** PUBLIC DISCLOSURE COPY **

Department of the Treasury

Internal Revenue Service

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

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

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

Open to Public Inspection

OMB No. 1545-0047

ΑI	For the	e 2015 calendar year, or tax year beginning	and	ending		
В	Check if applicable	C Name of organization			D Employer identific	cation number
		INSTITUTE FOR TRANSPORT	ATION AND			
	Addre:	DEVELOPMENT POLICY				
	Name chang	Doing business as			52-1	399520
	Initial return	Number and street (or P.O. box if mail is not delive		Room/suite	E Telephone number	
	Final return				212-	629-8001
_	termin ated	City or town, state or province, country, and ∠	IP or foreign postal code		G Gross receipts \$	6,388,497.
Ļ	Ameno	NEW TORK, NI 10005			H(a) Is this a group re	
	Application pendir		TON LANE		for subordinates	
		SAME AS C ABOVE			H(b) Are all subordinates in	
<u> </u>	Tax-exe		(insert no.) 4947(a)(1)	or 527	1	list. (see instructions)
		e: ► WWW.ITDP.ORG			H(c) Group exemption	
			ociation Other	L Year	of formation: 1985 N	State of legal domicile: DC
Pa		Summary	CEE	ד שמגם	TT	
Se	1	Briefly describe the organization's mission or most s	ignificant activities: 5EE .	PARII	II, LINE I.	
Activities & Governance			Santa di Santa and Santa di Sa	l - £	H 050/ -f H +	
Veri		Check this box if the organization discont				10
ဗွ		Number of voting members of the governing body (F Number of independent voting members of the gove				8
ფ		Total number of individuals employed in calendar ye				23
iţi		Total number of volunteers (estimate if necessary)				9
÷		Total unrelated business revenue from Part VIII, colu				0.
ĕ		Net unrelated business taxable income from Form 9				0.
	Ť	THE CHICAGO DUSTINOS CANADIS INCOME NOTITION OF	00 1, 1110 04		Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)			5,443,191.	5,290,605.
ņ					1,037,050.	1,069,180.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, a			8,796.	8,440.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9			0.	19,749.
	1	Total revenue - add lines 8 through 11 (must equal P			6,489,037.	6,387,974.
		Grants and similar amounts paid (Part IX, column (A)			0.	0.
		Benefits paid to or for members (Part IX, column (A),			0.	0.
S	15	Salaries, other compensation, employee benefits (Pa	art IX, column (A), lines 5-10)		2,195,836.	2,052,044.
Expenses	16a	Professional fundraising fees (Part IX, column (A), lin	e 11e)		0.	0.
xbe	b	Total fundraising expenses (Part IX, column (D), line	25) ▶ <u>83,5</u>	70.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 1	11f-24e)		5,612,089.	
	1	Total expenses. Add lines 13-17 (must equal Part IX,			7,807,925.	7,229,560.
	19	Revenue less expenses. Subtract line 18 from line 1	2		-1,318,888.	-841,586.
Net Assets or Fund Balances				Ве	ginning of Current Year	End of Year
sset	20				5,717,017.	4,987,873.
et A	21				586,907.	699,349.
	22	Net assets or fund balances. Subtract line 21 from li	ne 20		5,130,110.	4,288,524.
	art II	Signature Block Ities of perjury, I declare that I have examined this return, in	actudina accompanyina achadula	a and atatam	anta and to the best of m	v knowledge and balisf it is
		t, and complete. Declare that I have examined this return, in				y knowledge and beller, it is
uue	, 001160	t, and complete. Declaration of preparer (other than officer)	is based on an information of wi	iicii piepaiei	lias ally kilowieuge.	
Sig	n	Signature of officer			I Date	
Her		MELINDA EISENMANN, CHIE	F OPERATING OF	FICER		
He	•	Type or print name and title	0121111110 01	LICLI		
		,	Preparer's signature	10	Date Check	PTIN
Pai	d		. spa. or o orginaturo		if self-employe	-d
	- parer	Firm's name GELMAN, ROSENBERG	& FREEDMAN		Firm's EIN	52-1392008
	Only	Firm's address 4550 MONTGOMERY A			3 Em	
	•	BETHESDA, MD 2081	4-2930		Phone no. (3	01) 951-9090
Ma	v the IF	RS discuss this return with the preparer shown above			` <u> </u>	X Yes No

	INSTITUTE FOR TRANSPORTATION AND	
Form	990 (2015) DEVELOPMENT POLICY 52-1399520 Page	2
Par	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	ζ]
1	Briefly describe the organization's mission:	
	THE INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY WORKS IN	
	CITIES WORLDWIDE TO BRING ABOUT TRANSPORT SOLUTIONS THAT CUT	
	GREENHOUSE GAS EMISSIONS, REDUCE POVERTY, AND IMPROVE THE QUALITY OF	
	URBAN LIFE.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	lo
	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?	lo
	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 \$ 2,331,902. including grants of \$) (Revenue \$ 202,942.	.)
	PUBLIC TRANSPORT: IN INDONESIA, NEW BRT SERVICES IN JAKARTA HAVE	_ ′
	INCREASED ACCESS FOR LOW-INCOME HOUSEHOLDS, WHILE THE JAKARTA	
	GOVERNMENT IS IN THE PROCESS OF INCORPORATING ITDP'S RECOMMENDATIONS ON	<u> </u>
	ISSUES LIKE MIXED-USE HOUSING INTO NEW TOD REGULATIONS.	<u>`</u>
	IDDOED LIKE MINED ODE HOODING INTO NEW TOD RECOEMITORS.	_
	IN KENYA, ITDP AFRICA IS WORKING CLOSELY WITH THE MINISTRY OF TRANSPORT	_
	AND INFRASTRUCTURE (MOTI), THE KENYA NATIONAL HIGHWAYS AUTHORITY	
	(KENHA), AND THE NAIROBI CITY COUNTY GOVERNMENT TO IMPLEMENT	_
	COMPREHENSIVE SUSTAINABLE TRANSPORT IMPROVEMENTS. THESE INCLUDE	—
	BUILDING A HIGH-QUALITY BUS RAPID TRANSIT NETWORK AS THE BACKBONE OF	
	THE CITY'S MOBILITY SYSTEM. ITDP FOCUSED ON LINE 1 OF THE BRT NETWORK,	
	TURNING WHAT BEGAN AS A HIGHWAY PROJECT INTO AN INTEGRATED RAPID	
4b	(Code:) (Expenses 1,458,555. including grants of \$) (Revenue \$ 62,009. CLIMATE AND TRANSPORT POLICY: ITDP'S EFFORTS IN LEAD-UP EVENTS TO AND	<u>·</u>)
	UN GENERAL ASSEMBLY AND COP21 CONTRIBUTED TO MAJOR SUCCESSES FOR	
		—
	SUSTAINABLE TRANSPORT. IN 2015, AN AGREEMENT WAS REACHED BETWEEN 193 COUNTRIES TO ESTABLISH 17 SUSTAINABLE DEVELOPMENT GOALS. ITDP'S INPUT	—
	HELPED GAIN THE INCLUSION OF SPECIFIC REFERENCES TO TRANSPORT IN	_
	SEVERAL TARGETS, SUCH AS CUTTING THE NUMBER OF DEATHS AND INJURIES FROM	<u></u>
	ROAD TRAFFIC ACCIDENTS GLOBALLY BY HALF. IN ADDITION, THERE IS A GOAL	1
	DEDICATED TO MAKING CITIES AND HUMAN SETTLEMENTS INCLUSIVE, SAFE,	
	RESILIENT, AND SUSTAINABLE. THE BUILDING OF RESILIENT AND SUSTAINABLE	—
	INFRASTRUCTURE IS INCLUDED IN SEVERAL GOALS DEALING WITH A RANGE OF	—
	THEMES FROM INDUSTRIALIZATION AND INNOVATION TO GENDER EQUALITY AND	—
	PROMOTION OF AGRICULTURE.	
4-	(Code:) (Expenses \$ 1,260,597. including grants of \$) (Revenue \$ 664,101.	
40	CYCLING & WALKING: SIX MONTHS AFTER THE SYSTEM OPENED, LANZHOU, CHINA'S	
	BIKE SHARE PROGRAM, PLANNED AND DESIGNED WITH HEAVY INPUT FROM ITDP,	<u> </u>
	HAS MET ITS GOAL OF EXTENDING COVERAGE TO THE CITY'S BRT CORRIDOR. ONE	
	OF CHINA'S BEST BIKE SHARES, THE SYSTEM HAS IMPRESSED CITY RESIDENTS	
	WITH ITS CONVENIENCE, ACCESSIBILITY, AND COMFORT. TODAY, THE SYSTEM	_
	OPERATES WITH 383 STATIONS AND 9,880 BIKES. MAJOR, HIGH PROFILE NMT	_
	DEMONSTRATION PROJECTS IN CENTRAL TIANJIN, INCLUDING 'COMPLETE STREETS'	_
	DESIGNED BY ITDP, ARE TO BE COMPLETED BY OCTOBER 2016. ITDP HAS BEEN	—
	INTENSIVELY INVOLVED IN THE PROMOTION, PLANNING, AND DESIGN OF THESE	_
		—
	ROADWAYS AND NMT NETWORKS.	_
	IN INDIA, THE CORPORATION OF CHENNAL ADOPTED A PROGRESSIVE POLICY IN	
	· · · · · · · · · · · · · · · · · · ·	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 1,179,317. including grants of \$) (Revenue \$ 140,128.)	_
<u>4e</u>	Total program service expenses ► 6,230,371.	

