

**** PUBLIC DISCLOSURE COPY ****

Form **990**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEW AMERICA FOUNDATION Doing business as NEW AMERICA		D Employer identification number 52-2096845
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 740 15TH STREET NW 900	E Telephone number (202) 986-2700	
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20005		G Gross receipts \$ 48,315,847.
	F Name and address of principal officer: BARRY HOWARD SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶

J Website: WWW.NEWAMERICA.ORG

K Form of organization: Corporation Trust Association Other ▶ **L Year of formation:** 1998 **M State of legal domicile:** DC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO BRING EXCEPTIONALLY PROMISING NEW VOICES & IDEAS TO THE FORE OF OUR NATION'S PUBLIC DISCOURSE.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	19
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	207
	6 Total number of volunteers (estimate if necessary)	6	21
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	40,455,040.	46,682,652.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11,571.	821,253.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	154,977.	132,312.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,438,026.	672,448.
		42,059,614.	48,308,665.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,556,642.	5,501,703.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,762,354.	19,464,764.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 767,315.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	12,757,577.	11,032,520.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	38,076,573.	35,998,987.	
19 Revenue less expenses. Subtract line 18 from line 12	3,983,041.	12,309,678.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	43,166,127.	58,863,167.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,284,380.	17,682,586.
	28,881,747.	41,180,581.	

Part II Signature Block

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

Sign Here	Signature of preparer: <i>Sarah Hintz</i> Date: 11/12/2021
	Signature of officer: BARRY HOWARD, CFAO Type or print name and title
Paid Preparer Use Only	Print/Type preparer's name: SARAH HINTZ Preparer's signature: SARAH HINTZ Date: 11/10/21 Check if self-employed: <input type="checkbox"/> PTIN: P00492291
	Firm's name: CLIFTONLARSONALLEN LLP Firm's address: 8390 EAST CRESCENT PARKWAY, SUITE 300 GREENWOOD VILLAGE, CO 80111 Firm's EIN: 41-0746749 Phone no. (303) 779-5710

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: NEW AMERICA FOUNDATION IS DEDICATED TO RENEWING AMERICA BY CONTINUING THE QUEST TO REALIZE OUR NATION'S HIGHEST IDEALS, HONESTLY CONFRONTING THE CHALLENGES CAUSED BY RAPID TECHNOLOGICAL AND SOCIAL CHANGE, AND SEIZING THE OPPORTUNITIES THOSE CHANGES CREATE.

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

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

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

4a (Code:) (Expenses \$ 16,753,515. including grants of \$ 2,893,604.) (Revenue \$ 820,604.) DOMESTIC POLICY PROGRAMS EDUCATION POLICY PROGRAM: THE EDUCATION POLICY PROGRAM USES ORIGINAL RESEARCH AND POLICY ANALYSIS TO HELP SOLVE THE NATION'S CRITICAL EDUCATION PROBLEMS, CRAFTING OBJECTIVE ANALYSES AND SUGGESTING NEW IDEAS FOR POLICYMAKERS, EDUCATORS, AND THE PUBLIC AT LARGE. NEW AMERICA COMBINES A STEADFAST CONCERN FOR HISTORICALLY DISADVANTAGED POPULATIONS WITH A BELIEF THAT BETTER INFORMATION ABOUT EDUCATION CAN VASTLY IMPROVE BOTH THE POLICIES THAT GOVERN EDUCATIONAL INSTITUTIONS AND THE QUALITY OF LEARNING ITSELF. THE EARLY & ELEMENTARY EDUCATION POLICY TEAM WORKS TO HELP ENSURE THAT ALL CHILDREN HAVE ACCESS TO A SYSTEM OF HIGH-QUALITY EARLY LEARNING

4b (Code:) (Expenses \$ 11,554,288. including grants of \$ 1,205,368.) (Revenue \$ 0.) TECHNOLOGY POLICY PROGRAMS OPEN TECHNOLOGY INSTITUTE: THE OPEN TECHNOLOGY INSTITUTE STRENGTHENS COMMUNITIES THROUGH GROUNDED RESEARCH, TECHNOLOGICAL INNOVATION, AND POLICY REFORM. NEW AMERICA CREATES REFORM TO SUPPORT OPEN SOURCE INNOVATIONS AND FOSTER OPEN TECHNOLOGIES AND COMMUNICATIONS NETWORKS. PARTNERING WITH COMMUNITIES, RESEARCHERS, INDUSTRY AND PUBLIC INTEREST GROUPS, NEW AMERICA PROMOTES AFFORDABLE, UNIVERSAL, AND UBIQUITOUS COMMUNICATIONS NETWORKS. THE WIRELESS FUTURE PROJECT DEVELOPS AND ADVOCATES POLICY PROPOSALS TO PROMOTE UNIVERSAL, AFFORDABLE, AND UBIQUITOUS BROADBAND AND IMPROVE THE PUBLIC'S ACCESS TO CRITICAL WIRELESS COMMUNICATION TECHNOLOGIES.

4c (Code:) (Expenses \$ 1,563,271. including grants of \$ 457,500.) (Revenue \$ 0.) INTERNATIONAL POLICY PROGRAMS INTERNATIONAL SECURITY: THE INTERNATIONAL SECURITY PROGRAM AIMS TO PROVIDE EVIDENCE-BASED ANALYSIS OF SOME OF THE TOUGHEST SECURITY CHALLENGES FACING AMERICAN POLICYMAKERS AND THE PUBLIC. ITS RESEARCH HAS ADDRESSED HOMEGROWN AMERICAN TERRORISM, THE DEVELOPMENT AND NATURE OF ISIS' NETWORKS IN THE WEST, THE UNITED STATES' DRONE WARS ABROAD, THE COLLAPSE OF THE AMERICAN MONOPOLY ON ARMED DRONES AND THE PROLIFERATION OF DRONES AROUND THE WORLD, AND THE PROFOUND CHANGES IN WARFARE WROUGHT BY NEW TECHNOLOGY AND SOCIETAL CHANGES. THE PROGRAM ALSO EXAMINES REGIONAL SECURITY ISSUES, WITH A PARTICULAR FOCUS ON THE MIDDLE EAST AND SOUTH ASIA.

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,593,955. including grants of \$ 945,231.) (Revenue \$ 649.)

