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DLN: 93493133044155

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

Open to Public Inspection

A Fo	r the	2014 ca	ılendar year, or tax year beginnin	g 01-01-2014 , and ending 12	-31-2014			
B Ch	eck ıf a	pplicable	C Name of organization NFIB SMALL BUSINESS LEGAL CENTE	D		D Em	oloyer ide	entification number
┌ Ad	dress ch	nange		IX.		62-	157044	9
Гиа	me cha	inge	% JEFF SMITH Doing business as					
┌ Ini	tıal retu	ırn						
Fir	al			ail is not delivered to street address)	Room/suite	E Tele	phone nun	nber
		mınated	53 CENTURY BOULEVARD Suite 250			(61	5)872-	5800
☐ An	nended	return	City or town, state or province, cour NASHVILLE, TN 372143682	ntry, and ZIP or foreign postal code		C Cm	e receinte	¢ 1 140 909
Г Ар	plication	n pending	NASHVILLE, IN 372143002			G Gros	ss receipts	\$ 1,149,898
			F Name and address of prir	icipal officer	H(a) Is this a gro	up returr	n for
			DONALD A DANNER 1201 F ST NW SUITE 200			subordinate	5?	┌ Yes No
			WASHINGTON, DC 20004		н	b) Are all subo	rdinates	┌ Yes ┌ No
						included?	ramates	, 165, 110
I Ta	ıx-exen	npt status	s	nsert no)	27	If "No," atta	ch a lıst	(see instructions)
J W	ebsite	e: ► W'	WW NFIB COM/FOUNDATIONS/	LEGAL-CENTER	H(c) Group exem	ption nu	mber ►
K For	m of or	ganızatıo	n Corporation Trust Associatio	n Other ►	L	Year of formation	1994 M	State of legal domicile TN
Pa	rt I	Sun	nmary					
Governance	'	THEN	describe the organization's mission FIB SMALL BUSINESS LEGAL CE FS AND THE LEGAL RESOURCE	NTER'S MISSION IS TO BE T	HE VOICE F		SINESS	IN THE NATION'S
oyell	2	Check 1	this box দ if the organization di	scontinued its operations or dis	sposed of mo	re than 25% of	ıts net a:	ssets
			·					1
Activities &			r of voting members of the govern				3	15
Ě			r of independent voting members				4	14
Ę			umber of individuals employed in o				5 6	18
4			umber of volunteers (estimate if n nrelated business revenue from P				7a	0
	1		related business taxable income fi				7a 7b	0
	+-					Prior Year	1 72	Current Year
	8	Cont	ributions and grants (Part VIII, li	ne 1 h)	🗀		8,363	1,149,672
	9		ram service revenue (Part VIII, li				0	0
Rayenue	10	Inves	stment income (Part VIII, columr	(A), lines 3, 4, and 7d)	🗆		381	226
Ċ.	11	Othe	r revenue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and 1	1e)		0	0
	12		l revenue—add lines 8 through 11			94	8,744	1,149,898
	13		ts and similar amounts paid (Part				0,744	0
	14		fits paid to or for members (Part I				0	0
	15		ries, other compensation, employe		_		c 1 10	
83		5-10		, , ,	<i>"</i>		6,148	653,677
Expenses	16a	Profe	essional fundraising fees (Part IX,	column (A), line 11e)	\cdot \cdot \cdot \vdash	1	9,898	32,662
ਡੌ	ь	Total f	fundraising expenses (Part IX, column (D), line 25) 🕨 251,712				
	17	Othe	r expenses (Part IX, column (A),	ınes 11a-11d, 11f-24e) .	🗀	41	1,733	480,673
	18	Total	expenses Add lines 13-17 (mu	st equal Part IX, column (A), li	ne 25)	1,04	7,779	1,167,012
	19	Reve	nue less expenses Subtract line	18 from line 12		-9	9,035	-17,114
Not Assets or Fund Balances					E	Beginning of Cui Year	rent	End of Year
Sets Aan	20	Total	l assets (Part X, line 16)				6,473	301,075
AB BB	21		I liabilities (Part X, line 26)		 		1,675	123,391
200	22		assets or fund balances Subtract				4,798	177,684
Pa	rt II		nature Block				,	· · · · · · · · · · · · · · · · · · ·
my k	nowled arer ha	dge and as any l	f perjury, I declare that I have examined belief, it is true, correct, and conknowledge **** nature of officer F SMITH TREASURER				on all info	
			pe or print name and title					
			Print/Type preparer's name baxter wilder	Preparer's signature baxter wilder	Date 2015-0	Check I if	PTIN P0121	2441
Pai	d		Firm's name FRMG LLP	Parici Milaci	2013-0	5-12 self-employer Firm's EIN	Ju	<u> </u>
	pare	r	Firm's address ► 401 Commerce Street	Suito 1000				5900
He	Ωn	Iv l	i iiii a annicas 🟲 401 Collillieice Stiget :	Juice 1000		Phone no (6	177) 017-2	,000

Nashville, TN 37219

□Yes □No

	990 (.	-				Page 2
Par	t III	Statement of Program S Check if Schedule O contains			TT	
1	Briefl	y describe the organization's m		o any nine in tins Fart 1.		
THE NON PURI INCL UND (A)(3 BUS)	NFIB S PROFI POSES LUDING ER SEG 3) OF T INESS IVITIE	MALL BUSINESS LEGAL CENTICORPORATION ACT IT IS AS PERMITTED BY SECTION G, FOR SUCH PURPOSES, MAKETION 501(C)(3) OF THE CODE HE CODE AND IS ORGANIZEI ("NFIB"), WHICH IS A 501(C)(S OF PROVIDING LEGAL EDU e organization undertake any si	FER IS A NONPROF ORGANIZED EXCLI 501(C)(3) OF THE KING DISTRIBUTIO DE THE LEGAL CEN DAND OPERATED (6) ORGANIZATION CATION AND REPI	JSIVELY FOR CHARIT INTERNAL REVENUE NS TO ORGANIZATIO TER IS A SUPPORTIN FOR THE BENEFIT OF N THE LEGAL CENTER RESENTATION ON ISS	CORPORATION CREATED UND TABLE, EDUCATIONAL, AND SO CODE OF 1986, AS AMENDED ONS THAT QUALIFY AS EXEMP IG ORGANZIATION PURSUANT NATIONAL FEDERATION OF I R IS ORGANIZED TO CARRY OF SUES OF BROAD PUBLIC INTE	CIENTIFIC (THE "CODE"), OT ORGANIZATIONS OT TO SECTION 509 NDEPENDENT N CHARITABLE REST
	•	or Form 990 or 990-EZ? . s," describe these new services				「Yes ▼ No
3	servi	e organization cease conductinges?		nt changes in how it con		┌ Yes ┌ No
4	exper		l (c)(4) organizations	s are required to report	ee largest program services, as the amount of grants and allocat	
4a	(Code	e) (Expenses \$ CHEDULE O FOR SUMMARY OF 2014 C		including grants of \$) (Revenue \$)
4b	(Code	e) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code	e) (Expenses \$		including grants of \$) (Revenue \$	
4d		er program services (Describe ii enses \$	n Schedule O) including grants o	f \$) (Revenue \$)
4e	Tota	l program service expenses ►	873,989			

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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>	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II"	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		Νo
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Yes	

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			厂_
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 16 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
h	If "Yes," enter the name of the foreign country			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OB		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
d	file Form 8282?	7c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
.1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	 		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14b		

Form 990 (2014) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	even	ıe Cod	e.)
			Yes	
			162	No
	Did the organization have local chapters, branches, or affiliates?	10a	1 es	No No
	Did the organization have local chapters, branches, or affiliates?	10a 10b	165	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		res	
b .1a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Tes	No
b .1a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		No
b .1a b .2a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	No
b .1a b .2a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes	No
b .1a b .2a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	No
b .1a b .2a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b .1a b .2a b c .3 .4	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b .1a b .2a c .3 .4	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No
b 1.1a b 1.2a c 1.3 1.4 1.5	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No
b .11a b .12a b c .3 .4 .15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No No
b.1a b.2a b c .3 .4 .5 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No No No

- List the States with which a copy of this Form 990 is required to be filed▶AL , AK , AZ , AR , CA , CO , CT , DC , FL , GA , HI , IL , KS , KY , ME , MD , MA , MI , MN , MS , NV , NH , NJ , NM , NY , NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- 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
- State the name, address, and telephone number of the person who possesses the organization's books and records ►JEFF SMITH 53 CENTURY BLVD SUITE 250 NASHVILLE, TN 372143682 (615)872-5800