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INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY

Form 990 (2015)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	100	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	21	
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			37
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.		Х
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		х
	complete Schedule G, Part III	פו		

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INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY

Form 990 (2015)

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a Did th	ne organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b If "Yes	s" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	e organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	stic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
	ne organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			37
	X, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X_
	ne organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	ormer officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		Х	
3011ec	dule J	23	- 72	
	ay of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	dule K. If "No", go to line 25a	24a		Х
	ne organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	ne organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	ax-exempt bonds?	24c		
	e organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a Section	on 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
transa	action with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b Is the	organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
that th	ne transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
Sched	dule L, Part I	25b		X
	e organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	r officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			7.7
•	lete Schedule L, Part II	26		X
	ne organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	butor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			Х
	y of these persons? If "Yes," complete Schedule L, Part III	27		Λ
	the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	ctions for applicable filing thresholds, conditions, and exceptions): rent or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	Х	
	ily member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	tity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
	or, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
	ne organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
	ne organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	butions? If "Yes," complete Schedule M	30		X
	ne organization liquidate, terminate, or dissolve and cease operations?			
	s," complete Schedule N, Part I	31		X
	ne organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
Sched	dule N, Part II	32		<u> </u>
	ne organization own 100% of an entity disregarded as separate from the organization under Regulations	_	v	
	ons 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X	
	he organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			Х
	/, line 1 ne organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	s" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	SSA		
	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	on 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	300		
	s," complete Schedule R, Part V, line 2	36		Х
	ne organization conduct more than 5% of its activities through an entity that is not a related organization			
	nat is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
	ne organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	le organization complete ocheddie o and provide explanations in ocheddie o for hart vi, illies i no and 19:			

INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY

Form 990 (2015)

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			X
			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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country: ► SEE SCHEDULE O			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		7.7
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	٠		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		Х
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b		
C	to file Form 8282?	7c		x
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d	-		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	IZa		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2015)

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

DEVELOPMENT POLICY Form 990 (2015) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 10 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 8 **b** Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, or trustees, or key employees to a management company or other person? 3 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, Х and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a **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? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this was done X Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? X 14 14 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? Х a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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 16b exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA, CT, IL, MD, MA, NY, OR, VA, WA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request X Own website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: MELINDA EISENMANN - 212-629-8001 9 EAST, 19TH STREET, 7TH FLOOR, NEW YORK, 10003

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

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

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

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

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

(A) Name and Title	(B) (C) Average hours per hours per hostile for the control f				than is bot	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer		Highest compensated supplying employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) CLAYTON LANE (BEGAN OCTOBER 201 CHIEF EXECUTIVE OFFICER	40.00	X		Х				67,673.	0.	0.
(2) HEATHER THOMPSON	20.00			 				07,075.	•	
INTERIM CHIEF EXECUTIVE OFFICER/DIRE	20,00	Х		х				180,000.	0.	0.
(3) ENRIQUE PENALOSA	2.00									
PRESIDENT		Х		Х				0.	0.	0 .
(4) JOSEPH RYAN	2.00	7,		ν,					0	0
VICE PRESIDENT	2 00	Х		Х				0.	0.	0.
(5) JULES FLYNN SECRETARY	2.00	x		x				0.	0.	0 .
(6) BOB HAMBRECHT	2.00								•	
TREASURER		х		x				0.	0.	0 .
(7) DAN ABBASI	2.00									
DIRECTOR		Х						0.	0.	0 .
(8) JOHN FLAHERTY	2.00							0	0	0
DIRECTOR	2.00	Х						0.	0.	0 .
(9) PAUL STEELY WHITE DIRECTOR	2.00	x						0.	0.	0 .
(10) JANETTE SADIK-KHAN	2.00									
DIRECTOR		х						0.	0.	0 .
(11) MELINDA EISENMANN	40.00									
CHIEF OPERATING OFFICER				Х				118,145.	0.	24,866
(12) AIMEE GAUTHIER	40.00									
CHIEF PROGRAM OFFICER	40.00					Х		121,216.	0.	15,347
(13) LUC NADAL	40.00					٠,		100 067	0	12 001
TECHNICAL DIRECTOR, URBAN DEVELOPMEN						X		100,867.	0.	13,901

	1990 (2015) DEVELOPM.									52-135	<u> 195</u>	<u>⊿∪</u>	Pa	ge č
Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	ompensated Employees	(continued)				
	(A)	(B)			(0	C)			(D)	(E)		(F)	
	Name and title	Average	(do	not c	Pos heck	ition	than	one	Reportable	Reportable		Estir	nate	b
		hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation			unt c	of
		week	- -	Jer an	lu a u	lirecio)/ ii us	lee)	from	from related			her	
		(list any hours for	irecto						the	organizations		compe		
		related	or d	ee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	'	organ	n the	
		organizations	rustee	l trus		e e	nben		(***2/1099*****130)			and r		
		below	dualt	itiona	_	nploy	st col	 				organi		
		line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				3		
			_	_	Ť	1					\top			
			1											
											4			
											+			
											+			
											+			
1b	Sub-total	1							587,901.	(١.	54	,11	4
С	Total from continuation sheets to Part V	II, Section A						>	0.	C) .			0 .
	Total (add lines 1b and 1c)								587,901.	C) .	54	,11	4
2	Total number of individuals (including but r	not limited to th	ose	liste	ed a	bove	e) wł	no re	eceived more than \$100,0	000 of reportable				
	compensation from the organization													4
											_	Y	es	No
3	Did the organization list any former officer,	director, or tru	uste	e, ke	y er	nplo	yee	, or h	highest compensated em	ployee on				
	line 1a? If "Yes," complete Schedule J for s	such individual									L	3	_	X
4	For any individual listed on line 1a, is the su	•							•	•				
	and related organizations greater than \$15										L	4	X	
5	Did any person listed on line 1a receive or													
	rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	uch	pers	son .				<u>L</u>	5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated in	debe	ende	ent c	onti	racto	ors tl	hat received more than \$	100,000 of compe	ensat	tion fro	m	

the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
EXPAND HR CONSULTING, LLC, 9710 TRAVILLE	OUTSOURCED HR	
GATEWAY DR., #114, ROCKVILLE , MD 20850	SERVICES	156,134.
BRT PLANNING INTERNATIONAL LLC	PROGAM AREA	
141 AINSLIE STREET, BROOKLYN, NY 11211	CONSULTING SERVICES	116,667.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	

Form **990** (2015)

\$100,000 of compensation from the organization

Part VIII Stat	tement of Revenue	
orm 990 (2015)	DEVELOPMENT POLICY	
	INDITION TON TRANSPORTED	7 7 7 7

		Check if Schedule O contain	s a response	or note to any lir	ne in this Part VIII			<u></u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ıts I	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
Ę,		Fundraising events						
a ii		Related organizations						
S,E		Government grants (contribution		440,432.				
Sign		All other contributions, gifts, grants, a	· —	<u> </u>				
P E	•	similar amounts not included above		850,173.				
들턴		Noncash contributions included in lines 1a-		, , , , , , ,				
Sor	9 h	Total. Add lines 1a-1f	π. Ψ		5.290.605.			
<u> </u>		Total. / Gd iiiles Ta Ti		Business Code				
a	2 a	CONSULTING REVEN			1,069,180.	1.069.180.		
ķ	2 a			300033				
Ser	C							
E E	d							
Reg	_	·						
Program Service Revenue	e	All other program service revenue						
		Total. Add lines 2a-2f			1,069,180.			
	3	Investment income (including div			±,005,±00•			
	3	other similar amounts)	,	,	8,963.			8,963.
	4	Income from investment of tax-ex			0,303.			0,303.
	4 5	Royalties						
	3	noyalties		(ii) Personal				
	6 -	Cross rents	(i) Real	(II) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	/ a	`	i) Securities	(ii) Other				
		assets other than inventory						
	D	Less: cost or other basis		523.				
		and sales expenses		-523.				
		Gain or (loss)			-523.			-523.
		Net gain or (loss)		······ <u> </u>	-323.			-323.
enne	8 a	Gross income from fundraising e including \$	•					
ě		contributions reported on line 1c). See					
Other Reve		Part IV, line 18	а					
Ě∣	b	Less: direct expenses	b					
Ŭ	С	Net income or (loss) from fundrai	sing events	<u></u>				
	9 a	Gross income from gaming activi	ties. See					
		Part IV, line 19	a					
		Less: direct expenses						
	С	Net income or (loss) from gaming	activities	<u></u>				
	10 a	Gross sales of inventory, less ret	urns					
		and allowances	а					
	b	Less: cost of goods sold	b					
ļ	С	Net income or (loss) from sales o	f inventory					
ļ		Miscellaneous Revenue		Business Code				
	11 a	OTHER REVENUE		900099	19,749.			19,749.
	b							
	С							
		All other revenue			10.710			
	е	Total. Add lines 11a-11d			19,749.			00 100
	12	Total revenue. See instructions		<u></u>	6,387,974.	μ,069,180 .	0.	28,189.

Part IX | Statement of Functional Expenses

-	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon		-	p.oto colaiiii (i yi	X
	not include amounts reported on lines 6b, 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		·	<u> </u>	·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				
4 5	Compensation of current officers, directors,				
5	trustees, and key employees	405,634.	217,722.	186,558.	1,354
6	Compensation not included above, to disqualified	10370311	21777224	100/3301	1,331
U	persons (as defined under section 4958(f)(1)) and				
	nercone described in section 40E0(a)(D)				
7	Other salaries and wages	1,319,400.	909,304.	359,236.	50,860
8	Pension plan accruals and contributions (include	, = = , = 0 0		,	,
-	section 401(k) and 403(b) employer contributions)	100,409.	70,750.	26,153.	3,506
9	Other employee benefits	108,130.	88,520.	15,223.	3,506 4,387
10	Payroll taxes	118,471.	92,877.	22,342.	3,252
11	Fees for services (non-employees):		·		·
а	Management				
b	Legal	25,627.	10,553.	15,069.	5
С	Accounting	94,383.	87,646.	3,880.	2,857
d	Lobbying				
е	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.)	1,504,002.	1,364,393.	135,182.	4,427
12	Advertising and promotion	12,158.	12,158.		
13	Office expenses	172,169.	162,283.	5,540.	4,346
14	Information technology				
15	Royalties				
16	Occupancy	337,972.	321,036.	15,312.	1,624
17	Travel	726,977.	691,991.	34,433.	553
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.40 1.00	100 050	60.040	0.5
19	Conferences, conventions, and meetings	249,189.	189,053.	60,049.	87
20	Interest				
21	Payments to affiliates	02 017	02 017		
22	Depreciation, depletion, and amortization	83,917. 31,413.	83,917. 28,245.	2 102	66
23	Insurance	31,413.	20,245.	3,102.	66
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.) FIELD STAFF	1,729,959.	1,714,488.	15,471.	
a	EXCHANGE RATE	66,986.	66,986.	13,411.	
b	LICENSE FEES	65,449.	60,686.	931.	3,832
q	PROF. DEVELOPMENT	26,101.	14,128.	10,624.	1,349
d		51,214.	43,635.	6,514.	1,065
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	7,229,560.	6,230,371.	915,619.	83,570
25 26	Joint costs. Complete this line only if the organization	,,225,500•	0,200,511.	213,013.	00,510
_U	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	- MOC 306-720)				Form 990 (201)