4e Total program service expenses 31,465,029.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

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 on Schedule O.		
	1a 20		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 19		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **SUSAN DAILEY - (202) 596-3351**
740 15TH STREET NW, SUITE 990, WASHINGTON, DC 20005

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANNE-MARIE SLAUGHTER CEO	40.00	X		X			543,422.	0.	24,048.	
(2) TYRA A. MARIANI PRESIDENT & COO	40.00			X			290,750.	0.	31,350.	
(3) KEVIN D. CAREY VP. EDU. POLICY & KNOWLEDGE MGMT.	40.00			X			267,764.	0.	22,405.	
(4) PETER BERGEN VP. GLOBAL STUDIES & FELLOWS	40.00			X			261,716.	0.	50,158.	
(5) BARRY C. HOWARD CFAO	40.00			X			239,808.	0.	47,024.	
(6) PETER SINGER SENIOR FELLOW & STRATEGIES	40.00					X	242,359.	0.	18,039.	
(7) SARAH J MORRIS DIRCTOR, OPEN TECH INSTITUTE	40.00					X	211,196.	0.	41,293.	
(8) MARK S. SCHMITT DIRECTOR, POLITICAL REFORM	40.00					X	206,840.	0.	37,503.	
(9) VICTORIA SERL SHABO SENIOR FELLOW, BETTER LIFE LAB	40.00					X	202,520.	0.	45,648.	
(10) TOMICAH TILLEMANN-DICK DIRECTOR, DIGITAL IMPACT	40.00					X	207,285.	0.	39,844.	
(11) MICHAEL CALABRESE DIRECTOR, WIRELESS FUTURE PROJECT	40.00					X	196,420.	0.	37,242.	
(12) CECILIA MUNOZ VICE PRESIDENT	40.00			X			218,908.	0.	21,734.	
(13) MARY ALICE MCCARTHY DIRECTOR, CENTER ON EDU. & LABOR	40.00					X	173,181.	0.	23,731.	
(14) HELENE D. GAYLE CHAIR	1.00	X		X			0.	0.	0.	
(15) WILLIAM W. GERRITY VICE CHAIR	1.00	X		X			0.	0.	0.	
(16) ZACHARY KARABELL TREASURER	1.00	X		X			0.	0.	0.	
(17) JAMES FALLOWS SECRETARY	1.00	X		X			0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ROBERT ABERNETHY BOARD MEMBER	1.00	X						0.	0.	0.
(19) DAVID G. BRADLEY BOARD MEMBER	1.00	X						0.	0.	0.
(20) DAVID BROOKS BOARD MEMBER	1.00	X						0.	0.	0.
(21) MAXINE CLARK BOARD MEMBER	1.00	X						0.	0.	0.
(22) MICHAEL M. CROW BOARD MEMBER	1.00	X						0.	0.	0.
(23) R. BOYKIN CURRY BOARD MEMBER	1.00	X						0.	0.	0.
(24) TOM FRESTON BOARD MEMBER	1.00	X						0.	0.	0.
(25) ATUL A. GAWANDE, MD, MPH BOARD MEMBER	1.00	X						0.	0.	0.
(26) KATHERINE GEHL BOARD MEMBER	1.00	X						0.	0.	0.
1b Subtotal								3,262,169.	0.	440,019.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								3,262,169.	0.	440,019.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 57

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
TWO BULLS, LLC, 55 WASHINGTON STREET, SUITE 260, BROOKLYN, NY 11201	CONSULT FOR DIGITAL IMPACT	615,000.
R3, LLC, 11 WEST 42ND STREET, FLOOR 8, NEW YORK, NY 10036	CONSULT FOR DIGITAL IMPACT	147,000.
NORC AT THE UNIVERSITY OF CHICAGO, 55 EAST MONROE ST, 30TH FLOOR, CHICAGO, IL 60603	RESEARCH COMM. FOR HIGHER-ED	139,250.
HIREDPEN DIGITAL, LLC 40 E. CHICAGO AVE #336, CHICAGO, IL 60611	CONSULT FOR DIGITAL IMPACT	136,100.
BETTER YET, LLC, 803 SILVER SPRING AVE, SILVER SPRING, MD 20910	CONSULT FOR DIGITAL IMPACT	116,400.

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 11

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,409,618.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	45,273,034.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			46,682,652.			
Program Service Revenue	2 a CONTRACTS/FEES FOR SER	Business Code					
		900099	820,604.	820,604.			
	b PUBLICATION SALES	900099	649.	649.			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			821,253.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		131,261.			131,261.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	655,708.			
			(ii) Personal				
				0.			
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c	655,708.				
	d Net rental income or (loss)			655,708.		655,708.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	6,982.	1,251.		
			(ii) Other				
				7,148.	34.		
				-166.	1,217.		
	b Less: cost or other basis and sales expenses	7b					
c Gain or (loss)	7c						
d Net gain or (loss)			1,051.		1,051.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISC. INCOME	Business Code					
		999999	16,740.			16,740.	
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d			16,740.				
12 Total revenue. See instructions			48,308,665.	821,253.	0.	804,760.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	3,002,939.	3,002,939.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	2,281,664.	2,281,664.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	217,100.	217,100.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,460,868.	1,149,057.	963,387.	348,424.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	13,127,019.	10,240,534.	2,748,606.	137,879.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,156,842.	880,398.	253,818.	22,626.
9 Other employee benefits	1,590,034.	1,179,181.	366,976.	43,877.
10 Payroll taxes	1,130,001.	827,182.	268,259.	34,560.
11 Fees for services (nonemployees):				
a Management				
b Legal	67,145.	11,333.	55,812.	
c Accounting	56,082.		56,082.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	5,210,967.	4,725,460.	468,817.	16,690.
12 Advertising and promotion				
13 Office expenses	591,321.	70,432.	486,111.	34,778.
14 Information technology	41,640.	38.	41,602.	
15 Royalties				
16 Occupancy	3,571,322.	1,961,197.	1,610,125.	
17 Travel	207,078.	192,092.	10,829.	4,157.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	76,725.	71,530.	5,101.	94.
20 Interest	22,796.		22,796.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	546,813.		546,813.	
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BAD DEBT EXPENSE	273,905.	95,000.	76,029.	102,876.
b RETURN OF GRANT FUND	160,347.	160,347.	0.	0.
c PUBLICATIONS/SUBS	93,122.	66,122.	13,074.	13,926.
d MISC. EXPENSE	75,939.	61,013.	8,120.	6,806.
e All other expenses	37,318.	4,272,410.	-4,235,714.	622.
25 Total functional expenses. Add lines 1 through 24e	35,998,987.	31,465,029.	3,766,643.	767,315.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	17,159,010.	1	27,050,552.
	2 Savings and temporary cash investments	7,351,011.	2	5,571,511.
	3 Pledges and grants receivable, net	12,177,377.	3	18,647,878.
	4 Accounts receivable, net	191,738.	4	102,836.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	539,876.	9	445,946.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 7,698,033.		
	b Less: accumulated depreciation	10b 2,956,174.	5,245,582.	10c 4,741,859.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	360,000.	12	2,298,835.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	141,533.	15	3,750.
16 Total assets. Add lines 1 through 15 (must equal line 33)	43,166,127.	16	58,863,167.	
Liabilities	17 Accounts payable and accrued expenses	3,269,182.	17	4,108,323.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	89,471.	21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	3,301,828.
	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	10,925,727.	25	10,272,435.
	26 Total liabilities. Add lines 17 through 25	14,284,380.	26	17,682,586.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,980,242.	27	3,584,866.
	28 Net assets with donor restrictions	26,901,505.	28	37,595,715.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	28,881,747.	32	41,180,581.
33 Total liabilities and net assets/fund balances	43,166,127.	33	58,863,167.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	48,308,665.
2	Total expenses (must equal Part IX, column (A), line 25)	2	35,998,987.
3	Revenue less expenses. Subtract line 2 from line 1	3	12,309,678.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	28,881,747.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-10,844.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	41,180,581.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____
- 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 on Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2020)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization NEW AMERICA FOUNDATION	Employer identification number 52-2096845
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	36,528,168.	37,653,997.	34,317,081.	39,736,367.	46,654,850.	194,890,463.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	36,528,168.	37,653,997.	34,317,081.	39,736,367.	46,654,850.	194,890,463.
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)						47,527,264.
6 Public support. Subtract line 5 from line 4.						147,363,199.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	36,528,168.	37,653,997.	34,317,081.	39,736,367.	46,654,850.	194,890,463.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,405,177.	1,647,295.	1,601,958.	1,591,326.	786,969.	7,032,725.
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						201,923,188.
12 Gross receipts from related activities, etc. (see instructions)					12	2,471,650.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	72.98 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	74.28 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 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