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 vear

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

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

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

	,							,	·	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot rect	not box h ar or/tr	offic rustee	ess er	(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
(1) DAVID M GUERNSEY	1 0	x						0	34,000	203
CHAIRMAN	1 0							J	31,000	203
(2) PATTI BOSSERT	1 0								17 200	125
DIRECTOR	1 0	X						0	17,200	135
(3) THOMAS MICHAEL NOBIS	1 0									
DIRECTOR	1 0	X						0	22,663	203
(4) MARIA COAKLEY DAVID	1 0									
DIRECTOR	1 0	Х						0	22,308	203
(5) NEVIN GROCE	10									
DIRECTOR	1 0	X						0	22,000	203
(6) BETTY NEIGHBORS	10									
DIRECTOR	1 0	х						0	17,571	203
(7) KURT SUMMERS	10									
		Х						0	22,433	203
DIRECTOR (8) JAMES HERR	10									
		Х						0	16,200	203
DIRECTOR (9) BRUCE O'DONOGHUE	10									
		х						0	17,200	203
DIRECTOR (10) STEVE SCHRAMM	1 0									
(10) STEVE SCHRAMM	1 0	X						0	17,312	203
DIRECTOR	1 0									
(11) JEFF READY	1 0	l x						0	16,200	203
DIRECTOR	1 0							-		
(12) JOSE VILLA	1 0	×						0	17,512	203
DIRECTOR	1 0	<u> </u>						ľ	17,512	
(13) SHERRY WUEBBEN	1 0	x						0	22,312	203
DIRECTOR	1 0								22,312	
(14) TOM BRYCE	1 0								47.200	303
DIRECTOR	1 0	X						0	17,200	203
										Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not bo: h ar	chec x, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Former Highest compensated employee		(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(15) DONALD A DANNER PRESIDENT/CEO	1 0	х		х				0	849,211	33,417
(16) MARY BLASINSKY SVP/SECRETARY	1 0			х				0	327,461	33,821
(17) TAMMY S BOEHMS SVP/CFO	1 0			х				0	399,051	25,409
(18) JEFF SMITH TREASURER	1 0			х				0	184,908	30,196
(19) SUSAN M ECKERLY SVP	1 0			х				0	306,021	11,433
(20) KAREN R HARNED EXECUTIVE DIRECTOR	40 0			х				220,198	0	23,333
(21) BETH MILITO SENIOR EXECUTIVE COUNSEL	40 0					х		179,777	0	6,434

.b	Sub-Total	۰			
C	Total from continuation sheets to Part VII, Section A	۲			
d	Total (add lines 1b and 1c)	۲	399,975	2,348,763	166,817

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

	_		Yes	NO
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			
	Individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo

Section B. Independent Contractors

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

art VIII	Statement of Revenue Check if Schedule O contains a response or note to any lir	ne in thic Dart VIII			Г
	Check if Schedule & Contains a response of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
n <u>1</u> 2	Federated campaigns 1a				
Other Similar Amounts	b Membership dues 1b				
S E .	Fundraising events 1c				
įΣĮ,	d Related organizations 1d 405,442				
_ i i i i					
î. <u>≒</u> '					
	F All other contributions, gifts, grants, and similar amounts not included above 1f 744,230				
	Noncash contributions included in lines				
트 펀 ㅣ .	1a-1f \$	1,149,672			
7 e .		1,145,072			
e l	Business Code				
윤 '					
§					
18	·				
<u>ا</u> ۾ '					
5 1	All other program service revenue				
査 ,	g Total. Add lines 2a-2f	0			
3		226			22
4	and other similar amounts) Income from investment of tax-exempt bond proceeds	0			
5	· · · · · · · · · · · · · · · · · · ·	0			
	(i) Real (ii) Personal	-			
6	a Gross rents				
	b Less rental				
	expenses 0 0				
	or (loss)				
'	Net rental income or (loss)	U			
7	(i) Securities (ii) Other				
'	from sales of				
	assets other than inventory				
1	b Less cost or other basis and				
	sales expenses Gain or (loss)				
	d Net gain or (loss)	0			
	a Gross income from fundraising	J			
	events (not including				
	\$				
2	of contributions reported on line 1c) See Part IV, line 18				
	, a				
	Less direct expenses b				
5 6	Net income or (loss) from fundraising events 🕨	0			
9	a Gross income from gaming activities				
	See Part IV, line 19				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities	o			
	Gross sales of inventory, less				
	returns and allowances .				
	a				
	Less cost of goods sold b				
<u> </u>	Net income or (loss) from sales of inventory	0			0
-	Miscellaneous Revenue Business Code				
11					
	<u> </u>				ļ
					1
	All other revenue				-
•	• Total. Add lines 11a-11d	0			
12	Total revenue. See Instructions				

	990 (2014)				Page 10
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ione must comr	Nete column (A.)	
Jeetic	Check if Schedule O contains a response or note to any line in this				
Do no	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	243,531	243,531		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	301,203	301,203		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	78,460	78,460		
10	Payroll taxes	30,483	30,483		
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	168,206	161,244		6,962
c	Accounting	12,457		12,457	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	32,662			32,662
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	71,350	1,780	0	69,570
12	Advertising and promotion	10,756	10,756		
13	Office expenses	190,858	28,788	19,552	142,518
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	24,899	16,938	7,961	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,147	806	1,341	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	0			
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)				
а					
b					
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,167,012	873,989	41,311	251,712
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

CA Segmaning of year	· · ·			Check if Schedule O contains a response or note to any line in this Part X	artx
1	(B)				
2 Savings and temporary cash investments 252,468 2 3 1 1 1 1 1 1 1 1 1	End of year	-		1 Cach per interest hearing	1
3	·				
A Accounts receivable, net 0 4	<u> </u>		· · · · · · · · · · · · · · · · · · ·		
10 10 10 10 10 10 10 10	<u>'</u>				
### Schedule L Complete Part II of Schedule C Complete Part	0	4	0		
Section 4958 (f)(1)), persons described in section 4958 (c)(3)(8), and contributing section 4958 (f)(1)), persons described in section 4958 (c)(3)(8), and contributing employers and sponsoring organizations of section 501 (c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L	. 0	5	0	employees, and highest compensated employees Complete Part II of	5
10a				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'	
10a				7 Notes and leans recovable not	7
9					,
10a					
b Less accumulated depreciation			401	10a Land, buildings, and equipment cost or other basis Complete Part	
11	ic	100	0		h
12					
13 Investments—program-related See Part IV, line 11	<u> </u>				
14					
15	-				
16 Total assets. Add lines 1 through 15 (must equal line 34)					
17 Accounts payable and accrued expenses		-			
18 Grants payable	,				
19 Deferred revenue	· · · · · · · · ·		,	' '	
20 Tax-exempt bond liabilities					
21 Escrow or custodial account liability Complete Part IV of Schedule D					
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					
key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	21	0	·	: 1
24 Unsecured notes and loans payable to unrelated third parties				key employees, highest compensated employees, and disqualified	
24 Unsecured notes and loans payable to unrelated third parties					
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				· · · · · · · · · · · · · · · · · ·	25
and other liabilities not included on lines 17-24) Complete Part X of Schedule D	4 0	24	0	· ·	24
26 Total liabilities. Add lines 17 through 25	5 53,663	25	54 784	and other liabilities not included on lines 17-24) Complete Part X of Schedule	25
Organizations that follow SFAS 117 (ASC 958), check here ► and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets			· · · · · · · · · · · · · · · · · · ·		26
27 Unrestricted net assets 194,798 27 28 Temporarily restricted net assets 0 28 29 Permanently restricted net assets 0 29 Organizations that do not follow SFAS 117 (ASC 958), check here □ and □ □ □ □ □ □ □ □ □	, 125,651	20	101,010	Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete	120
28 Temporarily restricted net assets	7 177,684	27	194 798	- · ·	27
29 Permanently restricted net assets	<u> </u>		· ·		
Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and					
Torganizations that do not follow SPAS 117 (ASC 956), check here F and	-	29		·	29
⊾ complete lines 30 through 34.				complete lines 30 through 34.	
	0	30		· · · · · · · · · · · · · · · · · · ·	30
30 Capital stock or trust principal, or current funds				· · · · · · · · · · · · · · · · · · ·	
32 Retained earnings, endowment, accumulated income, or other funds					
33 Total net assets or fund balances			194.798	· , , , , , , , , , , , , , , , , , , ,	
34 Total liabilities and net assets/fund balances	,		· · · · · ·		