Part X Balance Sheet

ra	πλ	Balance Sneet					
		Check if Schedule O contains a response or not	e to ar	y line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing	1,652,016.	1	727,612.		
	2	Savings and temporary cash investments			1,459,548.	2	1,076,694.
	3	Pledges and grants receivable, net		2,141,612.	3	2,481,137.	
	4	Accounts receivable, net			261,253.	4	490,141.
	5	Loans and other receivables from current and for	fficers, directors,				
		trustees, key employees, and highest compensation	ated en	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
ets		employers and sponsoring organizations of sect	ion 50	1(c)(9) voluntary			
		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			55,571.	9	70,423.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	615,999.			
	b	Less: accumulated depreciation	10b	538,323.	98,469.	10c	77,676.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 3	1			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		48,548.	15	64,190.	
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	34)	5,717,017.	16	4,987,873.
	17	Accounts payable and accrued expenses	511,614.	17	516,018.		
	18	Grants payable		L		18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to current and former					
Ħ		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela		—		23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	,				
		parties, and other liabilities not included on lines	17-24). Complete Part X of	75 202		102 221
		Schedule D			75,293.	25	183,331. 699,349.
	26			July house N Y and	586,907.	26	033,349.
		Organizations that follow SFAS 117 (ASC 958		ck nere ▶ 🕰 and			
ces		complete lines 27 through 29, and lines 33 an			2,432,594.		1,442,807.
Fund Balances	27	Unrestricted net assets			2,697,516.	27	2,845,717.
Ва	28	Temporarily restricted net assets			2,031,310.	28	2,043,717
pur	29			2) -11-1		29	
Ē		Organizations that do not follow SFAS 117 (A	SC 956	s), check here			
S.	00	and complete lines 30 through 34.				200	
set	30	Capital stock or trust principal, or current funds				30	
Net Assets or	31	Paid-in or capital surplus, or land, building, or ed				31	
Š	32	Retained earnings, endowment, accumulated in		—	5,130,110.	32	4,288,524.
	33	Total liabilities and not assets/fund balances		II	5,717,017.	34	4,987,873.
	34	Total liabilities and net assets/fund balances			5,111,011.	34	=,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Pa	rt 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)		5,38			
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,22			
3	Revenue less expenses. Subtract line 2 from line 1	3	-84			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,13	0,1	10.	
5	5 Net unrealized gains (losses) on investments 5					
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
					24.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				Щ	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?				X	
	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?		2 b	X		
	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					
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,					
	review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit					
	Act and OMB Circular A-133?				X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990	(2015)	

532012 12-16-15

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

2015

Open to Public Inspection

INSTITUTE FOR TRANSPORTATION AND Name of the organization Employer identification number DEVELOPMENT POLICY 52-1399520 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 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. 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. 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. 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above (see instructions)) instructions) instructions) Yes No

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 532021 09-23-15

Schedule A (Form 990 or 990-EZ) 2015 DEVELOPMENT POLICY

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	8,532,222.	9,421,416.	9,584,416.	5,443,191.	5,290,605.	38,271,850.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	8,532,222.	9,421,416.	9,584,416.	5,443,191.	5,290,605.	38,271,850.
	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)						13,724,696.
6	Public support. Subtract line 5 from line 4.						24,547,154.
	ction B. Total Support						, ,
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 4	8,532,222.	9,421,416.	9,584,416.	5,443,191.	5,290,605.	38,271,850.
	Gross income from interest,	, ,		, ,	. ,	. ,	<u> </u>
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	3,418.	6,971.	13,844.	8,796.	8,963.	41,992.
9	Net income from unrelated business		-		·	-	<u> </u>
	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.)	8,967.	885.			19,749.	29,601.
11							38,343,443.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 3	,859,267.
13	First five years. If the Form 990 is for	the organization's				n 501(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2015 (I			olumn (f))		14	64.02 %
15	Public support percentage from 2014	Schedule A, Part	II, line 14			15	72.58 %
16a	16a 33 1/3% support test - 2015. 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						
b 33 1/3% support test - 2014. 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						
17a	17a 10% -facts-and-circumstances test - 2015. 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						
b	10% -facts-and-circumstances tes	t - 2014. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circu	mstances" test, ch	eck this box and	stop here. Explair	n in Part VI how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	cly supported orga	anization	>
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	and see instructions	s 🕨 🔲
					0.1	dula A /Earm 000	000 57) 0045

Schedule A (Form 990 or 990-EZ) 2015

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

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

Cellendary year (or fiscal year beginning in) Cell Office (a) 2011 Cell 2013 Cell 2014 Cell 2015 Cell 7 Total and membrahership less received. (Di not include any "unusual grants.") Cell 2015 Cell 2014 Cell 2015 Ce	Se	ction A. Public Support	now, please com	piete Fart II.)				
Giffe, grants, contributions, and membership feet received. (Do not include any "unusual grants.") Close seelps from admission, membrandise acid or services per form admission, membrandise acid or services of the design acid of the de			(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
membership fees received. (Do not include any trususal grants."). 2. Gross receipts from admissions, membership sold of sold or services per formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3. Gross receipts from activities that are not an unrelated trade or business under section 513. 4. Tax revenues levied for the organization or sheaf of the organization or sheaf of the organization or sheaf or the organization or sheaf of the organization or sheaf of the organization of the organization or sheaf or services or soldites furnished by a governmental unit to the organization without charge of Total. Add lines 1 through 5. 7. A formula organization without charge of Total. Add lines 1 through 5. 8. Public support. Septial persons but more than 3.1 3 and 3 received from discussified persons but more than 3.1 3 and 3 received from similar sources or sheaf or sh		· ` ` ` · · · · · · · · · · · · · · · ·	(,	(0) = 0 :=	(0, 20.0	(0,) = 0 1 1	(0, 20.0	(1)
include any trunsual grants.*) 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's traceworth purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's traceworth purpose 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 A mounts included on lines 1, 2, and 3 received from disqualified persons by a manifest activate or lines 2 and 7 to 1 to	-	, ,						
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Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **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? If "Yes," provide detail in **Part VI**.
- 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? If "Yes," provide detail in Part VI.
- **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)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	_		
	3a		
	OI-		
	3b		
	3с		
	4a		
	Λh		
	4b		
	4c		
	5a		
	5b		
	5с		
	6		
	7		
	7		
	8		
	9a		
	9b		
	ЭIJ		
	9с		
	10a		
	10h		
O	10b 90 or 99	V E 7	0045

Par	t IV	Supporting Organizations (continued)						
		- (************************************		Yes	No			
11	Has th	ne organization accepted a gift or contribution from any of the following persons?						
а		son who directly or indirectly controls, either alone or together with persons described in (b) and (c)						
	below	, the governing body of a supported organization?	11a					
b		ily member of a person described in (a) above?	11b					
		6 controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c					
	ection B. Type I Supporting Organizations							
				Yes	No			
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to						
		rly appoint or elect at least a majority of the organization's directors or trustees at all times during the						
	•	ar? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or						
	contro	olled the organization's activities. If the organization had more than one supported organization,						
	descri	be how the powers to appoint and/or remove directors or trustees were allocated among the supported						
	organi	izations and what conditions or restrictions, if any, applied to such powers during the tax year.	1					
2	Did th	e organization operate for the benefit of any supported organization other than the supported						
		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in						
	•	I how providing such benefit carried out the purposes of the supported organization(s) that operated,						
		vised, or controlled the supporting organization.	2					
Sec		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						
		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control						
	or mai	nagement of the supporting organization was vested in the same persons that controlled or managed						
	the su	pported organization(s).	1					
Sec		D. All Type III Supporting Organizations						
				Yes	No			
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the						
	organ	ization'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						
	organ	ization's governing documents in effect on the date of notification, to the extent not previously provided?	1					
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported						
	organ	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how						
	the or	ganization maintained a close and continuous working relationship with the supported organization(s).	2					
3	By rea	son of the relationship described in (2), did the organization's supported organizations have a						
	signifi	cant voice in the organization's investment policies and in directing the use of the organization's						
	incom	e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's						
	suppo	rted organizations played in this regard.	3					
Sec	tion 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 yea(see instructions):						
а	Ш	The organization satisfied the Activities Test. Complete line 2 below.						
b	Ш	The organization is the parent of each of its supported organizations. Complete line 3 below.						
С		The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see insti	ructions).				
2		ies Test. <i>Answer (a) and (b) below.</i>		Yes	No			
а	Did su	ibstantially all of the organization's activities during the tax year directly further the exempt purposes of						
	the su	pported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify						
	those	supported organizations and explain how these activities directly furthered their exempt purposes,						
	how ti	he organization was responsive to those supported organizations, and how the organization determined						
	that th	nese activities constituted substantially all of its activities.	2a					
b	Did th	e activities described in (a) constitute activities that, but for the organization's involvement, one or more						
		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the						
	reasor	ns for the organization's position that its supported organization(s) would have engaged in these						
		ies but for the organization's involvement.	2b					
3		t of Supported Organizations. <i>Answer (a) and (b) below.</i>						
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or						
		es of each of the supported organizations? Provide details in <i>Part VI.</i>	3a					
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each						
	of its	supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b					

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Org	anizations	¥	
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All				
	other Type III non-functionally integrated supporting organizations must co	mplete	Sections A through E.		
Sect	ion 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			
Sect	ion 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			
е	Discount claimed for blockage or other				
	factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
_3	Subtract line 2 from line 1d	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by .035	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3	4			
_5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions)	6			
7	Check here if the current year is the organization's first as a non-functional	y-integr	ated Type III supporting org	ganization (see	
	instructions).				