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

14 First 5 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

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2019 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2019 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
1		
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? <i>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.</i>		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		
1		

Section 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described in line 2, above, 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3		

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

Part VI

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.)

Multiple horizontal lines for supplemental information.

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

NEW AMERICA FOUNDATION

Employer identification number

52-2096845

Organization type (check one):

Filers of:**Section:**

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization NEW AMERICA FOUNDATION	Employer identification number 52-2096845
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 1,677,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 7,923,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 4,855,407.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 2,526,917.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 1,185,440.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization NEW AMERICA FOUNDATION	Employer identification number 52-2096845
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	 <hr/> <hr/> <hr/>	\$ 1,082,942.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	 <hr/> <hr/> <hr/>	\$ 1,096,375.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	 <hr/> <hr/> <hr/>	\$ 1,290,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	 <hr/> <hr/> <hr/>	\$ 2,011,762.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	 <hr/> <hr/> <hr/>	\$ 2,250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	 <hr/> <hr/> <hr/>	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization NEW AMERICA FOUNDATION	Employer identification number 52-2096845
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	<hr/> <hr/> <hr/>	\$ 1,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization NEW AMERICA FOUNDATION	Employer identification number 52-2096845
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization NEW AMERICA FOUNDATION	Employer identification number 52-2096845
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

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

Table with 2 columns: Name of organization (NEW AMERICA FOUNDATION) and Employer identification number (52-2096845)

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2 Political campaign activity expenditures \$ 0.
3 Volunteer hours for political campaign activities 0.

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ 0.
2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ 0.
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
4a Was a correction made? Yes No
b If "Yes," describe in Part IV.

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

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

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	0.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	58,753.													
c	Total lobbying expenditures (add lines 1a and 1b)	58,753.													
d	Other exempt purpose expenditures	35,145,117.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	35,203,870.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	134,008.	156,939.	92,126.	58,753.	441,826.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

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

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

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

Part IV Supplemental Information

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization NEW AMERICA FOUNDATION Employer identification number 52-2096845

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, acquired after 7/25/06), and questions about monitoring, expenses, and reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and a table for revenue and assets included in Form 990.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		7,088,777.	2,457,290.	4,631,487.
d Equipment		609,256.	498,884.	110,372.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				4,741,859.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	10,272,435.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	10,272,435.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	48,401,302.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	103,481.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-10,844.
e	Add lines 2a through 2d	2e	92,637.
3	Subtract line 2e from line 1	3	48,308,665.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	48,308,665.

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

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

1	Total expenses and losses per audited financial statements	1	36,102,468.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	103,481.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	103,481.
3	Subtract line 2e from line 1	3	35,998,987.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	35,998,987.

Part XIII Supplemental Information.

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

PART IV, LINE 2B:

TENANT ESCROW \$0 AT 12/31/2020.

PART X, LINE 2:

NEW AMERICA IS A 501(C)(3) ORGANIZATION, EXEMPT FROM FEDERAL INCOME TAX

UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE. NEW AMERICA IS,

HOWEVER, SUBJECT TO TAX ON BUSINESS INCOME UNRELATED TO ITS EXEMPT

PURPOSE.

NEW AMERICA BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS

TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE

MATERIAL TO THE FINANCIAL STATEMENTS OR THAT WOULD HAVE AN EFFECT ON ITS

Part XIII Supplemental Information *(continued)*

TAX-EXEMPT STATUS. THERE ARE NO UNRECOGNIZED TAX BENEFITS OR LIABILITIES

THAT NEED TO BE RECORDED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

LOSS ON FOREIGN CURRENCY EXCHANGE -10,844.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

NEW AMERICA FOUNDATION

Employer identification number

52-2096845

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EUROPE	0	2	PROGRAM SERVICES	PROJECT MANAGEMENT AND TECHNICAL SUPPORT	267,864.
EUROPE	0	8	GRANTS TO RECIPIENTS IN THE REGION	FELLOWSHIPS	177,100.
SOUTH ASIA	0	1	GRANTS TO RECIPIENTS IN THE REGION	FELLOWSHIPS	30,000.
EAST ASIA AND PACIFIC	0	1	GRANTS TO RECIPIENTS IN THE REGION	FELLOWSHIPS	10,000.
3 a Subtotal	0	12			484,964.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	12			484,964.

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Schedule F (Form 990) 2020

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

3 Enter total number of other organizations or entities ▶ _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIPS	EAST ASIA AND PACIFIC	1	30,000.	WIRE	0.	N/A	N/A
FELLOWSHIPS	SOUTH ASIA	1	10,000.	WIRE	0.	N/A	N/A
FELLOWSHIPS	EUROPE	8	177,100.	WIRE	0.	N/A	N/A

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

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

PART I, LINE 2:

NEW AMERICA REQUIRES REGULAR REPORTING TO SUBSTANTIATE THE WORK SUPPORTED BY THE GRANT.

PART I, LINE 3:

ACCOUNTING METHOD: ACCRUAL BASIS

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **NEW AMERICA FOUNDATION** Employer identification number **52-2096845**

Part I General Information on Grants and Assistance

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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN ASSOCIATION OF PEOPLE WITH DIABILITIES - 2013 H STREET NW 5TH FLOOR - WASHINGTON, DC 20006	52-1930174	501(C)(3)	125,000.	0.	N/A	N/A	SUPPORT GRANTEE'S RESEARCH ON THE IMPACT OF COVID-19 ON PEOPLE WITH DISABILITIES AND THEIR
CAREERWISE COLORADO 400 SOUTH COLORADO BLVD, SUITE 700 DENVER, CO 80246	81-1415662	501(C)(3)	110,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
CENTER FOR COMMUNITY CHANGE 1536 U STREET NW WASHINGTON, DC 20009	52-0888113	501(C)(3)	100,000.	0.	N/A	N/A	SUPPORT GRANTEE'S UNITED TODAY, STRONGER TOMORROW - COMMUNITIES RESPOND TO COVID INITIATIVE
CENTER TO ADVANCE CTE 8484 GEORGIA AVE, SUITE 620 SILVER SPRING, MD 20910	73-1086246	501(C)(3)	100,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
CIVILLA 440 BURROUGHS ST. SUITE 200 DETROIT, MI 48202	47-4688867	501(C)(3)	165,000.	0.	N/A	N/A	SUPPORT GRANTEE'S RESEARCH TO IMPROVE SERVICE DELIVERY FOR UNEMPLOYMENT INSURANCE IN
COMMUNITIES FOUNDATION OF TEXAS 5500 CARUTH HAVEN LANE DALLAS, TX 75225	75-0964565	501(C)(3)	150,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 27.