Par	Reconcilliation 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		1,:	149,898
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,:	167,012
3	Revenue less expenses Subtract line 2 from line 1	3			-17,114
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			194,798
5	Net unrealized gains (losses) on investments	5		<u> </u>	131,730
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			177,684
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	ne 2с	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
За	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?	е	За		No
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		3b		

efile GRAPHIC print - DO NOT PROCESS

hospital's name, city, and state _

As Filed Data -

DLN: 93493133044155

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

2

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

Name of the organization NFIB SMALL BUSINESS LEGAL CENTER

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

Open to Public Inspection **Employer identification number** 62-1570449 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)

5	ı	An organization ope	rated for the bene	fit of a college or unive	ersity owned o	r operated by	a governmental unit de	escribed in	
		section 170(b)(1)(A	(Complete	Part II)					
6	Γ	A federal, state, or l	ocal government o	or governmental unit d	escribed in se	ction 170(b)(1)(A)(v).		
7 8	Г Г	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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)							
9	,	· · · · · · · · · · · · · · · · · · ·					ibutions, membership 1	ees and aross	
,	,						and (2) no more than 3		
		·		•	_	•	section 511 tax) from		
		• • • •				•	•	Dusillesses	
40	_	-		e 30, 1975 See secti					
10	<u> </u>		•	ed exclusively to test	•	- ·			
11 a	ন ন	one or more publicly the box in lines 11a Type I. A supporting supported organizat	supported organi through 11d that gorganization ope ion(s) the power to	zations described in s describes the type of rated, supervised, or c o regularly appoint or c	ection 509(a) supporting or controlled by i elect a majorit	(1) or section ganization and ts supported o	ctions of, or to carry o 509(a)(2) See sectio complete lines 11e, 1 rganization(s), typical cors or trustees of the	n 509(a)(3). Check 1f, and 11g ly by giving the	
b	Γ	Type II. A supportin	ig organization su supporting organiz	zation vested in the sa	ın connection		orted organization(s), b manage the supported		
С	Г				operated in co	onnection with	, and functionally integ	rated with, its	
	_			ctions) You must com					
d	l	not functionally inte	grated The organ		satisfy a dist	rıbutıon requir	with its supported org rement and an attentiv		
е	Γ						ıs a Type I, Type II, T	ype III functionally	
_				ly integrated supporting					
t				zations					
g		Provide the following	g information abou	it the supported organ	ızatıon(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 o listed in you docum	r governing	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)	
				macractions))	Yes	No			
(A) N	FIB INC	0	940707299	09	Yes		0	0	
Total	. ⊥		I	I		1	I 0	1	

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	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	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
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)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organizations	on ala not check	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) 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 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

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%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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	Α.	ΑII	Supporting	Orga	nizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Yes	
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		No
За	Did the organization have a supported organization described in section $501(c)(4)$, (5) , or (6) ? If "Yes," answer (b) and (c) below.	3a	Yes	
Ь	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	Yes	
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с	Yes	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I , answer (b) and (c) below.	4a		Νo
Ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ 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.	4 c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		No
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		No
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		No
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		No
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		No
Ь	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		No
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		No
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		No
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		No
ь	A family member of a person described in (a) above?	11b		Νo

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Νo

Par	t IV Supporting Organizations (continued)			
Se	ection 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.	1	Yes	
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.	2		No
Se	ection 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		
Se	ection D. All 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?	1		
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).	2		
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.	3		
	ation E. Tuna III Functionally Integrated Comparting Organizations			
	The organization is the parent of each of its supported organizations. Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
а	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.	2a		
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.	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	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? <i>Provide details in Part VI</i> .	3a		
Ь	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.	3b		

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

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
ype	[]	II 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)	1		
а	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

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

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year						
1 Amounts paid to supported organizations to accom							
2 A mounts paid to perform activity that directly furthexcess of income from activity	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 exemp	ot purposes of supported org	anızatıons					
4 Amounts paid to acquire exempt-use assets							
5 Qualified set-aside amounts (prior IRS approval rec	nured)						
6 Other distributions (describe in Part VI) See instru	JCTIONS						
7 Total annual distributions. Add lines 1 through 6							
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide					
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 requiredsee instructions)							
3 Excess distributions carryover, if any, to 2014							
a From 2009							
b From 2010							
c From 2011							
d From 2012							
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 pplied 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 From 2010							
b From 2011							
c From 2012							
d From 2013							

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
PART I, LINE 11G(A)(VI)	NFIB SMALL BUSINESS LEGAL CENTER PROVIDES A VOICE FOR SMALL BUSINESS IN
PART IV, LINE 3C	DURING 2014, NFIB SMALL BUSINESS LEGAL CENTER DID NOT PROVIDE ANY

Schedule A (Form 990 or 990-EZ) 2014

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DLN: 93493133044155

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

Name of the organization **Employer identification number** NFIB SMALL BUSINESS LEGAL CENTER 62-1570449 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 Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 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? 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Γ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located **\(\mathbb{F}_{\top}\)** 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

Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t IIII Organizations Maintaining Co	llections of Ar	t, His	tori	cal Tr	easur	es, or O	the	Similar As	ssets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, ch	neck a	any of t	the follo	wing that a	re a	significant us	e of its	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams			
b	Scholarly research		e	Γ	Other	-					
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and expla	aın hov	w they	/ furthe	r the or	ganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit								ılar	_ v	 .
Dai	assets to be sold to raise funds rather than rt IV Escrow and Custodial Arrang								oc" to Form	Yes	No
Гa	Part IV, line 9, or reported an ar						answere	u i	25 (0 1 0 1 1 1 1	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interm	ediary	for c	ontrıbu	tions or	other ass	ets r	ot	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	e follov	ving t	able		г				
							-		Aı	mount	
С	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on F	orm 990, Part X, lın	ne 21,	for es	crow o	rcusto	dial accou	nt lıa	bility?	☐ Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	e expla	anatı	n has	been pr	ovided in F	art >	KIII		Γ
Pa	rt V Endowment Funds. Complete							_			
- -	Daniming of warmhalana	(a)Current year	(b))Prior y	/ear	b (c) Two	o years back	(d)	hree years back	(e)Four y	years back
1a L	Beginning of year balance							┢		 	
b	Contributions							┢		 	
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
f	and programs							\vdash			
q	End of year balance							+			
_	,	rent was and halan	l (lin	. 1		n (a)) h	ald an	<u> </u>			
2	Provide the estimated percentage of the cur	rent year end balan	ice (iin	ie Ig,	colum	n (a)) ne	eid as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🗠										
С	Temporarily restricted endowment										
За	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the posse		-ation 1	+6-+-	ra bala		ministara	1 60 -	th a		
Зa	organization by	ssion of the organiz	Zationi	LIIaL a	ne nero	ı anu au	IIIIIIStere	וטו ג	uie	Yes	No
	(i) unrelated organizations								3a	(i)	
	(ii) related organizations								3a	(ii)	
b	If "Yes" to 3a(II), are the related organization							•	3	Bb	
4	Describe in Part XIII the intended uses of the							1 1 .	F 000 D	- 1 7) / 1	
Pa	rt VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		tne o	rgan	izatior	n answe	erea Yes	το	Form 990, P	art IV, II	ine
	Description of property				a) Cost o	or other estment)	(b)Cost or basis (ot		(c) Accumula depreciation		Book value
1a	Land			+						_	
	Buildings						1			\neg	
	Leasehold improvements									\neg	
	Equipment									\neg	
	Other									\dashv	
	I. Add lines 1a through 1e (Column (d) must e			ımn (l	3) line	10(c))					

Part VII Investments—Other Securities. Co	omplete if the organization	n answered 'Yes' to For	rm 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value	(c) Method of v	
(Including name of security) (1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<u>*</u>		
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	Complete if the organization	on answered 'Yes' to Fo	orm 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of v	aluation
		Cost or end-of-year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. Complete if the organization		0, Part IV, line 11d See	
(a) Desc	cription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization.		to Form 990 Part IV	
Form 990, Part X, line 25.	janization answered Yes	to roilli 990, Part IV,	e 11e 01 111. See
1 (a) Description of liability	(b) Book value		
Federal income taxes	0]	
DUE TO AFFILIATES	25,693	1	
VACATION ACCRUAL	24,725	4	
PAYROLL TAX LIABILITY	3,245	4	
]	
		1	
]	
		1	
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	> 53,663	1	
2 Liability for uncertain tay necitions. In Part VIII. provi			- l - k - k k - k k - k