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 DEVELOPMENT POLICY

Par	t V	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	ion D -	Current Year			
1	Amou	nts paid to supported organizations to accomplish exe			
2	Amou	nts paid to perform activity that directly furthers exemp			
	organ	izations, in excess of income from activity			
3	Admir	nistrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amou	nts paid to acquire exempt-use assets			
5		ied set-aside amounts (prior IRS approval required)			
6		distributions (describe in Part VI). See instructions.			
7		annual distributions. Add lines 1 through 6.			
8		putions to attentive supported organizations to which the	ne organization is responsive		
		de details in Part VI). See instructions.	3		
9		outable amount for 2015 from Section C, line 6			
10		amount divided by Line 9 amount			
			(i)	(ii)	(iii)
			Excess Distributions	Underdistributions	Distributable
Secti	ion E -	Distribution Allocations (see instructions)		Pre-2015	Amount for 2015
1	Distrik	outable amount for 2015 from Section C, line 6			
2		rdistributions, if any, for years prior to 2015			
_		onable cause required-see instructions)			
3	•	·			
b	a h				
c					
	From	2013			
	From				
		of lines 3a through e			
		ed to underdistributions of prior years			
		ed to 2015 distributable amount			
-		over from 2010 not applied (see instructions)			
÷		inder. Subtract lines 3g, 3h, and 3i from 3f.			
4		outions for 2015 from Section D,			
•	line 7:	·			
		ed to underdistributions of prior years			
		ed to 2015 distributable amount			
		inder. Subtract lines 4a and 4b from 4.			
5		ining underdistributions for years prior to 2015, if			
•		Subtract lines 3g and 4a from line 2 (if amount			
	-	er than zero, see instructions).			
6		ining underdistributions for 2015. Subtract lines 3h			
•		b from line 1 (if amount greater than zero, see			
		ctions).			
7		ss distributions carryover to 2016. Add lines 3j			
•	and 4	- I			
8		down of line 7:			
a	Dieak	down or lifto 1.			
<u>a</u> b					
	Fxces	s from 2013			
		ss from 2014			
		s from 2015			
e	- 人しにご	10 II CU I U			

Schedule A (Form 990 or 990-EZ) 2015

INSTITUTE FOR TRANSPORTATION AND

52-1399520 Page 8 Schedule A (Form 990 or 990-EZ) 2015 DEVELOPMENT POLICY 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.)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Name of the organization

INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY

Employer identification number

52-1399520

Organization type (check one):					
Filers of	:	Section:			
Form 99	0 or 990-EZ	$\overline{\mathbf{X}}$ 501(c)(3) (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		527 political organization			
Form 99	0-PF	501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
		s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.			
General	Rule				
		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.			
Special	Rules				
X	sections 509(a)(1) a any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1. Complete Parts I and II.			
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$\bigsec*\					
		nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
INSTITUTE FOR TRANSPORTATION AND
DEVELOPMENT POLICY

Employer identification number

52-1399520

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 330,965.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$126,597.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 1,469,037.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$1,041,962 .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 676,250.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
INSTITUTE FOR TRANSPORTATION AND
DEVELOPMENT POLICY

Employer identification number

52-1399520

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 412,000.	Person X Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$152,330.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$144,671.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
INSTITUTE FOR TRANSPORTATION AND
DEVELOPMENT POLICY

Employer identification number

52-1399520

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Employer identification number Name of organization INSTITUTE FOR TRANSPORTATION AND 52-1399520 DEVELOPMENT POLICY 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 Part III 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 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (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

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

(a) No.

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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY

Employer identification number 52-1399520

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor adv	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pa			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cel	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the forn	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a		I I
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	eased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserv	ation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) abov		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	s the organization's accounting for
Do	conservation easements. † III Organizations Maintaining Collections of	Art Historical Transuras or (Other Similar Assets
Га	Complete if the organization answered "Yes" on Form	-	Other Sillilai Assets.
	If the organization elected, as permitted under SFAS 116 (AS		mant and balance about works of ort
Id	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that describ	· · · · · · · · · · · · · · · · · · ·	arice or public service, provide, in Fart Alli,
h	If the organization elected, as permitted under SFAS 116 (AS		at and balance about works of art, historical
D	treasures, or other similar assets held for public exhibition, ed	**	
	relating to these items:	ducation, or research in furtherance of p	ublic service, provide the following amounts
			▶ ¢
	(i) Revenue included on Form 990, Part VIII, line 1		
0	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treating the second seco	acures, or other similar assets for financia	
2	the following amounts required to be reported under SFAS 1:		ai gairi, provide
•	Revenue included on Form 990, Part VIII, line 1	, ,	> \$
d	Assets included in Form 990, Part X		

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

Schedule D (Form 990) 2015

Pai	t III Organizations Maintaining C	Collections of A	rt, Hist	orical Tr	easures, o	r Othe	er Simila	ar Asse	ts(contin	ued)	, -
3	Using the organization's acquisition, access	on, and other record	ls, check	any of the	following that	t are a si	ignificant	use of its	collection	items	;
	(check all that apply):										
а	Public exhibition	d		Loan or exc	hange progra	ms					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ey further t	he organizatio	on's exe	mpt purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit of										
	to be sold to raise funds rather than to be m								Yes		No
Pai	t IV Escrow and Custodial Arran								line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other ass	sets not	included				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
		·	_						Amount		
С	Beginning balance						1c				
	Additions during the year										
е	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F								Yes		No
b	If "Yes," explain the arrangement in Part XIII.	. Check here if the ex	kplanatio	n has been	provided on l	Part XIII					
Pai											
		(a) Current year	(b) P	rior year	(c) Two years	s back	(d) Three y	ears back	(e) Four	years b	ack
1a	Beginning of year balance	•		•							
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent vear end baland	e (line 1	a. column (a	a)) held as:	I					
а	Board designated or quasi-endowment	,	%	9,(,,						
b	Permanent endowment ▶	%									
	Temporarily restricted endowment										
•	The percentages on lines 2a, 2b, and 2c sho										
За	Are there endowment funds not in the posse		ation tha	t are held a	and administer	red for th	he organiz	zation			
	by:	J					3		[-	Yes	No
	(i) unrelated organizations										
	(ii) related organizations										
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on S	chedule R?)				3b		
4	Describe in Part XIII the intended uses of the										
Pai	t VI Land, Buildings, and Equipm										
	Complete if the organization answere). Part IV	/. line 11a. S	See Form 990.	. Part X.	line 10.				
	Description of property	(a) Cost or o			t or other		ccumulate	ed	(d) Book	value	
		basis (investr			(other)		preciation		(4, 200		
	Land	<u> </u>	,		. ,	T					
b	Buildings										
	Leasehold improvements			23	9,219.	2	205,6	93.	3.3	3,52	6.
d	Equipment				4,023.		276,2			7,76	
	Other				2,757.		56,3			, 38	
	Add lines 1a through 1e (Column (d) must e		X colun				, -			7,67	

Schedule D (Form 990) 2015

	FOR TRANSPO	RTATION AND	50 1200500
Schedule D (Form 990) 2015 DEVELOPMEN	T POLICY		52-1399520 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes			
(a) Description of security or category (including name of security	(b) Book value	(c) Method of valuation	n: 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.	<u>'</u>	•	
Complete if the organization answered "Yes	s" on Form 990. Part IV	Lline 11c. See Form 990. Part X.	line 13.
(a) Description of investment	(b) Book value		n: 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	s" on Form 990, Part IV	, line 11d. See Form 990, Part X,	line 15.
(a	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	s" on Form 990, Part IV	·	Part X, line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
	OTHERS	75,293.	
(3) REFUNDABLE ADVANCES		108,038.	
(4)			
(5)			
(6)			
(7)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ightharpoons2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2015

(8) (9)

183,331.

	INSTITUTE FOR TRANSPORTAT	TON AND)	E2 1	1200520 - 4
	dule D (Form 990) 2015 DEVELOPMENT POLICY	nanta With	Dovonuo nor D		1399520 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Staten		nevenue per n	eturn	·
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12			т. т	6 407 004
1	Total revenue, gains, and other support per audited financial statements			1	6,487,984.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1			
	Net unrealized gains (losses) on investments		100 010	-	
b	Donated services and use of facilities		100,010.	-	
С	Recoveries of prior year grants			-	
d	Other (Describe in Part XIII.)	2d		-	100 010
е	Add lines 2a through 2d			2e	100,010.
3	Subtract line 2e from line 1			3	6,387,974.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
	Investment expenses not included on Form 990, Part VIII, line 7b			4	
b	Other (Describe in Part XIII.)			-	•
С	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	6,387,974.
Par	t XII Reconciliation of Expenses per Audited Financial State		h Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12				
1	Total expenses and losses per audited financial statements			1	7,329,570.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	100,010.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	100,010.
3	Subtract line 2e from line 1			3	7,229,560.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	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	7,229,560.
Par	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad			4; Part	X, line 2; Part XI,
PAF	RT X, LINE 2:				
FOF	R THE YEARS ENDED DECEMBER 31, 2015 AND 2	014, IT	DP HAS DOC	'UME1	NTED ITS
COI	ISIDERATION OF FASB ASC 740-10, INCOME TA	XES, TH	IAT PROVIDE	S GT	JIDANCE FOR
REI	ORTING UNCERTAINTY IN INCOME TAXES AND H	AS DETE	RMINED THA	T NO) MATERIAL
UNC	CERTAIN TAX POSITIONS QUALIFY FOR EITHER	RECOGNI	TION OR DI	SCLO	OSURE IN
тнг	FINANCIAL STATEMENTS.				

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.

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

2015
Open to Public Inspection

Name of the organization

INSTITUTE FOR TRANSPORTATION AND

DEVELOPMENT POLICY

Employer identification number

52-1399520

Pai	t I General Info	rmation on A	Activities Ou	tside the United States. Compl	ete if the organization answered "Y	es" on		
	Form 990, Part IV	/, line 14b.						
1	For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gr	ants and other assistance,			
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assistance?	Yes L No		
2	For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of it	ts grants and other assistance outs	side the		
	United States.							
_3	Activities per Region. (TI	he following Par	I, line 3 table c	an be duplicated if additional space is	needed.)			
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region	(e) If activity listed in (d)	(f) Total		
		offices	employees, agents, and independent	(by type) (e.g., fundraising, program	is a program service,	expenditures for and		
		in the region	independent contractors	services, investments, grants to recipients located in the region)	describe specific type of service(s) in region	investments		
			in region	recipients located in the region)	., ,	in region		
	H AMERICA -				PLANNING & ADVOCACY FOR:			
	DA AND MEXICO,				BRT (BUS RAPID TRANSIT),			
	NOT THE UNITED				NON-MOTORIZED			
STAT	ES	1	89	PROGRAM SERVICES	TRANSPORTATION (NMT) AND	872,852.		
					PLANNING & ADVOCACY FOR:			
					BRT (BUS RAPID TRANSIT),			
					NON∃MOTORIZED			
SOUT	H AMERICA	2	53	PROGRAM SERVICES	TRANSPORTATION (NMT) AND	1,202,530.		
SOUT	H AMERICA	0	0	INVESTMENT		47,502.		
					PLANNING & ADVOCACY FOR:			
					BRT (BUS RAPID TRANSIT),			
					NON∃MOTORIZED			
SOUT	H ASIA	3	52	PROGRAM SERVICES	TRANSPORTATION (NMT) AND	527,460.		
					PLANNING & ADVOCACY FOR:			
					BRT (BUS RAPID TRANSIT),			
EAST	ASIA AND THE				NON∃MOTORIZED			
PACI	FIC	2	84	PROGRAM SERVICES	TRANSPORTATION (NMT) AND	1,777,663.		
EAST	ASIA AND THE							
PACI	FIC	0	0	INVESTMENTS		142,202.		
	Sub-total	8	278			4,570,209.		
b	Total from continuation							
	sheets to Part I	0	0			0.		
С	Totals (add lines 3a							
	and 3b)	8	278			4,570,209.		