3 Enter total number of other organizations listed in the line 1 table ▶ 4.

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

Schedule I (Form 990) 2020

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSENSYS, INC. 49 BOGART ST, SUITE 22 BROOKLYN, NY 11206	81-3621607	OTHER	18,147.	0.	N/A	N/A	SUPPORT GRANTEE'S WORK ON THE BLOCKCHAIN-BASED SYSTEM FOR MONITORING WORKER WELL-BEING PROJECT
DREXEL UNIVERSITY 3201 ARCH STREET, SUITE 420 PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	23,000.	0.	N/A	N/A	SUPPORT GRANTEE'S RESEARCH ON CANDIDATE ENTRY AND LEGISLATIVE REPRESENTATION UNDER
EDUCATION STRATEGY GROUP 4716 DRUMMOND AVE. CHEVY CHASE, MD 20815	46-0907884	OTHER	100,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
FOUNDATION FOR CALIFORNIA COMMUNITY COLEGES - 1102 Q STREET, SUITE 4800 - SACRAMENTO, CA 95811	68-0412350	501(C)(3)	175,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
HISPANIC FEDERATION, INC 55 EXCHANGE PLACE, SUITE 501 NEW YORK, NY 10005	13-3573852	501(C)(3)	125,000.	0.	N/A	N/A	SUPPORT GRANTEE'S EFFORTS TO IDENTIFY AND OVERCOME BARRIERS THAT EXIST FOR BROWN AND BLACK LATINO
JOBS FOR THE FUTURE, INC. 88 BROAD STREET, 8TH FLOOR BOSTON, MA 02110	06-1164568	501(C)(3)	115,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
MERCY CORPS 45 SW ANKENY STREET PORTLAND, OR 97204	91-1148123	501(C)(3)	25,000.	0.	N/A	N/A	SUPPORT THE GRANTEE'S WORK TO IDENTIFY PROMISING PRACTICES OR INTERVENTION MODELS WHICH
MONTANA HIGHER EDUCATION STUDENT ASSITANCE CORPORATION - PO BOX 5209 - HELENA, MT 59604	81-0393527	501(C)(3)	244,657.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
MOONSHOTS & OTHER ADVENTURES, INC 52 LOVELL AVE MILL VALLEY, CA 94941	84-4521223	501(C)(3)	250,000.	0.	N/A	N/A	FISCAL SPONSORSHIP

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL ALLIANCE FOR PARTNERSHIPS IN EQUITY (NAPE) EDUCATION FOUNDATION - 91 NEWPORT PIKE, SUITE 302 - GAP, PA 17527	13-4249100	501(C)(3)	50,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
NATIONAL CONFERENCE ON CITIZENSHIP 1902 L STREET SUITE, 450 WASHINGTON, DC 20036	52-0698385	501(C)(3)	100,575.	0.	N/A	N/A	SUPPORT GRANTEE'S RESEARCH AIMED AT UNDERSTANDING THE EXPERIENCE OF
NATIONAL GOVERNORS ASSOCIATION (NGA) CENTER FOR BEST PRACTICES - 444 NORTH CAPITOL STREET, SUITE 267 - WASHINGTON, DC 20001	23-7391796	501(C)(3)	100,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
NONPROFIT FINANCE FUND 5 HANOVER SQUARE, 9TH FLOOR NEW YORK, NY 10004	13-3238657	501(C)(3)	150,000.	0.	N/A	N/A	SUPPORT GRANTEE'S WORK EXPLORING COMMUNITY COLLEGE BUSINESS MODELS AROUND NEW MODELS OF
NORTH CAROLINA COMMUNITY COLLEGE SYSTEM - 200 WEST JONES STREET - RALEIGH, NC 27603	56-1288079	GOVERNMENT	175,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
PEREGRINE STRATEGIES, INC 1805 VALE STREET DURHAM, NC 27703	85-1716309	OTHER	15,000.	0.	N/A	N/A	SUPPORT GRANTEE'S LEADERSHIP OF THE PAYA EQUITY WORK GROUP
PRESIDENT AND FELLOWS OF HARVARD COLLEGE ACTING THROUGH HARVARD T.H. CHAN S - 677 HUNTINGTON AVE, - BOSTON, MA 02115	04-2103580	501(C)(3)	42,780.	0.	N/A	N/A	SUPPORT GRANTEE'S WORK ON THE BLOCKCHAIN-BASED SYSTEM FOR MONITORING WORKER WELL-BEING PROJECT
PROJECT FOR PRIDE IN LIVING, INC. 1035 E. FRANKLIN MINNEAPOLIS, MN 55404	23-7232208	501(C)(3)	125,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
REGENTS OF THE UNIVERSITY OF CALIFORNIA, DAVIS - 1111 FRANKLIN ST - OAKLAND, CA 94607	94-6036494	GOVERNMENT	10,000.	0.	N/A	N/A	SUPPORT GRANTEE'S RESEARCH RELATED TO SAN FRANCISCO'S NEW RANKED-CHOICE VOTING