Part	: XI		evenue per Audited Financial Sta ered 'Yes' to Form 990, Part IV, line :		nts W	ith Re	venue ¡	oer F	Return Complete If
1	Tota		support per audited financial statements					1	1,153,938
2	A mo	unts included on line 1 but	not on Form 990, Part VIII, line 12						
а	Net	ınrealızed gaıns (losses) o	on investments	2a					
b	Dona	ited services and use of fa	cilities	2b			4,040		
c	Reco	veries of prior year grants		2c					
d	Othe	r (Describe in Part XIII)		2d					
e	Add	lines 2a through 2d .		·				2e	4,040
3	Subt	ract line 2e from line 1 .						3	1,149,898
4	A mo	unts included on Form 990), Part VIII, line 12, but not on line 1						
а	Inve	stment expenses not inclu	ided on Form 990, Part VIII, line 7b .	4a					
b	Othe	r (Describe in Part XIII)		4b					
c	Add	lines 4a and 4b		·				4c	
5	Tota	I revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	12)				5	1,149,898
Part	XII		openses per Audited Financial Sta Swered 'Yes' to Form 990, Part IV, line			Vith E	xpenses	s per	Return. Complete
1	Tota	expenses and losses per	audited financial statements					1	1,171,052
2	A mo	unts included on line 1 but	not on Form 990, Part IX, line 25						T
а	Dona	ited services and use of fa	cilities	2a			4,040		
b	Prior	year adjustments		2b					
c	Othe	rlosses		2c					
d	Othe	r (Describe in Part XIII)		2d					
e	Add	lines 2a through 2d						2e	4,040
3	Subt	ract line 2e from line 1 .						3	1,167,012
4	A mo	unts included on Form 990), Part IX, line 25, but not on line 1:						
а	Inve	stment expenses not inclu	ded on Form 990, Part VIII, line 7b	4a]	
b	Othe	r (Describe in Part XIII)		4b					
C	Add	lines 4a and 4b						4c	
5		-	d 4c. (This must equal Form 990, Part I, lir	ne 18)				5	1,167,012
Part	XIII	Supplemental Info	ormation						
Part		4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and						ide any additional
	R	eturn Reference	Explanation						
FIN 48	•	TOPIC 740)	SCHEDULE D, XIII THE LEGAL CENTER ON RELATED INCOME UNDER THE PRO REVENUE CODE AS AN ENTITY DESCR HOWEVER, SUBJECT TO FEDERAL AND INCOME THE LEGAL CENTER DID NOT LIABILITY FOR THE THE YEARS ENDED CENTER HAVE ANY UNCERTAIN TAX P AND 2013	VISIO IBED U STATE HAVE DECE	NS OF JNDER E INCC ANY U MBER	SECTI 501(C) ME TA JNRELA 31, 20	(ON 501(7) (3) THE XON UNI ATED BUS 14 AND 2	A)OF LEGA RELA SINES 013,	THE INTERNAL L CENTER IS, TED BUSINESS S INCOME TAX NOR DID THE LEGAL

Jenedale 2 (1 31111 33 3) 23 13		1 age 2				
Part XIII Supplemental Information	on (continued)					
Return Reference	Explanation					
l						
-						

Schedule D (Form 990) 2014

DLN: 93493133044155

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. ► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

Employer identification number

VFI	B SMALL BUSINESS LEGA	LCENTER						
•••						62-1570	449	
Pa		i vities. Complete if ired to complete thi		janizatio	on answered "Yes" to	Form 990, Part	IV, l	ine 17. Form 990-E
1	Indicate whether the organ	nızatıon raısed funds t	hrough ar	ny of the i	following activities Che	ck all that apply		
а	Mail solicitations		-	e	Solicitation of non		s	
ь	Internet and email sol	ıcıtatıons		f	Solicitation of gov	_		
С	Phone solicitations			q	Special fundraising	_		
d	▼ In-person solicitation	s		J		•		
2a	Did the organization have or key employees listed in							Γ _{Yes} Γ Ν
b	If "Yes," list the ten highe to be compensated at leas			fundraise	rs) pursuant to agreeme	ents under which th	ie fun	draiser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser hav custody or control of contributions		(iv) Gross receipts from activity	(v) A mount paid (or retained by fundraiser listed col (i))	(vi) A mount paid to (or retained by) organization
			Yes	No				
1	NATIONAL CAPITAL TELESERVICES LLC	TELE MARKETING		No	54,140	32,	662	21,478
2								
3								
4								
5								
6								
7								
8								
9								
10								
Γot	al			.▶	54,140	32,	662	21,478

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC. ND. OH. OK. OR. PA. RI. SC. SD. TN. TX. UT. VT. VA. WA. WV. WI. WY

Pa	rt I	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribu	tion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lir	ne 18, or reported les 1 and 6b. List				
		3 1 3	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))				
			(event type)	(event type)	(total number)	(3)				
Revenue	1	Gross receipts								
φΛΦ	2	Less Contributions								
<u>~</u>	3	Gross income (line 1 minus line 2)								
	4	Cash prizes								
ဟ	5	Noncash prizes								
suse	6	Rent/facility costs								
Expenses	7	Food and beverages .								
Direct	8	Entertainment								
ᇫ	9	Other direct expenses .								
	10	Direct expense summary Add line	es 4 through 9 in colum	n (d)		()				
	11	Net income summary Subtract lir								
Par	t II			"Yes" to Form 990, Pa	irt IV, line 19, or rep	orted more than				
		\$15,000 on Form 990-EZ, lin	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add				
Revenue			(a) billigo	bingo/progressive bingo		col (a) through col				
<u>~</u>	1	Gross revenue								
နှင့် မေ	2	Cash prizes								
Expenses	3	Non-cash prizes								
	4	Rent/facility costs								
Direct	5	Other direct expenses								
	6	Volunteer labor	✓ Yes	Г Yes% Г No	│ Yes					
	7	Direct expense summary Add lines	s 2 through 5 ın column	(d)	•					
	8	Net gaming income summary Subt	ract line 7 from line 1, c	column (d)						
9	E n	ter the state(s) in which the organiza	tion conducts gaming a	ctivities						
а		the organization licensed to conduct		•		Г _{Yes} Г _{No}				
b	If"	If "No," explain								
10a b		ere any of the organization's gaming l	icenses revoked, suspe	ended or terminated during						

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3					
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity							
	formed to administer charitable gaming	J ²		Г _{Yes} Г	— No					
13	Indicate the percentage of gaming acti		1 1	,						
а	The organization's facility		13a		%					
b	An outside facility				%					
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records							
	Name ▶									
	Address ►									
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming							
154				┌ Yes 「	– _{No}					
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization > \$ and the							
c	If "Yes," enter name and address of the third party									
	Name 🟲									
	Address 🏲									
16	Gaming manager information									
	Name ▶									
	Gaming manager compensation 🕨 \$		······							
	Description of services provided									
	Director/officer	_ Employee	☐ Independent contractor							
17	Mandatory distributions									
а	Is the organization required under state	Is the organization required under state law to make charitable distributions from the gaming proceeds to								
	retain the state gaming license?									
b	Enter the amount of distributions requi	Enter the amount of distributions required under state law distributed to other exempt organizations or spent								
	ın the organization's own exempt activi		·							
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr							
	Return Reference		Explanation							

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DLN: 93493133044155

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

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

Open to Public Inspection

Name of the organization **Employer identification number** NFIB SMALL BUSINESS LEGAL CENTER 62-1570449 Part I Questions Regarding Compensation

		_		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the fig. 990, Part VII, Section A, line 1a Complete Part III to provide any re				
	First-class or charter travel Housing	allowance or residence for personal use			
	Travel for companions Payment	s for business use of personal residence			
	Tax idemnification and gross-up payments Health o	social club dues or initiation fees			
	✓ Discretionary spending account ✓ Personal	services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow reimbursement or provision of all of the expenses described above? I		1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allo	_		103	
	directors, trustees, officers, including the CEO/Executive Director, re	garding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to e	stablish the compensation of the			
3	organization's CEO/Executive Director Check all that apply Do not a used by a related organization to establish compensation of the CEO,	check any boxes for methods			
	Compensation committee Written 6	mployment contract			
	☐ Independent compensation consultant ☐ Compens	sation survey or study			
	Form 990 of other organizations Approva	by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section or a related organization	A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?				
c	Participate in, or receive payment from, an equity-based compensation	n arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applical	ole amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must comple	ete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the ocompensation contingent on the revenues of	rganization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	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 ocompensation contingent on the net earnings of	rganization pay or accrue any			
а	The organization?		6a		No
b	Any related organization?		6b		Νo
	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 opayments not described in lines 5 and 6? If "Yes," describe in Part II		7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pusubject to the initial contract exception described in Regulations secon Part III		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presusection 53 4958-6(c)?	mption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(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	\Box	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 DONALD A DANNER, PRESIDENT/CEO	(i) (ii)	553,052	136,600	0 159,559	0 11,911	0 21,506	0 882,628	0
2 MARY BLASINSKY, SVP/SECRETARY	(i) (ii)	230,917	0 46,420	0 50,124	0 12,071	0 21,750	0 361,282	0
3 TAMMY S BOEHMS, SVP/CFO	(i) (ii)	302,770	0 59,130	0 37,151	0 12,327	0 13,082	0 424,460	0
4 JEFF SMITH, TREASURER	(i) (ii)	0 166,416	0 16,400	0 2,092	9,807	0 20,389	0 215,104	0
5 SUSAN M ECKERLY, SVP	(i) (ii)	0 106,851	0	0 199,170	3,813	7,620	0 317,454	0
6 KAREN R HARNED, EXECUTIVE DIRECTOR	(i) (ii)	200,856	15,282 0	4,060 0	7,655 0	15,678 0	243,531	0
7 BETH MILITO, SENIOR EXECUTIVE COUNSEL	(i) (ii)	169,892	8,325 0	1,560 0	6,294	140 0	186,211	0 0