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
the IRS, or for which t	the grantee or couns	el has provided a section	I recognized as charities by the n 501(c)(3) equivalency letter					1

52-1399520

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.

(h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement non-cash non-cash assistance assistance

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	X 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; do not file with Form 990)	Yes	X 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	X 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	X 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	X 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; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2015

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.

PART I, LINE 3, COLUMN (E):

REGION: NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES

(E) SPECIFIC TYPES OF SERVICES IN REGION: PLANNING & ADVOCACY FOR: BRT

(BUS RAPID TRANSIT), NON-MOTORIZED TRANSPORTATION (NMT) AND TRANSIT

ORIENTED DEVELOPMENT (TOD)

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PLANNING & ADVOCACY FOR: BRT

(BUS RAPID TRANSIT), NON⊕MOTORIZED TRANSPORTATION (NMT) AND TRANSIT

ORIENTED DEVELOPMENT (TOD)

REGION: SOUTH ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PLANNING & ADVOCACY FOR: BRT

(BUS RAPID TRANSIT), NON@MOTORIZED TRANSPORTATION (NMT) AND TRANSIT

ORIENTED DEVELOPMENT (TOD)

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: PLANNING & ADVOCACY FOR: BRT

(BUS RAPID TRANSIT), NON@MOTORIZED TRANSPORTATION (NMT) AND TRANSIT

ORIENTED DEVELOPMENT (TOD)

SCHEDULE F, PART I, LINE 3:

THE AMOUNTS REFLECTED AS INVESTMENTS ON SCHEDULE F, PART I, LINE 3 ARE

THE YEAR-END BALANCES FOR FUNDS TRANSFERRED TO INTEREST BEARING

ACCOUNTS, TO BE USED FOR ITDP'S PROGRAM SERVICES.

Schedule F (Form 990) 2015

SCHEDULE J (Form 990)

Compensation Information

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

Compensated Employees

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

➤ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY

Employer identification number 52-1399520

	·		Yes	No
1 a	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.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	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:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" to 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:			
а	The organization?	6a		Х
b	Any related organization?	6b		X
	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 non-fixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
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	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2015

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 are not listed on Form 990, Part VII.

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

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Derients	(B)(i)-(D)	reported as deferred on prior Form 990
(1) HEATHER THOMPSON (i)	180,000.	0.	0.	0.	0.	180,000.	0.
INTERIM CHIEF EXECUTIVE OFFICER/DIRE (ii)	0.	0.	0.	0.	0.	0.	0.
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i) (ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i) (ii)							
(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:
DURING 2015, MELINDA EISENMANN RECEIVED A \$5,000 BONUS.

SCHEDULE L

Department of the Treasury

Internal Revenue Service

Transactions With Interested Persons

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Inspection

Open To Public

Name of the organization

INSTITUTE FOR TRANSPORTATION AND

Employer identification number

D	EVELOPME	NT POLIC	Y:					52	-13	995	20												
Part I Excess Bene	fit Transact	ions (section 50	01(c)(3	3), sect	ion 501(c)(4), and 50)1(c))(29) organizatior																
					art IV, line 25a or 25l					Jb.													
1	(b)	Relationship bet			lified						(d)	Corre	cted?										
(a) Name of disqualified p	erson	person and or	on and organization (c) Description of transaction							Y	es	No											
2 Enter the amount of tax i	-	-	-		•	-	•																
section 4958									\$														
3 Enter the amount of tax,	if any, on line 2,	above, reimburs	sed by	the or	ganization				> \$														
Part II Loans to and	l/or From In	terested Per	sons							—													
					, Part V, line 38a or l	Eorn	n 000 Part IV lin	no 26:	or if th	o ora	nizati	on											
reported an amo	-				., Fait v, line 36a or i	FOII	11 990, Part IV, III	le 20,	Or II ti	ie orga	ariizati	OH											
(a) Name of	(b) Relationship			oan to or	(e) Original	/1	f) Balance due	(a)	In	(h) Ap	proved	(i) W	ritten										
interested person	with organization			n the ization?	principal amount	(i) Balarioc dae		(i) Balarioe dae		(i) Balarios das		(1) 2 3 1 3 1 3 1 3 1		(i) Balarios das		(i) Balarios das		defa	ult?	by bo	ard or	agree	ment?
			То	From				Yes	No	Yes	No	Yes	No										
			1	1				1.55		1													
										<u> </u>													
Total	· · · · · · · · · · · · · · · · · · ·	<u> </u>			> \$																		
Part III Grants or As		_																					
Complete if the c																							
(a) Name of interested p	person	(b) Relationship			(c) Amount of assistance		(d) Type assistan) Purp assist		f										
		interested pers the organiza	son ar ation	ıa	assistance		assistari	Ce		•	assisi	ance											
									\dashv														
									\dashv														
									\dashv														

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

Schedule L (Form 990 or 990-EZ) 2015

JOI ICUAIC L	(1 01111 000 01 000	, <u>LZ, Z</u> 010 —		
Part IV	Rusiness Tr	aneactions In	valvina Inta	racted Parcons

Complete if the organization answered (a) Name of interested person	(b) Relation	nship between and the organ	interested	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of cation's nues?
						Yes	No
WALTER HOOK	FORMER	CEO OF	ITDP	66,667.	WALTER HOOK		Х
BRT PLANNING INTERNATIONAL	OWNER,	WALTER	HOOK,	116,667.	BRT PLANNIN		Х
Dort V Complemental Information							
Part V Supplemental Information Provide additional information for response.	onses to alle	etione on Scha	adula I (saa i	netructions)			
Provide additional information for response	Jilses to que	SLIONS ON SCHE	dule L (See I	ristructions).			
SCH L, PART IV, BUSINESS T	'RANSAC'	TIONS I	NVOLVII	NG INTEREST	TED PERSONS:		
/->							
(A) NAME OF PERSON: WALTER	ноок						
(D) DESCRIPTION OF TRANSAC	TION:	WALTER :	HOOK RI	ECEIVED CON	MPENSATION F	OR	
(b) beginning	71101()	************					
CONSULTING SERVICES PROVID	ED TO	THE ORG	ANIZAT	ION.			
(A) NAME OF PERSON: BRT PL	ANNING	INTERN	ATIONA	L LLC			
(B) RELATIONSHIP BETWEEN I	NTERES'	TED PER	SON ANI	ORGANIZAT	rion:		
OWNER, WALTER HOOK, IS THE	י דירסאידי	ם כבר ה	ם דייים				
OWNER, WALLER HOOK, IS THE	I PORME.	K CEO O	r TIDE				
(D) DESCRIPTION OF TRANSAC	TION:	BRT PLA	NNING :	INTERNATION	NAL LLC RECE	IVED	
COMPENSATION FOR CONSULTIN	IG SERV	ICES PR	OVIDED	TO THE ORG	GANIZATION.		
_							

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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.

Open to Public

OMB No. 1545-0047

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

Inspection

Name of the organization

INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY

Employer identification number 52-1399520

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: TRANSIT CORRIDOR THAT CAN SERVE AS A DEMONSTRATION OF PUBLIC TRANSPORT BEST PRACTICES FOR THE REGION.

IN ADDITION, ITDP IS WORKING TO DEVELOP POLICIES AND REGULATIONS TO GUIDE THE IMPLEMENTATION OF SUSTAINABLE TRANSPORT PROJECTS IN GREATER NAIROBI. RECENTLY, ITDP ALSO BEGAN WORKING WITH CONSULTANTS APPOINTED BY THE EUROPEAN UNION TO DESIGN TWO ADDITIONAL BRT CORRIDORS, LINES 3 ITDP HAS ALSO BEEN ACTIVE IN POLICY DISCUSSIONS AT THE CITY LEVEL. ITDP WORKED WITH THE KENYA NATIONAL HIGHWAYS AUTHORITY (KENHA) AND KENHA'S CONSULTANTS TO ENSURE THAT THE PROPOSED DESIGNS FOR LINE $1\,$ THE BRT SYSTEM INCORPORATE BEST PRACTICE FEATURES. AT ITDP'S RECOMMENDATION, STATIONS IN THE FIRST SECTION OF LINE 1 HAVE BEEN REDESIGNED TO PROVIDE BETTER SAFETY AND COMFORT FOR WAITING PASSENGERS AND TO HANDLE FUTURE PASSENGER VOLUMES. IN ADDITION, CORRIDOR DESIGNS HAVE BEEN MODIFIED TO INCORPORATE WIDER SPACES FOR WALKING AND CYCLING.

IN TANZANIA, ITDP HAS BEEN WORKING WITH THE DAR ES SALAAM RAPID TRANSIT (DART) AGENCY TO FACILITATE THE SMOOTH ROLLOUT OF THE BRT SYSTEM. IT IS ALREADY SERVING AS A DEMONSTRATION PROJECT FOR THE REGION, AND ITDP FACILITATED THE FIRST STUDY TOUR TO THE DART SYSTEM FOR A NAIROBI BRT DESIGN TEAM IN EARLY 2016.

AT THE REQUEST OF THE DART AGENCY, ITDP PREPARED A NOTE ON COMMUNICATIONS STRATEGIES FOR THE BRT SYSTEM LAUNCH. WITH

INFRASTRUCTURE ON THE 21 KM PHASE 1 CORRIDOR NOW COMPLETE, THE DART

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

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SYSTEM BEGAN OPERATIONS IN EARLY 2016 AFTER CONTRACT NEGOTIATIONS WITH THE INTERIM BUS SERVICE OPERATOR WERE CONCLUDED.

IN INDONESIA, ITDP CONTINUED WORK IMPROVING CONNECTIVITY BETWEEN

JAKARTA'S MASS RAPID TRANSIT, INCLUDING THE TRANSJAKARTA BRT SYSTEM.