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CENTURY FOUNDATION INC 1 WHITEHALL STREE, 15TH FLOOR NEW YORK, NY 10004	13-1624235	501(C)(3)	75,000.	0.	N/A	N/A	SUPPORT GRANTEE'S UNEMPLOYMENT INSURANCE DATA TRACKING PROJECT
TRIDENT TECHNICAL COLLEGE 7000 RIVERS AVE. NORTH CHARLESTON, SC 29406	57-0440170	OTHER	95,000.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER
TRUSTEE OF THE UNIVERSITY OF PENNSYLVANIA - 3451 WALNUT STREET, 5TH FLOOR, FRANKLIN BUILDING - PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	30,000.	0.	N/A	N/A	SUPPORT GRANTEE'S RESEARCH ON THE EFFECTS OF DIFFERENT ELECTORAL CONTEXTS ON POLARIZATION
TRUSTEE OF TUFTS COLLEGE 169 HOLLAND STREET SOMERVILLE, MA 02144	04-2103634	501(C)(3)	34,000.	0.	N/A	N/A	SUPPORT GRANTEE'S RESEARCH RELATED TO THE EFFECTS OF RANKED-CHOICE VOTING ON MINORITY
UNION OF CONCERNED SCIENTISTS INC TWO BATTLE SQUARE CAMBRIDGE, MA 02138	04-2535767	501(C)(3)	25,000.	0.	N/A	N/A	SUPPORT GRANTEE'S RESEARCH RELATED TO THE RELATIONSHIP BETWEEN ELECTORAL RULES AND
WILLIAM MARSH RICE UNIVERSITY 6100 MAIN STREET HOUSTON, TX 77005	74-1109620	501(C)(3)	10,053.	0.	N/A	N/A	SUPPORT GRANTEE'S RESEARCH RELATED TO THE EFFECTS OF RANKED-CHOICE VOTING ON RACIAL
WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE KING COUNTY - 2003 WESTERN AVE, SUITE 250 - SEATTLE, WA 98121	91-2051978	501(C)(3)	137,500.	0.	N/A	N/A	SUPPORT GRANTEE'S ROLE AS A PARTNERSHIP TO ADVANCE YOUTH APPRENTICESHIP NATIONAL PARTNER

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FELLOWSHIPS	76	2,281,664.	0.	N/A	N/A

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

PART I, LINE 2:

NEW AMERICA REQUIRES REGULAR REPORTING TO SUBSTANTIATE THE WORK SUPPORTED BY THE GRANT.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

AMERICAN ASSOCIATION OF PEOPLE WITH DIABILITIES

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S RESEARCH ON THE

IMPACT OF COVID-19 ON PEOPLE WITH DISABILITIES AND THEIR EXPERIENCE WHEN

Part IV Supplemental Information

ACCESSING CRITICAL BENEFITS

NAME OF ORGANIZATION OR GOVERNMENT: CIVILLA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S RESEARCH TO IMPROVE SERVICE DELIVERY FOR UNEMPLOYMENT INSURANCE IN MICHIGAN

NAME OF ORGANIZATION OR GOVERNMENT: DREXEL UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S RESEARCH ON CANDIDATE ENTRY AND LEGISLATIVE REPRESENTATION UNDER SINGLE-SEAT-RANKED-CHOICE VOTING

NAME OF ORGANIZATION OR GOVERNMENT: HISPANIC FEDERATION, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S EFFORTS TO IDENTIFY AND OVERCOME BARRIERS THAT EXIST FOR BROWN AND BLACK LATINO COMMUNITIES IN LIGTH OF COVID-19

NAME OF ORGANIZATION OR GOVERNMENT: MERCY CORPS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT THE GRANTEE'S WORK TO IDENTIFY PROMISING PRACTICES OR INTERVENTION MODELS WHICH CAN EFFECTIVELY ADDRESS THE INTERSECTION OF CLIMATE AND CONFLICT

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL CONFERENCE ON CITIZENSHIP

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S RESEARCH AIMED AT UNDERSTANDING THE EXPERIENCE OF UNEMPLOYMENT INSURANCE ELIGIBLE POPULATIONS AND HOW CERTAIN POLICY OR PROGRAMMATIC CHANGES WOULD IMPROVE OUTCOMES AND DELIVERY FOR THOSE TRYING TO USE IT

NAME OF ORGANIZATION OR GOVERNMENT: NONPROFIT FINANCE FUND

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S WORK EXPLORING
COMMUNITY COLLEGE BUSINESS MODELS AROUND NEW MODELS OF CAREER PREPARATION

NAME OF ORGANIZATION OR GOVERNMENT:
REGENTS OF THE UNIVERSITY OF CALIFORNIA, DAVIS

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S RESEARCH RELATED
TO SAN FRANCISCO'S NEW RANKED-CHOICE VOTING (RCV) SYSTEM

NAME OF ORGANIZATION OR GOVERNMENT: TRUSTEE OF TUFTS COLLEGE
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S RESEARCH RELATED

TO THE EFFECTS OF RANKED-CHOICE VOTING ON MINORITY REPRESENTATION

NAME OF ORGANIZATION OR GOVERNMENT: UNION OF CONCERNED SCIENTISTS INC
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S RESEARCH RELATED

TO THE RELATIONSHIP BETWEEN ELECTORAL RULES AND MINORITY REPRESENTATION

NAME OF ORGANIZATION OR GOVERNMENT: WILLIAM MARSH RICE UNIVERSITY
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT GRANTEE'S RESEARCH RELATED

TO THE EFFECTS OF RANKED-CHOICE VOTING ON RACIAL POLARIZATION

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2020

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
NEW AMERICA FOUNDATION

Employer identification number
52-2096845

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

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

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

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

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

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

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

Schedule J (Form 990) 2020

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 on 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 aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ANNE-MARIE SLAUGHTER CEO	(i)	496,866.	0.	46,556.	19,950.	4,098.	567,470.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TYRA A. MARIANI PRESIDENT & COO	(i)	270,921.	0.	19,829.	19,950.	11,400.	322,100.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KEVIN D. CAREY VP. EDU. POLICY & KNOWLEDGE MGMT.	(i)	267,048.	0.	716.	18,207.	4,198.	290,169.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) PETER BERGEN VP. GLOBAL STUDIES & FELLOWS	(i)	260,376.	0.	1,340.	18,207.	31,951.	311,874.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) BARRY C. HOWARD CFAO	(i)	239,341.	0.	467.	16,893.	30,131.	286,832.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) PETER SINGER SENIOR FELLOW & STRATEGIES	(i)	222,859.	0.	19,500.	16,343.	1,696.	260,398.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SARAH J MORRIS DIRECTOR, OPEN TECH INSTITUTE	(i)	210,916.	0.	280.	14,700.	26,593.	252,489.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) MARK S. SCHMITT DIRECTOR, POLITICAL REFORM	(i)	205,501.	0.	1,339.	14,348.	23,155.	244,343.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) VICTORIA SERL SHABO SENIOR FELLOW, BETTER LIFE LAB	(i)	202,053.	0.	467.	10,589.	35,059.	248,168.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) TOMICAH TILLEMANN-DICK DIRECTOR, DIGITAL IMPACT	(i)	199,028.	7,934.	323.	14,439.	25,405.	247,129.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MICHAEL CALABRESE DIRECTOR, WIRELESS FUTURE PROJECT	(i)	194,363.	0.	2,057.	13,525.	23,717.	233,662.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) CECILIA MUNOZ VICE PRESIDENT	(i)	174,778.	23,538.	20,592.	15,344.	6,390.	240,642.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) MARY ALICE MCCARTHY DIRECTOR, CENTER ON EDU. & LABOR	(i)	171,841.	0.	1,340.	11,710.	12,021.	196,912.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

PART I, LINE 7:

ANY BONUS GIVEN TO AN EXECUTIVE IN 2019 WAS IN RECOGNITION OF EXEMPLARY SERVICE TO THE ORGANIZATION. ANY BONUS PAYMENTS TO THE PRESIDENT AND CHIEF EXECUTIVE OFFICER (CEO) ARE DETERMINED AND APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS. BONUS PAYMENTS PAID TO EXECUTIVES ARE DETERMINED AND APPROVED BY THE PRESIDENT AND CEO. ALL BONUS PAYMENTS ARE BASED ON PERFORMANCE EVALUATIONS AND NOT GROSS OR NET REVENUE.