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Also complete this part for any addition	ilai iliorination
Return Reference	Explanation
DISCRETIONARY SPENDING ACCOUNT	SCHEDULE J, PART I, LINE 1 THE EXECUTIVE DIRECTOR AND SENIOR EXECUTIVE COUNSEL OF THE COMPANY RECEIVE CELLULAR PHONE/DATA SERVICE ALLOWANCE IN COMPLIANCE WITH IRS CODE SECTION 132, THESE FRINGE BENEFITS ARE TREATED AS TAXABLE SALARY, SUBJECT TO WITHHOLDING, ON THE EMPLOYEE'S W-2
RELATED ORGANIZATION	SCHEDULE J, PART I, LINE 3 NFIB SMALL BUSINESS LEGAL CENTER RELIES ON THE NATIONAL FEDERATION OF INDEPENDENT BUSINESS, INC , A RELATED ORGANIZATION, TO ESTABLISH THE EXECUTIVE DIRECTOR'S COMPENSATION NATIONAL FEDERATION OF INDEPENDENT BUSINESS, INC USES ONE OR MORE OF THE METHODS DESCRIBED ON SCHEDULE J, LINE 3 TO ESTABLISH THE EXECUTIVE DIRECTOR'S COMPENSATION SCHEDULE J, PART I, LINE 4A Susan Eckerly received severance payments per a separation agreement in the amount of \$38,676 94 per month for a period of four and one-half months and one payment of \$23,730 53
SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	SCHEDULE J, LINE 4B NFIB PROVIDES A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN (SERP) THIS NONQUALIFIED PLAN COVERS DONALD A DANNER, MARY BLASKINSKY, TAMMY S BOEHMS AND STEPHEN WOODS PARTICIPATION IN THIS SERP HAS BEEN FROZEN AND FUTURE BENEFIT ACCRUALS FOR THE PLAN HAVE CEASED
INCENTIVE COMPENSATION PLAN	SCHEDULE J, LINE 7 THE EXECUTIVE DIRECTOR AND SENIOR EXECUTIVE COUNSEL OF NFIB SMALL BUSINESS LEGAL CENTER PARTICIPATE IN AN INCENTIVE COMPENSATION PLAN WITH A PORTION OF THE INCENTIVE BASED ON MANAGEMENT'S REVIEW OF THEIR PERFORMANCE DURING THE YEAR

Schedule J (Form 990) 2014

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OMB No 1545-0047

2014

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization	Employer identification number
NFIB SMALL BUSINESS LEGAL CENTER	
	62-1570449

Return Reference	Explanation
	FORM 990, PART I, LINE 6 IN 2014, THE NFIB SMALL BUSINESS LEGAL CENTER USED THE SERVICES OF eighteen VOLUNTEERS THE LEGAL CENTER HAS A twelve MEMBER ADVISORY BOARD CONSISTING OF PRO BONO ATTORNEYS ADVISING THE LEGAL CENTER OF WHICH CASES TO GET INVOLVED IN HELPING SMALL BUSINESSES THE LEGAL CENTER ALSO HAD SIX PRO BONO ATTORNEYS WRITE LEGAL BRIEFS FOR THE CENTER

SUMMARY OF LECAL HERMAN LOSS SUFFEED ON THE LOSS AS WILL DETERMINE WEET-PETCHT SURF ARE REPMITTED FOR JUNE AND THE LOSS ARE REPMITTED FOR JUNE AND THE LOSS AND THE LOS
I VIDENCE UPON FILING A MOTION BECAUSE THIS WOULD GIVE PLAINTIFFS AN UNFAIR ADVANTAGE OVER

Return Reference	Explanation	
	SUMMARY OF LEGAL CASES FOR 2014	F-REGULATORY INDIANA COURT OF APPEALS INDIANA IS HOME TO HUNDREDS OF SMALL BUSINESSES THAT OF OFFRATE DEER AND ELK HUNTING PRESERVES ACTIVISTS HAVE PRESSURED THE STATE FOR YEARS TO SHUT THEM DOWN SEVERAL YEARS AGO OFFICIALS FROM THE INDIANA DEPARTMENT OF NATURAL RESOUR CSS (DNR) PASSED A RULE BANNING THE CLOSED HUNTING PRESERVES A CIRCUIT COURT RULLED IN FAV OR OF NFIB MEMBER RODNEY STONE FINDING THAT DINR OVERSTEPHED ITS AUTHORITY BY TRYING TO CLO SE THE BUSINESSES. THE INFIB SMALL BUSINESS LEGAL CENTER A SUPPORTING MR STONE IN THE STA TES APPEAL STATUS PRODING INFIB SMALL BUSINESS LEGAL CENTER A MICUS BRIEF FILED \$1/4/14 COURT RULLED IN FAVOR OF MR STONE AND THAT THE STATE REQUESTED REVIEW BY SUPPRIEW COURT THE SMALL BUSINESS LEGAL CENTER AMICUS BRIEF FILED \$1/4/14 COURT RULLED IN FAVOR OF MR STONE AND TATE REQUESTED REVIEW BY SUPPRIEW COURT THE SMALL BUSINESS LEGAL CENTER AMICUS BRIEF FILED OPPOSING REVIEW ON 3/27/15 DEPARTMENT OF TRANSPORTATION V ASSOCIATION OF AMERICAN RALROADS. SEGLAL CENTER AMICUS BRIEF FILED OPPOSING REVIEW ON 3/27/15 DEPARTMENT OF TRANSPORTATION V ASSOCIATION OF AMERICAN RALROADS. SUCH A DELEGATION ACCORDING TO THE D.C. CIRCUIT, VI OLATES A "COUSIN" OF THE CONSTITUTIONAL LOND ADELEGATION DOCTRINE STATUS DECIDED IN B SMALL BUSINESS LEGAL CENTER AMICUS BRIEF FILED 9/29/14 DECIDED 3/9/15 - HELD AMTRAK IS A GOV ERNIMENT BODY DIRECT MARKETING ASSOC V BROHL - TAX IS SUPPREME COURT THE CASE STEMS FRO MA A CHALLENGE OF A COLORADO NOTICE AND REPORTING LAW REQUIRING OUT-OF-STATE MERSCHAMIST TO D ISCLOSE CONFIDENTIAL PURCHASE HISTORY INFORMATION STHAT ON THE FIRE PEDEAL COURTS MAY AY HEAR CONSTITUTIONAL CHALLENGES TO STATE REGULATIONS THAT ONLY INDIRECTLY RELATE TO STATE FIRED SHAFFED EXCLOSED THE STATE FIRED SHAFFED EXCLOSED FIRED SHAFFED SHAFFED EXCLOSED FIRED SHAFFED SHAFFED EXCLOSED FIRED SHAFFED SHAFFED EXCLOSED FIRED SHAFFED