ITDP ADDRESSED THE IMPORTANCE OF CONNECTIVITY FROM THE METRO AND BRT

STATIONS TO THE SURROUNDING AREA BY PREPARING A STATION AREA PLAN FOR

TWO METRO AND BRT STATIONS. THE DESIGN WAS VERY WELL RECEIVED BY THE

JAKARTA PLANNING BOARD, WHICH THEN INVITED ITDP TO PROVIDE INPUT ON THE

BY-LAW REGARDING TRANSIT-ORIENTED DEVELOPMENT (TOD) CURRENTLY BEING

DRAFTED. THE BY-LAW WILL INTRODUCE BUILDING CODE CONCEPTS BASED ON

PRINCIPLES FROM ITDP'S TOD STANDARD, PLANS FOR MIXED-INCOME HOUSING TO

BE BUILT IN PROXIMITY TO THE TRANSIT STATIONS, AND PARKING REGULATIONS

FOR THE NEW DEVELOPMENTS. IF IMPLEMENTED, THESE REGULATIONS WILL SET A

PRECEDENT OF SUSTAINABILITY FOR NEW DEVELOPMENTS BUILT NEAR TRANSIT

STATIONS AND CAN BE REPLICATED ACROSS THE CITY.

AFTER TWO YEARS OF WORK, JAKARTA'S TRADITIONAL BUS OPERATOR, KOPAJA,

HAS ENTERED INTO AGREEMENT WITH TRANSJAKARTA BRT MANAGEMENT TO BECOME

THE TRANSJAKARTA OPERATOR. THEY WILL RELY MOSTLY ON THE DIRECT-SERVICE

OPERATION MODEL WHERE THE BUSES OPERATE INSIDE THE BRT CORRIDOR AND

BEYOND.

IN COLOMBIA, ITDP IS WORKING WITH METROCALI TO COLLECT HIGH-QUALITY

DATA AND USE STATE-OF-THE-ART MODELING INSTRUMENTS TO DESIGN

IMPROVEMENTS TO ITS OPERATIONS AND FUTURE EXPANSIONS. ADDITIONALLY,

ITDP HELPED RAISE THE LONG-TERM CAPACITY OF METROCALI BY IMPLEMENTING

AND DEMONSTRATING MODERN METHODS AND TECHNIQUES TO DESIGN EFFECTIVE AND

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COST- EFFICIENT BUS ROUTES, SCHEDULES, AND TRANSFERS.

IN CHINA, THE NEWLY-OPENED YICHANG BRT HAS ALREADY ACHIEVED A GOLD RATING AND A HIGH PROFILE IN THE REGION, WITH 80 VISITING CITY DELEGATIONS IN 2015 ALONE. THE SYSTEM BOASTS AN IMPRESSIVE ARRAY OF RIDERSHIP STATISTICS WITH OVER 240,000 DAILY RIDERS-20 PERCENT OF WHICH PREVIOUSLY DROVE OR TOOK TAXIS-ON 362 BUSES. ITDP CONTINUES TO PROVIDE INPUT ON THE DEVELOPMENT OF THE PHASE 2 CORRIDOR, AS WELL AS IMPROVEMENTS TO NMT AND TOD AROUND THE CURRENT CORRIDOR.

AT THE NATIONAL LEVEL IN CHINA, TWO NEW NATIONAL STANDARDS ON BRT

DESIGN AND OPERATION WERE ISSUED BY THE MINISTRY OF TRANSPORT IN MAY

2015. THESE STANDARDS WERE HEAVILY INFLUENCED BOTH BY ITDP STAFF INPUT

DURING THE DRAFTING PROCESS, AS WELL AS BY ITDP'S BRT STANDARD.

IN INDIA, THE FIRST CORRIDOR OF THE RAINBOW BRT OPENED IN AUGUST 2015

IN PUNE. A NEW 8 KM, 14 STATION RAINBOW CORRIDOR CONNECTING TO

NEIGHBORING TOWNSHIP PIMPRI-CHINCHWAD OPENED IN NOVEMBER, BROADENING

ACCESS TO THE NETWORK AND CONNECTIVITY BETWEEN CITIES. THE SYSTEM IS

ALREADY SERVING 67,000 COMMUTERS DAILY AND RECEIVING WIDESPREAD

REGIONAL ATTENTION. SURVEYS CARRIED OUT BY ITDP SHOWED THAT 12 PERCENT

OF RAINBOW USERS SWITCHED FROM OTHER MODES OF TRANSPORT INCLUDING TWO

WHEELERS, PARA-TRANSIT, AND EVEN CARS. THE NEW CORRIDORS ARE THE

BEGINNING OF A PLAN FOR A 140 KM BRT NETWORK, PROJECTED TO CARRY NEARLY

900,000 PASSENGERS DAILY. THIS WILL BE ONE OF THE LARGEST NETWORKS IN

INDIA.

THREE BRAZILIAN CITIES-BELO HORIZONTE, RIO DE JANEIRO, AND SAO

Schedule O (Form 990 or 990-EZ) (2015) Page 2 Name of the organization INSTITUTE FOR TRANSPORTATION AND **Employer identification number** DEVELOPMENT POLICY 52-1399520 PAULO-WERE NAMED WINNERS OF THE 2015 SUSTAINABLE TRANSPORT AWARD FOR THEIR ACHIEVEMENTS IN INCREASING MOBILITY AND ENHANCING QUALITY OF LIFE. IN 2014, BELO HORIZONTE IMPLEMENTED THE FIRST PROJECT OF ITS COMPREHENSIVE MOBILITY PLAN: A NEW, GOLD-STANDARD BUS RAPID TRANSIT SYSTEM, MOVE BRT, BEGAN OPERATION ON TWO CORRIDORS COVERING 23 KM. THE CITY ALSO REVITALIZED ITS DOWNTOWN, CREATING PEDESTRIAN-ONLY STREETS, AND IMPLEMENTING 27 KM OF THEIR PLANNED BIKEWAY NETWORK. RIO DE JANEIRO HAS MASSIVELY INVESTED IN PUBLIC TRANSPORTATION OVER THE PAST FEW YEARS. IN 2014, THE CITY OPENED THE SECOND OF FOUR BRT SYSTEMS PLANNED AHEAD OF THE 2016 OLYMPICS, TRANSCARIOCA. THE NEW, 39 KM CORRIDOR DRAWS 270,000 DAILY USERS, KEEPING THE CITY ON TRACK TO ACHIEVE THE GOALS OF ITS MOBILITY PLAN IN 2016. IN MEXICO, MEXICO CITY'S METROBUS BRT EXPANDED IN 2014 AND 2015. THE SIXTH LINE OPENED IN 2014, AND CONSTRUCTION IS PROGRESSING ON LINE 7. THIS WORLD-CLASS BRT SYSTEM HAS HELPED REVITALIZE THE DENSE, CENTRAL AREA OF MEXICO CITY WHILE MAINTAINING ITS CULTURAL AND HISTORICAL HERITAGE. IT NOW SERVES NEARLY ONE MILLION PASSENGERS EVERY DAY. MONTERREY BECAME THE LATEST CITY TO FOLLOW MEXICO CITY'S EXAMPLE, OPENING ITS OWN BRT, ECOVIA, IN 2014. THE NEW BRT IS A 30.1 KM CORRIDOR CONNECTING MONTERREY, SAN NICOLAS, AND GUADALUPE, AND IS EXPECTED TO MOVE NEARLY 160,000 PASSENGERS DAILY.

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

AT THE MULTILATERAL LEVEL, ITDP SUCCEEDED IN GETTING TRANSPORT EXPLICITLY RECOGNIZED ON THE AGENDAS OF BOTH THE SUSTAINABLE

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DEVELOPMENT GOALS AND THE COP21 PARIS AGREEMENT. ITDP CONTRIBUTED TO

THE TRANSPORT COMMUNITY'S RESPONSE AND REVIEW OF THE FINAL OUTCOME

DOCUMENT, "TRANSFORMING OUR WORLD: THE 2030 AGENDA FOR SUSTAINABLE

DEVELOPMENT," AND THE PROPOSED SUSTAINABLE DEVELOPMENT GOAL INDICATORS.

ITDP PRESENTED ON A SIDE EVENT IN THE SPRING AT THE UNITED NATIONS,

RAISING CONCERNS THAT THE SDG TRANSPORT INDICATORS DID NOT INCLUDE

WALKING AND CYCLING, THE LOWEST COST AND LOWEST IMPACT FORMS OF

TRANSPORTATION, AND THAT FOR MEASURING PUBLIC TRANSPORT TO BE

MEANINGFUL, A FOCUS ON RAPID TRANSIT IS NECESSARY. IN PREPARATION FOR

AND DURING THE SDG SUMMIT, ITDP PARTICIPATED IN MEETINGS AND EVENTS

ORGANIZED BY COLLEAGUE ORGANIZATIONS, LIKE CIVICUS, UN FOUNDATION, AND

COMMUNITAS. ITDP ALSO PARTICIPATED AT THE THIRD FINANCING FOR

DEVELOPMENT CONFERENCE IN ADDIS ABABA IN JULY 2015, AN IMPORTANT

MEETING PRIOR TO THE SDG SUMMIT IN NEW YORK IN SEPTEMBER.

ITDP HAS ALSO BEEN ACTIVELY WORKING WITH MULTILATERAL DEVELOPMENT BANKS

AND THE USE OF THE STAR TOOL, A SERIES OF MEETINGS WITH REPRESENTATIVES

FROM THE ASIAN DEVELOPMENT BANK, WHO WAS THE CHAIR OF THE MDB WORKING

GROUP ON SUSTAINABLE TRANSPORT, WERE HELD TO STRATEGIZE THE PROMOTION

OF STAR AND DEVELOP UNIVERSAL EVALUATION CRITERIA FOR PROJECT SELECTION

WITHIN THE MDBS. ITDP IS ALSO WORKING WITH THE SECRETARY GENERAL'S HIGH

LEVEL ADVISORY GROUP ON SUSTAINABLE TRANSPORT, WHERE ITDP IS PART OF

THE TECHNICAL WORKING GROUP. THIS IS A WAY TO REMAIN ENGAGED WITH THE

MDBS AND SHAPE THE NEXT WAVE OF INTERNATIONAL SUSTAINABLE TRANSPORT

POLICY WORK.

THE OBJECTIVE FOR COP21 TO DELIVER A LEGALLY BINDING AGREEMENT AND A

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GLOBAL CONSENSUS MEANT THE POSSIBILITY OF SHOWCASING THE ROLE OF TRANSPORT IN REACHING THE 2 DEGREE GOAL AND TO INFLUENCE COUNTRIES' NATIONALLY DETERMINED COMMITMENTS TO INCLUDE TRANSPORT AS A SIGNIFICANT PART OF THE CLIMATE CHANGE SOLUTION.