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

NEW AMERICA FOUNDATION

Employer identification number

52-2096845

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

OPPORTUNITIES FROM BIRTH THROUGH THIRD GRADE THAT PREPARE THEM TO

SUCCEED IN SCHOOL AND IN LIFE.

THE PREK-12 INITIATIVE WORKS TO ENSURE THAT ALL CHILDREN ATTENDING

PUBLIC ELEMENTARY AND SECONDARY SCHOOLS HAVE ACCESS TO AND RECEIVE

HIGH-QUALITY EDUCATIONAL EXPERIENCES, WITH A PARTICULAR EMPHASIS ON

IMPROVING EQUITY AND OUTCOMES FOR TRADITIONALLY UNDERSERVED STUDENTS.

NEW AMERICA'S HIGHER EDUCATION INITIATIVE WORKS TO MAKE HIGHER

EDUCATION MORE ACCESSIBLE, INNOVATIVE, STUDENT-CENTERED,

OUTCOMES-FOCUSED, AND EQUITABLE.

THE CENTER ON EDUCATION AND SKILLS IS A RESEARCH AND POLICY DEVELOPMENT

PROGRAM FOCUSED ON THE INTERSECTION OF OUR HIGHER EDUCATION, JOB

TRAINING, AND WORKFORCE DEVELOPMENT SYSTEMS. THE CENTER IS DEDICATED TO

BUILDING LEARNING-BASED PATHWAYS TO ECONOMIC OPPORTUNITY THAT CAN BEGIN

INSIDE OR OUTSIDE OF FORMAL HIGHER EDUCATION.

THE ENGLISH LEARNERS INITIATIVE PROVIDES A POLICY-DRIVEN FOCUS ON

LANGUAGE LEARNERS IN THE EARLY CHILDHOOD YEARS THROUGH THE PREK-12

EDUCATION SYSTEM. THE INITIATIVE CONDUCT RESEARCH, DEVELOP

RECOMMENDATIONS, AND DISSEMINATE NEW IDEAS TO POLICYMAKERS,

PRACTITIONERS, AND THE PUBLIC TO IMPROVE OUTCOMES FOR ENGLISH LEARNERS.

THE TEACHING, LEARNING, AND TECH PROJECT FOCUSES ON HOW EDUCATORS AND

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

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization NEW AMERICA FOUNDATION	Employer identification number 52-2096845
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OTHER PROFESSIONALS CAN USE NEW MEDIA AND TECHNOLOGIES TO PROMOTE MORE
EQUITABLE SYSTEMS OF LEARNING, FROM PRE-K THROUGH 12TH GRADE AND INTO
THE POST-SECONDARY YEARS.

POLITICAL REFORM PROGRAM: THE POLITICAL REFORM PROGRAM SEEKS TO DEVELOP
NEW STRATEGIES AND INNOVATIONS TO REPAIR THE DYSFUNCTION OF GOVERNMENT,
RESTORE TRUST, AND REBUILD THE PROMISE OF AMERICAN DEMOCRACY BY WORKING
TOWARDS AN OPEN, FAIR DEMOCRATIC PROCESS, WITH EQUITABLE OPPORTUNITIES
FOR FULL PARTICIPATION, IN ORDER TO RESTORE DYNAMISM AND GROWTH TO THE
AMERICAN ECONOMY AND SOCIETY.

BETTER LIFE LAB: THE BETTER LIFE LAB IS LEADING THE NATIONAL
CONVERSATION ABOUT THE EVOLUTION OF GENDER ROLES AND NORMS, FAMILY
POLICY, AND HOW WE WORK AND LIVE. THE PROGRAM SEEKS TO CREATE A PUBLIC
ENVIRONMENT THAT'S HOSPITABLE TO CHANGE, THROUGH POWERFUL WRITING AND
INFORMED DEBATE ABOUT CAREERS AND FAMILIES, THEIR STRENGTHS AND THEIR
NEEDS.

NEW AMERICA LOCAL: NEW AMERICA IS OVERHAULING THE TRADITIONAL THINK
TANK MODEL BY DEVELOPING A NEW MODEL OF CIVIC ENTERPRISE, WHICH
EXPERIMENTS WITH IDEAS AND SOLUTIONS TO PUBLIC PROBLEMS ON THE GROUND
THROUGH DIRECT ACTION AND COLLABORATIVE POLICY PROCESSES. IN ADDITION
TO THE RESEARCH AND WRITING THE ANALYSTS AND FELLOWS DO AROUND THE
COUNTRY, THE TEAMS IN CALIFORNIA, INDIANAPOLIS, AND CHICAGO ARE
DEDICATED TO DOING WORK RELEVANT TO AND WITH PEOPLE IN THEIR COMMUNITIES.

MUSLIM DIASPORA INITIATIVE: THE MUSLIM DIASPORA INITIATIVE PROVIDES A
FRESH PERSPECTIVE ON MUSLIM COMMUNITIES IN THE UNITED STATES THROUGH A

Name of the organization NEW AMERICA FOUNDATION	Employer identification number 52-2096845
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NON-SECURITY LENS. THEY RESEARCH, ANALYZE, WRITE, CONVENE, ADVISE AND CONDUCT OUTREACH ON POLICY-RELEVANT TOPICS RELATED TO AMERICAN MUSLIM COMMUNITIES. THROUGH THESE ACTIVITIES, THE MUSLIM DIASPORA INITIATIVE SEEKS TO INFORM AND IMPROVE THE PUBLIC CONVERSATION ABOUT AMERICAN MUSLIM COMMUNITIES, AS WELL AS USE SCHOLARSHIP AND DATA TO INFORM POLICY.

MILLENNIALS INITIATIVE: THE MILLENNIALS INITIATIVE EXAMINES THE CHALLENGES FACING THIS GENERATION OF YOUNG ADULTS (BORN BETWEEN 1980 AND 2000). IT ENCOMPASSES A PUBLIC POLICY FELLOWSHIP AND A PROGRAM OF IN-DEPTH POLICY RESEARCH FOCUSED ON SUPPORTING THE DEVELOPMENT OF A FORWARD-LOOKING POLICY AGENDA.

FAMILY CENTERED SOCIAL POLICY PROGRAM: THE FAMILY CENTERED SOCIAL POLICY PROGRAM IS A COLLABORATIVE EFFORT TO HELP REIMAGINE SOCIAL POLICY FOR THE TWENTY-FIRST CENTURY. THE PRIMARY OBJECTIVES INCLUDE ASSESSING CURRENT CONDITIONS, EXPLORING ALTERNATIVES, AND PROPOSING FORWARD-LOOKING REFORMS TO INFORM POLICY DESIGN AND PUBLIC DISCOURSE.