SUMMARY OF LESAL CASES FOR CITY OF SANBEL. FLORDA BNACTED AN ORDINANCE PROHIBITING NEW DOOKS ALONG THE COAST THE CASES FOR 2014 (COANT) ENDINE THE CONSTRUCTION OF DOOKS ON PROHECT SEX GRASS, BUT THESE BY DO EXCEPTION THAT AT MIGHT ALLOW FOR 2014 (COANT) ENDINE THE CONSTRUCTION OF DOOKS ON PROHECT SEX GRASS, BUT THESE BY DO EXCEPTION THAT AT MIGHT ALLOW FOR POR DESIGNS THAT MIGHT AVOID DAMAGET TO SEX GRASS SITE PEDEPAL COURT OF A PREAL FOR THE EVENTH CROUT UPHED THE CITY OF SORDHANGE AGAINST A CONSTRUCTION OF THE PROHECT OF THE EVENTH CROUT UPHED THE CITY OF SORDHANGE AGAINST A CONSTRUCTION OF A PREAL FOR THE COURT IS BEING A SKED TO OVERTURIST THE ORDINANCE AND REAFFRANTHAT PROHECTLY OWNERS ARE PROTECTED FROM ARGINRARY AND UNFASSONALE CONFIDENCING OF REPRISTORS OF THE OTHER COURT DENIED REVEW KERR REQUERING Y AND YOR OF SET SERVINGERS ARE PROTECTED FROM ARGINRARY AND UNFASSONALE CONFIDENCING OF REPRISTORS OF THE OTHER COURT CENTER PROHECTLY SHARD CONFIDENCING OF REPRISTORS OF THE PROHECT SHAPP STATUS DELETED THE OWNER REQUERING Y AND YOR OF SEX A SUSSETTION OF CLEAN WATER ACT JURISDICTION OVER THEE REPORTITY SHOPPING. SUCH A CHALLENSE A CWAL JURISDICTIONAL DETERMINATION STOLETHER, THE OTHER THE OWNER COLLD RAISE A JURISDICTIONAL CHALLENGE AS AN AFFIRMATIVE DETERMINATION. STOLETHER, TO A FET ALL AND CONNERS ON A HOUSE SHEE! WE USE THE SUFFREY COURT TO TAKE THE CASE ECCLUSE SMALL BUSINESS OWNERS HAVE A RIGHT TO CHALLENGE AS AN AFFIRMATIVE DETERMINATION. THE OWNER COLLD RAISE A JURISDICTIONAL CHALLENGE AS AN AFFIRMATIVE DETERMINATION OF THE OWNER COLLD RAISE A JURISDICTIONAL CHALLENGE AS AN AFFIRMATIVE DETERMINATION OF THE OWNER COLLD RAISE A JURISDICTIONAL CHALLENGE AS A PRIVATE OF THE CASE AFFIRM THE OWNER CONTROL OF THE THE AFFIRMATIVE AND THE PROMETY SHAPE OF THE THE AFFIRMATIVE DETERMINATION OF THE AFFIRMATIVE ASSETTION IN OUR ARCHITECTURE OF THE COURT OF THE THE OWNER CANNOT WAKE ANY USE OF THE BUSINESS RICHTS AS WE ARRIVE A DECISION TO ASSETT OWNER CANNOT WAKE ANY USE OF THE BUSINESS RICHTS AS WE AS A DECIS
ATTER IF THAT INCOME HAS BEEN TAXED BY ANOTHER STATE. STATUS. PENDING. NFIB SMALL BUSINESS

Return Reference	Explanation	
Reference	SUMMARY OF LEGAL CASES FOR 2014 (CONT)	SECTION OF SCIENCE AND LAW WITH RESPECT TO WHAT IS BELIEVED TO BETHE FIRST CASE TO BETRIED OF THE THOUSANDS OF ASBESTOS CASES THAT HAVE BEEN PENDING IN THE FLORIDA COURTS FOR OVER A DECADE AND THAT INVOLVE PLAINTIFFS WITH LITTLE OR NO PRESENT PHYSICAL IMPARMENT IF FLORIDA COURTS FERMIT LIBBLITY TO BE IMPOSED WITHOUT REQUIRING PLAINTIFFS TO SHOW THAT THEY HAVE RECEVED A SUFFICIENT DOSE OF A DEFENDANTS PRODUCT TO DEVELOP THE CONDITION ALLEGED, THEN THERE IS A SUBSTANTIAL RISK THAT DEEPNOANTS IN THE COUNTLESS PROMINS FLORIDA ASSES TOS CASES - AS WELL AS DEFENDANTS IN OTHER LATENT INJURY CASES - COULD BE HELD LIABLE FOR HARMS THAT ARE THE FAULT OF OTHERS STATUS PRIDING NIFE SMALL BUSINESS LEGAL CENTER AMIC US BRIEF FILED 10/17/14 Murray V. MOTORO, Inc - Legal Reform DC Court of Appeals THED C COURT IS BEING ASKED TO REJECT THE FRYE STANDARD AND ADOPT THE MORE RELIABLE AND MOD ERN DAIBBERT STANDARD FOR EXPERT TESTIMONY STATUS PRIDING NIFE SMALL BUSINESS LEGAL CENT ER AMICUS BRIEF FILED 10/21/14 COURT OF APPEALS THE PROBLEM AND AMICUS BRIEF FOR EXPERTS FILED 25/15 Murray Energy v. Beregy were precisively and ACASE CHALLENGING PRASA AUTHORITY TO PROMULGATE THE GREENHOUSE GAS RULES FOR EXISTING STATIONARY SOURCES UNDER SECTION 111(10) OF THE CLEAN AIR ACT MURRAY EN PROY CORPORATION FILED 2 CASES AND A GROUP OF 12 STATES (LED BY WEST VIRGINA) FILED A THIRD CHALLENGE TO EPA'S AUTHORITY TO PROMULGATE THE SECTION 111(10) EXISTING SOURCE PREFORMAN CE STANDARD THE THREE CASES PRESENT SESTING STATIONARY SOURCES UNDER SECTION 111(10) EXISTING SOURCE PREFORMAN CE STANDARD THE THE REFERENDATION THE THE COURT HAS AUSTROLIVED THE SAMELEGAL ARGUMENT. THAT EPA IS PRE CLUDED FROM PROCEDING TO REGULATE SOURCES UNDER SECTION 111(10) EXISTING SOURCE PREFORMAN CE STANDARD THE THE THREE CASES PRESENT SESTIMITION THE STATES BECOME SECTION 111(10) EXISTING SOURCE PREFORMAN CE STANDARD THE THE THREE CASES PRESENT SESTIMITION THE STATES SECTION 111(10) THAT ARE ALREADY SUBJECT TO REGULATION INDER SECTION 111 THE COURT HAS SUBJECT TO REGULATIO

Return Reference	Explanation	
	SUMMARY OF LEGAL CASES FOR 2014 (CONT)	FORM 990, PART III, LINE 4a Sisson V. RadioShaok - Wage and Hour U.S. Court of Appeals for the Sixth Circuit THE APPEAL. CONCERNS THE DEPARTMENT OF LABOR'S DETERMINATION THAT EMIRLOY ERS WHO PAY SONUS, PREMIUM PAY. OR COMMISSION IN A DOTTON TO A FIXED SALARY ARE NOT ENTITL. ED TO USE THE FLUCTUATING WORK/MEEM METHOD OF CALCULATING OVERTIME COMPENSATION DOU'S NITE RREGATION IS A REVERSAL FROM PREVIOUS HOLDINGS STATUS. PEDIOR OF BIRMAL BUSINESS LEGAL CENTER A MOSE BRIEF FLED 4/28/14 SIMPLY Capital Region Medical Center - Worker's Compensation Mission Court of Appeals THE COURT IS REVIEWING A FAULING THAT EXPANDS EMPLOYERS' COMPENSATION DOU'S NITE RREGATED. THE COURT IS REVIEWING A FAULING THAT EXPANDS EMPLOYERS' COMPENSATION PAYMENTS BASED ON ALLEGATIONS OF EMPLOYMENT FLATED EXPOSURE TO DISEASE THE LOWER COURT DECISION DEPOSES EMPLOYMENTS TO FAR GREATER EXPOSURE TO LIABILITY FOR COURTE AND COUNTY OF THE COURT IS REVIEWING A CAUSAL LINK BETWEEN EMPLOYMENT AND A WORKERS DISEASE STATUS PRODICE NEW SUpreme COURT FACE STABLE SHING A CAUSAL LINK BETWEEN EMPLOYMENT AND A WORKERS DISEASE STATUS PRODICE NEW SUpreme COURT FACE STATUS. COMPENSATION CLAIMS BLASS THE CAME STATUS PRODICE NEW SUPREME COURT FACE STATUS AND SUPPER COURT FACE STATUS. COMPENSATION CLAIMS LINES THE CALE FORM IS SUFFICIENT OF CREET IN THE EVENT THER INSURANCE COMPANY SHOULD BESTONE INSOLE SO DEALE SHOW THE WORK MEN'S COMPENSATION CLAIMS SUFFICIENT SHOULD SHOUL