THIS WAS ITDP'S LARGEST INVOLVEMENT YET IN ANY COP. ITDP PARTICIPATED IN LEAD-UP DISCUSSIONS, ORGANIZED A SERIES OF SIDE EVENTS DURING COP, HELPED SHAPE TRANSPORT DAY, AND HAD A BOOTH DURING THE TWO WEEKS. DUE TO THE EFFORTS OF ITDP AND PARTNERS, 75% OF COUNTRIES' INTENDED NATIONALLY DETERMINED COMMITMENTS (INDCS) REFERENCED TRANSPORT AS A CRUCIAL SECTOR IN REDUCING EMISSIONS, A MAJOR WIN FOR SUSTAINABLE TRANSPORT.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: 2014 THAT MANDATED THAT A MINIMUM OF 60 PERCENT OF THE CORPORATION'S TRANSPORT BUDGET BE ALLOCATED TO CONSTRUCT AND MAINTAIN NMT INFRASTRUCTURE. THE POLICY AIMS TO CREATE A SAFE AND PLEASANT NETWORK OF FOOTPATHS, CYCLE TRACKS, GREENWAYS AND OTHER NMT FACILITIES. OVER 18 KM OF SIDEWALKS HAVE BEEN REDESIGNED SO FAR TO BE WIDER AND SAFER FOR WALKING, WITH MANY MORE IN PROGRESS. FOR ITS EFFORTS, CHENNAI WAS AWARDED THE 2015 SUSTAINIA AWARD, WHICH RECOGNIZES INNOVATIVE AND DEMONSTRATED SUSTAINABLE SOLUTIONS FROM ACROSS THE WORLD.

ITDP'S EFFORTS TO PROMOTE SAFE STREETS CONTINUED TO PAY OFF IN THE REGION. CAR-FREE DAYS WERE LAUNCHED IN SEVERAL MAJOR INDIAN CITIES, INCLUDING CHENNAI, COIMBATORE, AND DELHI. THESE DAYS FORM AN IMPORTANT STEP IN CREATING A PARADIGM SHIFT IN URBAN TRANSPORT. BY SHIFTING FOCUS AWAY FROM CARS AND TOWARDS WALKING, CYCLING, AND PUBLIC TRANSPORT, THE

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CAMPAIGN PRESENTS AN ALTERNATE VISION OF HOW CITIES CAN BE: HAPPIER,
HEALTHIER, AND MORE INCLUSIVE. COIMBATORE WAS EVEN AWARDED "BEST NMT
PROJECT" AT THE URBAN MOBILITY INDIA 2015 FOR THEIR CAR-FREE SUNDAYS.
ADDITIONALLY, ITDP LAUNCHED A PROACTIVE MEDIA CAMPAIGN TO SUPPORT
SUSTAINABLE TRANSPORT INITIATIVES IN INDIA, WITH MORE THAN 30 ARTICLES
PUBLISHED IN 2015 ACROSS THE COUNTRY.

IN BRAZIL, SAO PAULO MASSIVELY EXPANDED ITS CYCLING NETWORK AND
IMPLEMENTED 320 KM OF EXCLUSIVE BUS LANES, INCREASING AVERAGE BUS
SPEEDS BY 21 PERCENT. THE CITY IS ON TRACK TO HAVE 400 KM OF CYCLE
LANES IN 2016, PART OF AN OVERALL 500 KM NETWORK. THESE ARE JUST THE
FIRST STEPS IN AN AMBITIOUS MASTER PLAN, WHICH HAS MADE SAO PAULO THE
FIRST MEGACITY TO ELIMINATE PARKING MINIMUMS AND REPLACE THEM WITH
PARKING MAXIMUMS CITYWIDE.

IN MEXICO, ON INTERNATIONAL PEDESTRIAN DAY, MEXICO CITY MAYOR MIGUEL

MANCERA ANNOUNCED THE ADOPTION OF A VISION ZERO POLICY TO IMPROVE

SAFETY AND COMFORT FOR PEDESTRIANS ACROSS THE CITY. THE POLICY REFLECTS

YEARS OF ADVOCACY BY ITDP AND CIVIL SOCIETY ORGANIZATIONS AND ALIGNS

THE CITY WITH THE GLOBAL ROAD SAFETY MOVEMENT. THE FIRST OF ITS KIND IN

MEXICO CITY, THE NEW REGULATION ESTABLISHES A RANGE OF ROAD SAFETY

MEASURES THAT WILL PROTECT HUMAN LIFE, IMPROVE NMT CONDITIONS, AND

FURTHER DISCOURAGE DRIVING. A FUND OF 250 MILLION PESOS WAS ESTABLISHED

TO IMPROVE PEDESTRIAN AND CYCLING INFRASTRUCTURE.

BIKE SHARE SYSTEMS CONTINUED TO EXPAND IN SIZE AND POPULARITY

THROUGHOUT MEXICO. MEXICO CITY'S POPULAR ECOBICI ANNOUNCED PLANS IN

2014 TO EXPAND WITH AN ADDITIONAL 2,600 BICYCLES AND 170 NEW STATIONS,

BRINGING THE TOTAL TO 6,000 AND 452, RESPECTIVELY. IN LATE 2014,

SYSTEM.

Name of the organization INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY

GUADALAJARA OPENED MIBICI, MEXICO'S SECOND BIKE SHARE SYSTEM, WITH 86

STATIONS AND 860 BIKES. THE SYSTEM SERVICES AROUND 13,000 DAILY USERS

AND EACH BICYCLE MAKES 10 TRIPS A DAY. THE CITY OF PUEBLA ALSO OPENED

THEIR OWN BIKE SHARE, WITH ULTIMATE PLANS FOR A 626 BIKE, 26 STATION

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

SUSTAINABLE URBAN DEVELOPMENT: ITDP BRAZIL, THROUGH A PARTNERSHIP WITH

THE NATIONAL SECRETARY OF HOUSING, HAS ENSURED THAT THE THIRD PHASE OF

THE SOCIAL HOUSING PROGRAM MINHA CASA, MINHA VIDA (MCMV) PROGRAM WILL

USE ITDP'S SUSTAINABLE URBAN PLANNING TOOLS. FOR THE FIRST TIME, MCMV

CRITERIA WILL INCORPORATE ALL OF ITDP'S EQUITY- ENHANCING

RECOMMENDATIONS, INCLUDING ACCESS TO TRANSPORT AND PROJECT LOCATION,

WHICH IS A HUGE WIN AND MAJOR ADVANCEMENT IN HELPING MCMV ACHIEVE

PRO-POOR GOALS.

AS PART OF THIS PROCESS, THE MINISTRY OF CITIES WILL DEVELOP A SET OF

INDICATORS TO MEASURE THE EFFECTIVENESS OF THE POLICY AND ITDP WAS

INVITED TO PARTICIPATE IN DISCUSSIONS. ITDP CONSIDERS THIS AN IMPORTANT

GAIN, AS WE WILL BE ABLE TO EMBED INDICATORS FROM ITDP'S TOD AND BRT

STANDARDS INTO THE MINISTRY'S MATRIX. THESE INDICATORS WILL BECOME THE

MAIN REFERENCES FOR EVALUATING PROJECTS AT THE NATIONAL LEVEL.

IN INDONESIA, WE FOCUSED ON GUIDING THE JAKARTA TRANSPORT COOPERATIVE

KOPAJA IN IMPLEMENTING GOOD MANAGEMENT PRACTICES AND PUBLIC

TRANSPORTATION BEST PRACTICES. ITDP CONTINUED TO SUPPORT TRANSJAKARTA

MANAGEMENT AND ENCOURAGE EXPANSION, ESPECIALLY TO LOW-INCOME

NEIGHBORHOODS AND INACCESSIBLE AREAS. FURTHERMORE, ITDP WILL FOCUS

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EFFORTS IN THE NEXT TWO YEARS ON IMPLEMENTATION OF NEW PLANNING

REGULATIONS IN LINE WITH THE TOD STANDARD AND ITS PRINCIPLES.

EXPENSES \$ 739,735. INCLUDING GRANTS OF \$ 0. REVENUE \$ 60,943.

TRAFFIC REDUCTION: IN CHINA, MAJOR ON-STREET PARKING IMPROVEMENTS WERE

IMPLEMENTED ALONG THE NEW YICHANG BRT CORRIDOR, WITH AROUND HALF OF THE

SETBACK PARKING SPACES REMOVED AND THE REMAINDER SUBJECT TO IMPROVED

MANAGEMENT AND ENFORCEMENT. A PARKING GUIDEBOOK FOR BEIJING WAS

COMPLETED BY ITDP CHINA FOR THE ASIAN DEVELOPMENT BANK, IN PARTNERSHIP

WITH THE BEIJING TRANSPORTATION RESEARCH CENTER.

IN INDIA, ITDP WAS INVOLVED IN PARKING REFORM IN THE CITY OF CHENNAL

AND THE TWIN CITIES OF PUNE AND PIMPRI-CHINCHWAD. IN CHENNAI, WE BEGAN

A FINANCIAL STUDY OF THE SMART PARKING SYSTEM, TO BE COMPLETED IN 2016.

IN PUNE, ITDP WAS APPOINTED TO THE REVIEW COMMITTEE OF THE CITY'S NEW

PARKING POLICY, AFTER GIVING NOTES ON THE CURRENT POLICY.

ITDP ALSO BEGAN WORKING IN UKRAINE, WITH AN EVALUATION OF THE EXISTING

PARKING POLICY OF KIEV. ITDP MADE PROPOSALS FOR SHORT AND LONG TERM

CHANGE, WHICH INCLUDE PLANS TO DETERMINE EXACTLY WHAT SPACE IS

CURRENTLY BEING USED FOR PARKING, AND IMPROVEMENTS TO THE IMPROVE

ADMINISTRATION, COMMUNICATION, TRANSPARENCY, AND ENFORCEMENT OF PARKING

POLICIES THROUGHOUT THE CITY.

EXPENSES \$ 439,582. INCLUDING GRANTS OF \$ 0. REVENUE \$ 79,185.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

MEXICO, BRAZIL, INDONESIA, INDIA,

CHINA, SOUTH AFRICA

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FORM 990, PART VI, SECTION A, LINE 4:

DURING THE YEAR THE ORGANIZATION UPDATED ITS BY-LAWS BY ADDING A CLAUSE

EXPLICITLY STATING THAT ITDP'S BOARD DIRECTORS SERVE ON A VOLUNTARY BASIS

AND RECEIVE NO COMPENSATION FOR CARRYING OUT THEIR DUTIES AS BOARD

DIRECTORS; AND ANOTHER CLAUSE FURTHER STATING THAT ITDP'S BOARD DIRECTORS

WOULD RECEIVE NO COMPENSATION FOR PROVIDING PROFESSIONAL SERVICES TO THE

ORGANIZATION IN THEIR RESPECTIVE AREA OF EXPERTISE AND WOULD ONLY BE

REIMBURSED FOR TRAVEL EXPENSES INCURRED IN THE PROCESS OF PROVIDING

PROFESSIONAL SERVICES UPON FORMAL CONSENT FROM THE REST OF THE BOARD

DIRECTORS.