RESILIENT COMMUNITIES PROGRAM: THE RESILIENT COMMUNITIES PROGRAM WORKS ALONGSIDE LOCAL GROUPS AND LEADERS TO DESIGN, BUILD, MANAGE, AND LEVERAGE COMMUNITY WIRELESS NETWORKS AS PLATFORMS TO STRENGTHEN RELATIONSHIPS AND ADDRESS RISKS AND CHALLENGES.

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

THE RANKING DIGITAL RIGHTS PROJECT EVALUATES AND RANKS THE WORLD'S LARGEST INTERNET, MOBILE, AND TELECOMMUNICATIONS COMPANIES'

Name of the organization NEW AMERICA FOUNDATION	Employer identification number 52-2096845
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COMMITMENTS, POLICIES AND PRACTICES AFFECTING FREEDOM OF EXPRESSION AND
 PRIVACY.

TECHCONGRESS IS A PROJECT TO EMBED TECHNOLOGISTS IN CONGRESSIONAL
 OFFICES TO BOLSTER IN-HOUSE TECH EXPERTISE IN GOVERNMENT.

THE MEASUREMENT LAB (M-LAB) PLATFORM AND CORRESPONDING TOOLKIT MEASURE
 INTERNET SPEEDS AND PERFORMANCE, SO THAT ANYONE CAN NOW SEARCH FOR
 LOCAL INFORMATION ABOUT INTERNET PROVIDERS AND SPEEDS, DOWNLOAD THE
 DATA THEMSELVES, AND COMPARE LOCATIONS ACROSS THE WORLD.

PUBLIC INTEREST TECHNOLOGY PROGRAM: THE PUBLIC INTEREST TECHNOLOGY
 PROGRAM CONNECTS TECHNOLOGISTS TO PUBLIC INTEREST ORGANIZATIONS TO
 IMPROVE SERVICES TO VULNERABLE COMMUNITIES AND STRENGTHEN LOCAL
 ORGANIZATIONS THAT SERVE THEM.

CYBERSECURITY INITIATIVE: THE GOAL OF NEW AMERICA'S CYBERSECURITY
 INITIATIVE IS TO BRING THE KEY ATTRIBUTES OF NEW AMERICA'S ETHOS TO THE
 CYBERSECURITY POLICY CONVERSATION. IN DOING SO, THE INITIATIVE PROVIDES
 A LOOK AT ISSUES FROM FRESH PERSPECTIVES, AN EMPHASIS ON
 CROSS-DISCIPLINARY COLLABORATION, A COMMITMENT TO QUALITY RESEARCH AND
 EVENTS, AND DEDICATION TO DIVERSITY IN ALL ITS GUISES. THE INITIATIVE
 SEEKS TO ADDRESS ISSUES OTHERS CAN'T OR DON'T AND CREATE IMPACT AT
 SCALE.

THE DIGICHINA PROJECT, PRIMARILY THROUGH TRANSLATING AND ANALYZING
 CHINESE-LANGUAGE SOURCES, WORKS TO UNDERSTAND HOW THE CHINESE STATE AND
 SOCIETY DEPLOY AND USE DIGITAL TECHNOLOGIES POLICY DEVELOPMENTS.

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FUTURE TENSE: FUTURE TENSE IS A PARTNERSHIP BETWEEN NEW AMERICA, ARIZONA STATE UNIVERSITY, AND SLATE MAGAZINE TO EXPLORE EMERGING TECHNOLOGIES AND THEIR TRANSFORMATIVE EFFECTS ON SOCIETY AND PUBLIC POLICY. CENTRAL TO THE PARTNERSHIP IS A SERIES OF EVENTS THAT TAKE IN-DEPTH, PROVOCATIVE LOOKS AT ISSUES THAT, WHILE LITTLE UNDERSTOOD TODAY, WILL DRAMATICALLY RESHAPE THE POLICY DEBATES OF THE COMING DECADE.

DIGITAL IMPACT AND GOVERNANCE INITIATIVE: THE DIGITAL IMPACT AND GOVERNANCE INITIATIVE (DIGI) DEVELOPS TECHNOLOGY PLATFORMS THAT TRANSFORM THE WAY INSTITUTIONS DELIVER VALUE FOR CITIZENS. THE PROGRAM WORKS WITH PARTNERS IN GOVERNMENT AND THE PRIVATE SECTOR TO CREATE MODULAR, INTEROPERABLE TECHNOLOGY SOLUTIONS BUILT ON OPEN SOURCE CODE THAT ADDRESS KEY CHALLENGES FACING THE PUBLIC SECTOR. THESE PLATFORMS PROVIDE "80 PERCENT" SOLUTIONS, WITH GOVERNMENTS ABLE TO CUSTOMIZE THE LAST 20 PERCENT OF EACH PLATFORM TO MEET THEIR SPECIFIC NEEDS. OVER THE NEXT FIVE YEARS, THE PROGRAM HOPES TO SCALE THE USE OF OPEN SOURCE PLATFORMS TO JURISDICTIONS WITH AT LEAST 100 MILLION PEOPLE.

BLOCKCHAIN TRUST ACCELERATOR: THE BLOCKCHAIN TRUST ACCELERATOR, GROWN OUT OF THE BRETTON WOODS II PROGRAM, EXPLORES HOW BLOCKCHAIN TECHNOLOGY CAN BE USED TO SOLVE SOCIAL IMPACT AND GOVERNANCE CHALLENGES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
FUTURE OF PROPERTY RIGHTS: THE FUTURE OF PROPERTY RIGHTS PROGRAM ENGAGES WITH POLICYMAKERS, TECHNOLOGISTS, ACADEMICS, CIVIL SOCIETY, AND JURISDICTIONS TO HELP COMMUNITIES AROUND THE WORLD FORMALIZE PROPERTY

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RIGHTS. RECENT TECHNOLOGICAL ADVANCEMENTS HAVE MADE IT POSSIBLE TO
 REDUCE THE TIME, COST, AND COMPLEXITY OF PROPERTY RIGHTS FORMALIZATION.
 THE PROGRAM'S ROLE IS TO HIGHLIGHT THESE OPPORTUNITIES, EXPAND THE
 CONVERSATION, AND FACILITATE INSTANCES OF PROPERTY RIGHTS FORMALIZATION
 IMPROVING LIVES.

RESOURCE SECURITY PROGRAM: NEW AMERICA'S RESOURCE SECURITY PROGRAM
 WORKS ON THE INTERSECTION OF SECURITY, PROSPERITY, AND NATURAL
 RESOURCES, OR "NATURAL SECURITY." NEW AMERICA IS LOOKING AT THE
 SHIFTING PATTERNS OF NATURAL SECURITY, FROM LOCAL COMMUNITIES TO
 GEOPOLITICS, AND WITH ITS PHASE ZERO PROJECT, SEEKS TO UNDERSTAND HOW
 CLIMATE CHANGE CAN PREDICT GLOBAL CONFLICT.