Return Reference	Explanation	
	SUMMARY OF LEGAL CASES FOR 2014 (CONT)	E' FIT FAILS TO SPECIFY ANY REASONS FOR ITS DENIAL PRIOR TO THE 1996 ACT, LOCAL ZONING AUTHORITIES OFTEN DRAGGED THEIR FEET OR OTHERWISE SOUGHT TO PREVENT TELECOMMUNICATIONS COM PANIES FROM STINES VITAL INFRASTRUCTURE (SUCH AS THE CELL PHONE TOWERS AT ISSUE HERE) IN THE COMMUNITIES THE ACT WAS DESIGNED TO FIX THAT PROBLEM BY REQUIRING DENIALS TO BE SUBJECT TO EFFECTIVE JUDICIAL OVERSION. LABOR STRENGT OF THE PROBLEM BY REQUIRING DENIALS TO BE SUBJECT TO EFFECTIVE JUDICIAL OVERSION. LABOR STATUS ENDING STRENGT OF THE PROBLEM BY REQUIRING DENIALS TO BE SUBJECT TO EFFECTIVE JUDICIAL OVERSION. LABOR STATUS ENDING FOR THE PASSAGE OF INDIANA'S RIGHT TO WORK STATUTE IN INDIANA, WHICH GUARANTEES EMPLOYEES THE RIGHT TO WORK STATUTE, UNIONS SMALL BUSINESS LEGAL CENTER WAS INSTRUMENTAL IN PUSHING FOR THE PASSAGE OF INDIANA'S RIGHT TO WORK STATUTE IN INDIANA, WHICH GUARANTEES EMPLOYEES THE RIGHT TO WORK STATUTE, UNIONS CAN NO LONGER INSIST THAT EMPLOYERS CONDITION JOB OFFERS ON A REQUIREMENT THAT THE EMPLOYEE JON THE UNION BUT, SEVERAL UNIONS HAVE FILED LAWWING THALLAW MIRE SMALL BUSINESS LEGAL CENTER JOINED WITH NATIONAL RIGHT TO WORK IN AN AMICUS DEFENDING THE INDIANA RIGHT TO WORK LAW HERE STATUS PENDING. THE SMALL BUSINESS LEGAL CENTER JOINED WITH NATIONAL RIGHT TO WORK IN AN AMICUS DEFENDING THE INDIANA RIGHT TO WORK LAW HERE STATUS PENDING. THE SMALL BUSINESS LEGAL CENTER AMICUS BRIEF FILED 1/10/14 SUPPORTING THE LAW Waiston V. Beeing - Labor Washington Supreme Court WASHINGTON LAW PROVIDES A FORM FOR IMMUNITY FOR EMPLOYERS FOR POTENTIAL LAWSUITS STEMMING FROM WORKE, ACE NURSES UNDER THE STATES STATUTIORY REGIME. EMPLOYEES MILST PURSUE SUPPORTING THE LAW WASHINGTON SUPPORT OF THE STATES STATUTIORY REGIME. EMPLOYEES MILST PURSUE SHEET HE STATES THE EMPLOYEES BUT IN THIS CASE, A FORMER EMPLOYEES END ON SETTLED WORKERS COMPENSATION INSURANCE, AND CAN ONLY ADVANCE A LAWSUIT WHERE THE EMPLOYEES THE EMPLOYER THE STATES BUT THE STATES ON THE MILD STATE OF THE STATES THE EMPLOYEES THE DIMONES ARROWED THAT THE FREEDOM THE FIL

SUMMARY OF LEGAL CASES FOR CASES FOR LEGAL CENTER ARGUES THAT ALTHOUGH THE PREGNANCY DISCRIMINATION ACT (PDA) REQUIRES EMPLOYERS TO TREAT WOMEN "AFFECTED BY PREGNANCY, CHILDBIRTH, OR RELATED MEDICAL CONDITIONS" THE SAME IN ALL ASPECTS OF EMPLOY MENT AS OTHER EMPLOYES, IT STOPS SHORT OF IMPOSING AN AFFIRMATIVE DUTY ON EMPLOYERS TO TREAT TO ALL OTHER EMPLOYEES STATUS DECIDED N/FIB SMALL BUSINESS LEGAL CENTER AMICUS BRIEF FILED 10/31/14 ORAL ARGUMENT SET FOR 12/31/14 THE COURT RULED THAT THE PZD AIMPOSES AN OBLIGATION ON EMPLOYERS TO GIVE REASONABLE ACCOMMODATIONS TO PREGNANT EMPLOYEES, BUT THAT EMPLOYERS AMOUND EMPORTUNITY TO OFFER NON-DISCRIMINATORY REASONS FOR WHY THEY DIDN'T OFFER THE ACCOMMODATION ZOEILER V United Steel - Labor IN Supreme Court IN THIS CASE A LABOR UNION CHALLENGES THE CONSTITUTIONAL ITY OF INDIANA'S RIGHT TO WORK LAW THE UNION ARGUES THAT THE RIGHT TO WORK LAW VIOLATES INDIANA'S CONSTITUTIONAL GUARANTEE AGAINST FORCED SERVITUDE ON THE THEORY IT COMPELS UNIONS TO REFESENT EMPLOYEES WHO ARE NOT PAYING FOR THE REPRESENTATION IN RESPONSE, N°FIB SMALL BUSINESS LEGAL CENTER JOINED WITH NATIONAL RIGHT TO WORK IN DEFENDING INDIANA'S RIGHT TO WORK STATUTE WE ARGUED THAT FEDERAL LAW PREEMPTS THE UNIONS ARGUMENTS IN ALLOWING STATES TO BNACT RIGHT TO WORK STATUTE STATUS PENDING INFIB SMALL BUSINESS LEGAL CENTER AMICUS BRIEF FILED 12/13/13 ZUCKER V US CPSC. PEGUIATORY AND INJUNCTIVE RELIEF AGAINST THE US CONSUMER PROTECTION SAFETY COMMISSION (US CPSC) BECAUSE THE AGENCY IS SEEKING TO HOLD HIM PERSONALLY LIABLE FOR A 54 MILLION DOLLAR RECALL OF A PRODUCT THAT HAD PREVIOUSLY BEEN PRODUCED BY A COMPANY THAT HE HAD FOUNDED THE COMPANY HAS NOW DISSOLVED, AND US CPSC SEEKS TO PIERCE THE CORPORATE VEIL TO HOLD ZUCKER PERSONALLY LIABLE INFIB SMALL BUSINESS LEGAL CENTER FILED A MOTION TO ADOPT THE AMICUS BRIEF OF THE CHAMBER OF COMMERCE IN THIS MATTER, URGING THE COURT TO RULE IN ZUCKER'S FAVOR STATUS PENDING INFIB SMALL BUSINESS LEGAL CENTER AMICUS BRIEF FILED 4/11/14	Return Reference	Explanation
	OF LEGAL CASES FOR 2014	REQUEST FOR A WORK REASSIGNMENT BASED ON A COLLECTIVELY BARGAINED AGREEMENT. NFIB SMALL BUSINESS LEGAL CENTER ARGUES THAT ALTHOUGH THE PREGNANCY DISCRIMINATION ACT (PDA) REQUIRES EMPLOYERS TO TREAT WOMEN "AFFECTED BY PREGNANCY, CHILDBIRTH, OR RELATED MEDICAL CONDITIONS" THE SAME IN ALL ASPECTS OF EMPLOY MENT AS OTHER EMPLOYES, IT STOPS SHORT OF IMPOSING AN AFFIRMATIVE DUTY ON EMPLOYERS TO PROVIDE PREGNANCY-RELATED WORKPLACE ACCOMMODATIONS TO THE EXTENT THAT THEY ARE NOT OFFERED CATEGORICALLY TO ALL OTHER EMPLOYEES STATUS DECIDED NFIB SMALL BUSINESS LEGAL CENTER AMICUS BRIEF FILED 10/31/14 ORAL ARGUMENT SET FOR 12/3/14 THE COURT RULED THAT THE PDA IMPOSES AN OBLIGATION ON EMPLOYERS TO GIVE REASONABLE ACCOMMODATIONS TO PREGNANT EMPLOYEES, BUT THAT EMPLOYERS HAVE AN OPPORTUNITY TO OFFER NON-DISCRIMINATORY REASONS FOR WHY THEY DIDN'T OFFER THE ACCOMMODATION Zoeller v. United Steel - Labor IN SUPREME COURT IN THIS CASE A LABOR UNION CHALLENGES THE CONSTITUTIONALITY OF INDIANA'S RIGHT TO WORK LAW THE UNION ARGUES THAT THE RIGHT TO WORK LAW VIOLATES INDIANA'S CONSTITUTIONAL GUARANTEE AGAINST FORCED SERVITUDE ON THE THEORY IT COMPELS UNIONS TO REPRESENT EMPLOYEES WHO ARE NOT PAYING FOR THE REPRESENTATION IN RESPONSE, NFIB SMALL BUSINESS LEGAL CENTER JOINED WITH NATIONAL RIGHT TO WORK IN DEFENDING INDIANA'S RIGHT TO WORK STATUTE WE ARGUED THAT FEDERAL LAW PREEMPTS THE UNIONS ARGUMENTS IN ALLOWING STATES TO ENACT RIGHT TO WORK STATUTES STATUS PENDING NFIB SMALL BUSINESS LEGAL CENTER AMICUS BRIEF FILED 12/13/13 ZUCKER V U.S. CPSC REGulatory Reform U.S. District of Maryland MR. ZUCKER HAS INITIATED THIS LAWSUIT ASKING A FEDERAL COURT FOR DECLARATORY AND INJUNCTIVE RELIEF AGAINST THE U.S. CONSUMER PROTECTION SAFETY COMMISSION (U.S. CPSC.) BECAUSE THE AGENCY IS SEENING TO HOLD HIM PERSONALLY LIABLE FOR A 54 MILLION DOLLAR RECALL OF A PRODUCT THAT HAD PREVIOUSLY BEEN PRODUCED BY A COMPANY THAT HE HAD FOUNDED THE COMPANY HAS NOW DISSOLVED, AND US CPSC SEEKS TO PIERCE THE CORPORATE VEIL TO HOLD ZUCKER PERSONALLY LIABLE. NFIB