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

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE CHIEF OPERATING OFFICER AND THE FINANCE COMMITTEE BEFORE SUBMISSION. THE ENTIRE BOARD RECEIVES A COPY OF THE FORM 990 PRIOR TO FILING WITH THE IRS.

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

THE ORGANIZATION ANNUALLY MONITORS AND ENFORCES THE CONFLICT OF INTEREST POLICY.

AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OR COMMITTEE

MEETING, BUT AFTER SUCH PRESENTATION, HE/SHE LEAVES THE MEETING DURING THE

DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT THAT RESULTS
IN THE CONFLICT OF INTEREST.

THE CHAIRPERSON OF THE BOARD OR COMMITTEE IF APPROPRIATE, APPOINTS A
DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE

PROPOSED TRANSACTIONS ARRANGEMENT.

AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE DETERMINES WHETHER

THE CORPORATION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT

WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO

A CONFLICT OF INTEREST.

IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY

ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO CONFLICT OF

INTEREST, THE BOARD OR COMMITTEE DETERMINES BY A MAJORITY VOTE OF THE

DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE

CORPORATION'S BEST INTEREST AND FOR ITS OWN BENEFIT, AND WHETHER THE

TRANSACTION IS FAIR AND REASONABLE TO THE CORPORATION, AND IT MAKES ITS

DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION ARRANGEMENT IN

CONFORMITY WITH SUCH DETERMINATION.

THE SAME POLICY APPLIES TO ALL EMPLOYEES.

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

AN ANNUAL REVIEW OF THE TOP MANAGEMENT OFFICIAL (CHIEF EXECUTIVE OFFICER

(CEO)) IS DONE BY THE BOARD OF DIRECTORS. THE CEO'S SALARY IS REVIEWED

AGAINST THE INDUSTRY TRENDS TO MAKE SURE THAT IT IS COMPARABLE WITH THOSE

AT SIMILAR NONPROFITS. THE PERFORMANCE AND SALARY REVIEW IS DOCUMENTED AND

PUT IN THE PERSONNEL FILE.

TYPICALLY THE BOARD WOULD EVALUATE THE CEO'S PERFORMANCE AND RECOMMEND A

BONUS AND/OR COMPENSATION CHANGE RETROACTIVELY AT THEIR FIRST BOARD MEETING

IN 2016. FOR 2015 A PERFORMANCE AND SALARY REVIEW OF THE CEO AS DESCRIBED

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Name of the organization INSTITUTE FOR TRANSPORTATION AND DEVELOPMENT POLICY	Employer identification number 52-1399520
ABOVE WAS NOT CONDUCTED BECAUSE THE EXECUTIVE CHAIR WAS I	PERFORMING THE
FUNCTIONS OF AN INTERIM CEO FROM JANUARY THROUGH OCTOBER	AFTER WHICH TIME
THE NEW CEO FORMALLY ASSUMED THE POSITION.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST POLICY
AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
PROGRAM CONSULTANTS:	
PROGRAM SERVICE EXPENSES	1,003,708.
MANAGEMENT AND GENERAL EXPENSES	116,250.
FUNDRAISING EXPENSES	750.
TOTAL EXPENSES	1,120,708.
DATA STUDIES:	
PROGRAM SERVICE EXPENSES	52,704.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	52,704.
TRANSLATING FEES:	
PROGRAM SERVICE EXPENSES	21,652.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	21,652.
ONLINE PROCESSING FEES:	
532212 09-02-15 Sche	edule O (Form 990 or 990-EZ) (2015)

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PROGRAM SERVICE EXPENSES	8,543.
MANAGEMENT AND GENERAL EXPENSES	1,041.
FUNDRAISING EXPENSES	1,361.
TOTAL EXPENSES	10,945.
TEMPORARY HELP:	
PROGRAM SERVICE EXPENSES	226,626.
MANAGEMENT AND GENERAL EXPENSES	17,891.
FUNDRAISING EXPENSES	1,436.
TOTAL EXPENSES	245,953.
GRAPHIC DESIGN:	
PROGRAM SERVICE EXPENSES	51,160.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	880.
TOTAL EXPENSES	52,040.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,504,002.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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

SEE PART VII FOR CONTINUATIONS

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
ITDP MEXICO A.C 98-0666674					
AV. MEXICO #69, COLONIA HIPODROMO, CONDESA,					
MEXICO CITY, DF CP, MEXICO 06100	SUSTAINABLE TRANSPORTATION	MEXICO	648,388.	195,446.	ITDP
GUANGZHOU MODERN BRT AND SUSTAINABLE					
TRANSPORT INSTITUTE - 98-0666672, 13TH					
FLOOR, 348 EAST, HUANSHI DONG LU, GUANGZHOU,	SUSTAINABLE TRANSPORTATION	CHINA	611,472.	49,992.	ITDP
INSTITUTUTO DE POLITICAS DE TRANSPORTE E					
DESENVOLVIMENTO - 98-0666675, R. SETE DE					
SETEMBRO 132, SALA 301, CENTRO, RIO DE	SUSTAINABLE TRANSPORTATION	BRAZIL	516,036.	71,262.	ITDP
URBAN MOBILITY TRANSFORMATION SERVICES					
PRIVATE LIMITED - 98-0683919, 16/14, 2ND					
STREET, NEAR ELECTRICITY BOARD OFFICE,	SUSTAINABLE TRANSPORTATION	INDIA	275,251.	49,502.	ITDP

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No

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

Part I	Continuation of Identification of Disregarded Entities

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
REINVENTANDO CIUDADES - 98-1126283					
AV. MEXICO #69, COLONIA HIPODROMO					
MEXICO CITY, DF CP, MEXICO, MEXICO 06100	SUSTAINABLE TRANSPORTATION	MEXICO	34,655.	44,741.	ITDP
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Page 2

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

<u> </u>		<u> </u>	1			1					
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	Disprop	ortionate	Code V-UBI	General	Percentage ownership
of related organization		(state or foreign	entity	lexcluded from tax under	income	end-of-year assets	alloca	itions?	amount in box	partner	ownersnip
		country)		sections 512-514)		455515	Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes No	
	1										
	1										
	1										
	1										
	1										
	1										
-											
	1										
	1										
	1										
											<u> </u>

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(b contr enti	tion b)(13) rolled tity?
		country)		or tracty		400010		Yes	No
									<u> </u>

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1a

Yes No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)				1b		
c Gift, grant, or capital contribution from related organization(s)						
d Loans or loan guarantees to or for related organization(s)						
e Loans or loan guarantees by related organization(s)						
f Dividends from related organization(s)				1f		
g Sale of assets to related organization(s)						
h Purchase of assets from related organization(s)				1h		
i Exchange of assets with related organization(s)				1i		
j Lease of facilities, equipment, or other assets to related organization(s)				1j		
k Lease of facilities, equipment, or other assets from related organization(s)				1k		
Performance of services or membership or fundraising solicitations for related organization(s)						
m Performance of services or membership or fundraising solicitations by related organization(s)						
n Sharing of facilities, equipment, mailing lists, or other assets with related organ						
Sharing of paid employees with related organization(s)				10		
p Reimbursement paid to related organization(s) for expenses				1p		
q Reimbursement paid by related organization(s) for expenses				1q		
r Other transfer of cash or property to related organization(s)						
s Other transfer of cash or property from related organization(s)				1s		
2 If the answer to any of the above is "Yes," see the instructions for information	on who must complete the	his line, including covered rela	tionships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amou	unt involved		
(1)						
(2)						
(2)						
(3)						
0)						
(4)						
1.7						
(5)						
(6)						
532163 09-08-15	56		Sche	dule R (Form 9	90) 2015	

52-1399520

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(e) Are all partners s 501(c)(i orgs.? Yes N	(f) Share of total income	(g) Share of end-of-year assets	Dispr tion alloca Yes	nopor- nate itions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General managii partner Yes N	(k) or Percentage ownership

Schedule R (Form 990) 2015

Part VII | Supplemental Information

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

PART I, IDENTIFICATION OF DISREGARDED ENTITIES:

NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:

ITDP MEXICO A.C.

EIN: 98-0666674

AV. MEXICO #69, COLONIA HIPODROMO, CONDESA, DELEGACION CUAUTEMOC

MEXICO CITY, DF CP, MEXICO 06100

PRIMARY ACTIVITY: SUSTAINABLE TRANSPORTATION

DIRECT CONTROLLING ENTITY: ITDP

NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:

GUANGZHOU MODERN BRT AND SUSTAINABLE TRANSPORT INSTITUTE

EIN: 98-0666672

13TH FLOOR, 348 EAST, HUANSHI DONG LU

GUANGZHOU, CHINA, CHINA 510060

PRIMARY ACTIVITY: SUSTAINABLE TRANSPORTATION

DIRECT CONTROLLING ENTITY: ITDP

NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:

INSTITUTUTO DE POLITICAS DE TRANSPORTE E DESENVOLVIMENTO

EIN: 98-0666675

R. SETE DE SETEMBRO 132, SALA 301, CENTRO

RIO DE JANEIRO, RJ, CP, BRAZIL, BRAZIL 20050-002

PRIMARY ACTIVITY: SUSTAINABLE TRANSPORTATION

DIRECT CONTROLLING ENTITY: ITDP

NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:

URBAN MOBILITY TRANSFORMATION SERVICES PRIVATE LIMITED

532165 09-08-15

Schedule R (Form 990) 2015

Provide additional information Provide additional information for responses to questions on Schedule R (see instructions).
EIN: 98-0683919
16/14, 2ND STREET, NEAR ELECTRICITY BOARD OFFICE, NEHRUNAGAR
ADYAR CHENNAI, INDIA, INDIA 600020
PRIMARY ACTIVITY: SUSTAINABLE TRANSPORTATION
DIRECT CONTROLLING ENTITY: ITDP
NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:
REINVENTANDO CIUDADES
EIN: 98-1126283
AV. MEXICO #69, COLONIA HIPODROMO
MEXICO CITY, DF CP, MEXICO, MEXICO 06100
PRIMARY ACTIVITY: SUSTAINABLE TRANSPORTATION
DIRECT CONTROLLING ENTITY: ITDP