WORK, WORKERS AND TECHNOLOGY: THE WORK, WORKERS, AND TECHNOLOGY PROGRAM
 REIMAGINES AMERICA'S SOCIAL CONTRACT AND HOW THE EVOLUTION AND
 AUTOMATION OF WORK IS CHANGING SOCIETY. THROUGH A SERIES OF SCENARIO
 PLANNING EXERCISES WITH SMALL GROUPS OF TECH AND BUSINESS CEOS, WWT
 EXPLORES HOW ARTIFICIAL INTELLIGENCE, THE ON-DEMAND ECONOMY, THE AGING
 WORKFORCE, AND OTHER TECHNOLOGICAL AND CULTURAL CHANGES WILL TRANSFORM
 THE WAY WE WORK.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
 FELLOWS PROGRAM
 NEW AMERICA FELLOWS: THE NEW AMERICA NATIONAL FELLOWS PROGRAM INVESTS
 IN THINKERS, JOURNALISTS, SCHOLARS, FILMMAKERS, AND PUBLIC POLICY
 ANALYSTS WHO GENERATE BIG, BOLD IDEAS THAT HAVE AN IMPACT AND SPARK NEW
 CONVERSATIONS ABOUT THE MOST PRESSING ISSUES OF OUR DAY.

EXPENSES \$ 1,189,425. INCLUDING GRANTS OF \$ 670,231. REVENUE \$ 0.

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ECONOMIC/FISCAL POLICY PROGRAMS

EXPENSES \$ 4,520. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

OTHER PROGRAMS

EXPENSES \$ 400,010. INCLUDING GRANTS OF \$ 275,000. REVENUE \$ 0.

PUBLICATION SALES

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 649.

FORM 990, PART VI, SECTION A, LINE 1:

THE BOARD OF DIRECTORS MAY ELECT OR APPOINT ONE OR MORE COMMITTEES
(INCLUDING BUT NOT LIMITED TO AN EXECUTIVE COMMITTEE) AND MAY DELEGATE TO
ANY SUCH COMMITTEE OR COMMITTEES ANY OR ALL OF THEIR POWERS, PROVIDED THAT
ANY COMMITTEE TO WHICH THE POWERS OF THE DIRECTORS ARE DELEGATED SHALL
CONSIST SOLELY OF DIRECTORS. UNLESS THE DIRECTORS OTHERWISE DETERMINE, AN
EXECUTIVE COMMITTEE ELECTED BY THE DIRECTORS SHALL HAVE THE POWER TO ACT
FOR THE FULL BOARD OF DIRECTORS ON ALL MATTERS BETWEEN MEETINGS OF THE
DIRECTORS EXCEPT FOR SUCH MATTERS AS MAY BE PROVIDED BY LAW OR THE ARTICLES
OF INCORPORATION.

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

THE FORM 990 IS REVIEWED BY MANAGEMENT AND THE AUDIT/FINANCE COMMITTEE, AND
A COPY IS SENT TO THE FULL BOARD BEFORE IT IS SIGNED BY A MEMBER OF THE
EXECUTIVE TEAM AND FILED WITH THE IRS.

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

THE POLICY AND ITS APPLICATION ARE REVIEWED ANNUALLY FOR THE INFORMATION

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AND GUIDANCE OF OFFICERS, STAFF MEMBERS, FELLOWS, AND BOARD MEMBERS, EACH OF WHOM HAS A CONTINUING RESPONSIBILITY TO (A) SCRUTINIZE HIS OR HER TRANSACTIONS AND OUTSIDE BUSINESS INTERESTS AND RELATIONSHIPS FOR POTENTIAL CONFLICTS AND (B) MAKE SUCH DISCLOSURES AS DESCRIBED HEREIN.

EACH NEW AMERICA OFFICER, STAFF MEMBER, AND FELLOW ARE ASKED TO COMPLETE AND SIGN A CONFLICT OF INTEREST POLICY DISCLOSURE STATEMENT UPON HIS OR HER EMPLOYMENT, AND ON AN ANNUAL BASIS THEREAFTER. EACH NEW AMERICA BOARD MEMBER IS ASKED TO COMPLETE AND SIGN SUCH A STATEMENT UPON HIS OR HER ELECTION OR REELECTION TO THE BOARD, AND ANNUALLY THEREAFTER.

A MEMBER OF THE OPERATIONS TEAM MONITORS COMPLIANCE WITH THIS POLICY.

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

THE CHIEF EXECUTIVE OFFICER'S (CEO) COMPENSATION IS REVIEWED AND DETERMINED BY THE BOARD OF DIRECTORS ANNUALLY. THIS PROCESS LAST TOOK PLACE IN 2019 AS THERE WERE NO SALARY INCREASES IN 2020 DUE TO COVID. NEW AMERICA COMPLETES A COMPENSATION STUDY WHICH INCLUDES THE CEO (AND OTHER C LEVEL SALARIES) EVERY 2-3 YEARS. THE ORGANIZATION UNDERWENT A COMPENSATION STUDY IN 2019. MINUTES FROM THE EXECUTIVE COMMITTEE MEETINGS REFLECT THE DISCUSSIONS AND DECISIONS, ANY CHANGES, AS WELL AS STATUS UPDATES ARE REPORTED AT, AND RECORDED IN THE MINUTES FOR THE MAIN BOARD MEETING.

IN GENERAL, ALL STAFF SALARIES ARE DETERMINED BY HUMAN RESOURCES IN CONSULTATION WITH THE RESPECTIVE PROGRAM DIRECTORS BASED ON SALARY GUIDELINES THAT HAVE BEEN DEVELOPED OUT OF THE COMPENSATION REVIEW PERFORMED BY CLA IN 2019. THE SALARIES ARE REVIEWED AND APPROVED BY THE SENIOR LEADERSHIP TEAM AND/OR THE PRESIDENT/CTO.

Schedule O (Form 990 or 990-EZ) 2020

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

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, 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

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS

AVAILABLE TO THE PUBLIC UPON REQUEST AND ON THE WEBSITE GUIDESTAR.ORG. THE

CONFLICT OF INTEREST POLICY IS AVAILABLE ON NEW AMERICA'S WEBSITE.

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

CONSULTANTS & SUBCONTRACTORS:

PROGRAM SERVICE EXPENSES	4,547,892.
MANAGEMENT AND GENERAL EXPENSES	443,817.
FUNDRAISING EXPENSES	16,690.
TOTAL EXPENSES	5,008,399.

FELLOWS:

PROGRAM SERVICE EXPENSES	177,568.
MANAGEMENT AND GENERAL EXPENSES	25,000.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	202,568.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 5,210,967.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

LOSS ON FOREIGN CURRENCY EXCHANGE -10,844.

FORM 990 PART XIII, LINE 2C

