL TABS WERE
REVIEWED BY LEGAL COUNSEL. THE ORGANIZER WAS FORWARDED TO HOOD AND STRONG,
LLP FOR PREPARATION OF THE FORM 990. UPON PREPARATION OF THE 990 DRAFT, THE
COMPLIANCE MANAGER, THE CONTROLLER, THE CFO, AND GENERAL COUNSEL REVIEWED
THE FIRST DRAFT. THEN, THE CEO AND PRESIDENT REVIEWED THE SECOND DRAFT. THE
DRAFT WAS SUBMITTED TO THE AUDIT COMMITTEE MEMBERS. THE AUDIT COMMITTEE
MEMBERS ARE ENCOURAGED TO REVIEW THE FORM 990 AND DIRECT THEIR QUESTIONS TO
THE CONTROLLER AND/OR GENERAL COUNSEL. UPON SATISFACTION OF ANY QUESTIONS,
THE FORM 990 IS DISTRIBUTED TO THE ENTIRE BOARD PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

OFFICERS AND DIRECTORS ARE REQUIRED TO ANNUALLY DISCLOSE INTERESTS THAT
COULD GIVE RISE TO CONFLICTS, AS DEFINED IN THE CONFLICT OF INTEREST
POLICY. KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICT OF

Name of the organization KIPP FOUNDATION	Employer identification number 94-3362724
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INTEREST ON AN ONGOING BASIS IN ACCORDANCE WITH THE CONFLICT OF INTEREST POLICY AND KIPP FOUNDATION CODE OF ETHICS, WHICH REQUIRE DISCLOSURE WHEREVER A POTENTIAL CONFLICT ARISES. IF THE BOARD DETERMINES THERE IS A CONFLICT OF INTEREST, THE CHAIRMAN OF THE BOARD SHALL, IF APPROPRIATE, REQUEST AN INVESTIGATION OF ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. THE BOARD WILL THEN VOTE ON WHETHER OR NOT TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. THE INTERESTED PERSON MAY NOT VOTE ON WHETHER THE TRANSACTION OR ARRANGEMENT IS A CONFLICT OF INTEREST NOR WHETHER IT SHOULD BE ENTERED INTO.

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

THE PROCESS FOR APPROVAL INVOLVES AN INDEPENDENT THIRD PARTY ORGANIZATION PROVIDING INFORMATION WHICH:

* PROVIDES MARKET COMPARABILITY DATA TO ASSIST THE BOARD IN MAKING DECISIONS REGARDING ANY POTENTIAL CHANGES TO THE CURRENT COMPENSATION PROGRAM,

* EVALUATES THE COMPETITIVENESS OF THE CURRENT COMPENSATION ARRANGEMENTS AND ADVISE THE BOARD ON THE RANGE OF COMPETITIVE PRACTICES FOR FUNCTIONALLY COMPARABLE POSITIONS AMONG SIMILARLY SITUATED ORGANIZATIONS PROVIDING SIMILAR SERVICES,

* PROVIDES OPINION ON THE REASONABLENESS OF THE PROPOSED COMPENSATION ARRANGEMENTS, TAKING ALL RELEVANT FACTORS INTO CONSIDERATION, TO ASSIST THE BOARD WITH ITS GOVERNANCE RESPONSIBILITIES UNDER INTERNAL REVENUE CODE SECTION 4958 AND APPLICABLE REGULATIONS, COMMONLY REFERRED TO AS THE

"INTERMEDIATE SANCTIONS" LEGISLATION, AND

432212
08-27-14

Name of the organization KIPP FOUNDATION	Employer identification number 94-3362724
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* FINALLY, SAID COMPENSATION IS APPROVED BY THE KIPP FOUNDATION'S BOARD.

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

AK,AL,AR,CA,CT,FL,GA,IL,KS,KY,MA,MD,MI,MN,MS,NC,NH,NJ,NM,NV,NY,OK,OR,PA,RI
SC,TN,UT,VA,WI,WV

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

AUDITED FINANCIAL STATEMENTS, GOVERNING DOCUMENTS, AND CONFLICT OF INTEREST
POLICY ARE AVAILABLE FOR THE SAME PERIOD OF TIME SET FORTH IN IRC 6104(D).
DOCUMENTS MAY BE VIEWED AT WWW.KIPP.ORG AND UPON REQUEST.

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

COMPUTER/SOFTWARE CONSULTING:

PROGRAM SERVICE EXPENSES	104,923.
MANAGEMENT AND GENERAL EXPENSES	18,103.
FUNDRAISING EXPENSES	1,287.
TOTAL EXPENSES	124,313.

OPERATIONS CONSULTING:

PROGRAM SERVICE EXPENSES	5,086,045.
MANAGEMENT AND GENERAL EXPENSES	877,527.
FUNDRAISING EXPENSES	62,376.
TOTAL EXPENSES	6,025,948.

CONSULTING TRAVEL EXPENSE:

PROGRAM SERVICE EXPENSES	143,158.
MANAGEMENT AND GENERAL EXPENSES	24,700.

Name of the organization KIPP FOUNDATION	Employer identification number 94-3362724
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FUNDRAISING EXPENSES	1,756.
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TOTAL EXPENSES	169,614.
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TEMPORARY ASSISTANCE:

PROGRAM SERVICE EXPENSES	501,123.
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MANAGEMENT AND GENERAL EXPENSES	86,462.
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FUNDRAISING EXPENSES	6,146.
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TOTAL EXPENSES	593,731.
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INSTRUCTIONAL CONSULTING:

PROGRAM SERVICE EXPENSES	1,352,368.
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MANAGEMENT AND GENERAL EXPENSES	233,332.
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FUNDRAISING EXPENSES	16,586.
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TOTAL EXPENSES	1,602,286.
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INSTRUCTIONAL CONSULTING TRAVEL EXPENSES:

PROGRAM SERVICE EXPENSES	269,410.
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MANAGEMENT AND GENERAL EXPENSES	46,483.
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FUNDRAISING EXPENSES	3,304.
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TOTAL EXPENSES	319,197.
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TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	8,835,089.
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