Return Reference	Explanation
	PART VI, SECTION B POLICIES, LINE 11 FOLLOWING AN INDEPENDENT AUDIT OF ITS FINANCIAL STATEMENTS, A DRAFT OF NFIB SMALL BUSINESS LEGAL CENTER'S FORM 990 IS PREPARED THIS FORM 990 IS REVIEWED INTERNALLY BY NFIB'S TAX ACCOUNTANT, CONTROLLER/TREASURER, AND SVP/CFO ANY QUESTIONS ARISING FROM THE INITIAL REVIEW ARE ADDRESSED TO ENSURE THE RETURN IS COMPLETE AND ACCURATE ANY NECESSARY CHANGES/CORRECTIONS ARE MADE ON THE FORM 990 AND THE RETURN AGAIN GOES THROUGH NFIB SMALL BUSINESS LEGAL CENTER'S INTERNAL REVIEW PROCESS UPON APPROVAL OF THE SVP/CFO, THE RETURN IS REVIEWED BY THE CHAIR OF THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS THE FINAL RETURN IS THEN FILED WITH THE INTERNAL REVENUE SERVICE

Return Reference	Explanation
WRITTEN CONFLICT OF INTEREST POLICY	PART VI, SECTION B POLICIES, LINE 12 EVERY BOARD MEMBER, OFFICER, AND KEY EMPLOYEE OF NFIB SMALL BUSINESS LEGAL CENTER IS REQUIRED TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST ON AN ANNUAL BASIS

Return Reference	Explanation
PROCESS OF DETERMINING COMPENSATION FOR OFFICERS AND OTHER KEY EMPLOYEES	PART VI, SECTION B POLICIES, LINE 15 THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS OF NFIB IS RESPONSIBLE FOR DETERMINING COMPENSATION FOR THE CEO, CFO, SECRETARY AND SVPS OF THE ORGANIZATION THE TREASURER'S AND EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED AND SET BY THE CEO. IN NOVEMBER 2014, AN OUTSIDE COMPENSATION CONSULTING FIRM WAS ENGAGED TO PROVIDE EXPERT ANALYSES REGARDING THE REASONABLENESS OF THE TOTAL COMPENSATION PACKAGE FOR THE EXECUTIVES OF NFIB AND ITS AFFILIATED ORGANIZATIONS. THE 2014-2015 RESULTS ALONG WITH AN IRC 4958 OPINION LETTER WERE PROVIDED TO THE CHAIRMAN OF THE BOARD FOR THE EXECUTIVE COMMITTEE AT THE FEBRUARY 2015 MEETING. THE COMMITTEE RELIES ON THIS INDEPENDENT REVIEW TO ENSURE THAT REASONABLE COMPENSATION IS PAID TO THE CEO, CFO, SECRETARY AND SVPS. THE COMMITTEES PHILOSOPHY IS TO ENSURE THAT THE COMPENSATION FOR THESE POSITIONS RELATIVE TO MARKET COMPARISONS IS COMPETITIVE IN ORDER TO ATTRACT, RETAIN AND MOTIVATE QUALIFIED EMPLOYEES WHILE NOT BEING AT THE TOP OF THE RANGE. THE COMMITTEE SETS THE COMPENSATION FOR THE CEO, CFO, SECRETARY AND SVPS. EACH YEAR DURING THEIR MEETING WHICH IS TYPICALLY HELD IN FEBRUARY MINUTES FROM THESE ANNUAL MEETINGS ARE TAKEN BY THE CORPORATE SECRETARY DURING THE MEETING WHEN THE MINUTES ARE REVIEWED AND APPROVED, THEY ARE RETAINED WITH ALL OTHER CORPORATE RECORDS.

Return Reference	Explanation
DOCUMENTS AVAILABLE TO THE PUBLIC	PART VI, SECTION C DISCLOSURE, LINE 19 IT IS NFIB SMALL BUSINESS LEGAL CENTER'S ("THE CENTER") POLICY TO MAKE AVAILABLE FOR PUBLIC INSPECTION, UPON REQUEST, EITHER WRITTEN OR IN PERSON, ITS EXEMPTION APPLICATION, SUPPORTING DOCUMENTS AND ANY LETTER OR DOCUMENT ISSUED BY THE IRS CONCERNING THE APPLICATION THE CENTER ALSO MAKES AVAILABLE FOR PUBLIC INSPECTION AND COPYING, UPON REQUEST, EITHER WRITTEN OR IN PERSON, ITS FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX THE FORM 990 IS AVAILABLE FOR A THREE-YEAR PERIOD BEGINNING WITH THE DUE DATE OF THE RETURN (INCLUDING ANY EXTENSION OF TIME FOR FILING) THE FOUNDATION'S CONFLICT OF INTEREST POLICY IS ALSO AVAILABLE TO THE PUBLIC UPON REQUEST, EITHER WRITTEN OR IN PERSON

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Open to Public Inspection

SCHEDULE R

(Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

Name of the organization NFIB SMALL BUSINESS LEGAL CENTER **Employer identification number**

62-1570449

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total ıncome	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (13) contro entity?	
						Yes	No
(1) NATIONAL FEDERATION OF INDEPENDENT BUS 53 CENTURY BLVD SUITE 250	MEM REPRES	CA	501(C)(6)		NA		No
NASHVILLE, TN 37214 94-0707299							
(2) NFIB RESEARCH FOUNDATION 53 CENTURY BLVD SUITE 250	RESEARCH	TN	501(C)(3)	11a-Type I	NFIB	Yes	
NASHVILLE, TN 37214 04-3592337							
(3) NFIB YOUNG ENTREPRENEUR FOUNDATION 53 CENTURY BLVD SUITE 250	EDUCATION	TN	501(C)(3)	11a-Type I	NFIB	Yes	
NASHVILLE, TN 37214 62-1557196							
(4) NFIB SAVE AMERICAS FREE ENTERPRISE TRUST 53 CENTURY BLVD SUITE 250	PAC	CA	527		NFIB	Yes	
NASHVILLE, TN 37214 94-2532364							
(5) NFIB THE VOICE OF FREE ENTERPRISE INC 53 CENTURY BLVD SUITE 250	SOC WELFARE	TN	501(C)(4)		NFIB	Yes	
NASHVILLE, TN 37214 27-3615830							

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
							Yes	No
(1) NFIB MEMBER SERVICES CORPORATION 53 CENTURY BLVD SUITE 250 NASHVILLE, TN 372143682 94-2899404	MEMBER BENEFI	CA	NA	С			Yes	

No

No No

No

1k

10

1r

1s

1m Yes

1n Yes

Yes

Yes

Yes

Yes

спе	adile k (Form 990) 2014		P a	ge .
Pa	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	N
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		N
b	Gift, grant, or capital contribution to related organization(s)	1b		Ŋ
C	Gift, grant, or capital contribution from related organization(s)	1 c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		Ŋ
е	Loans or loan guarantees by related organization(s)	1e		N
f	Dividends from related organization(s)	1f		
g	Sale of assets to related organization(s)	1 g		Ŋ
h	Purchase of assets from related organization(s)	1h		N
i	Exchange of assets with related organization(s)	1i		N

k Lease of facilities, equipment, or other assets from related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

- I Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NFIB THE VOICE OF FREE ENTERPRISE INC	LINE	405,422	FMV
(2) NATIONAL FEDERATION OF INDEPENDENT BUSINESS	LINE	118,071	FMV
(3) NATIONAL FEDERATION OF INDEPENDENT BUSINESS	LINE	253,468	FMV

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
1			<u> </u>			'				

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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