

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-EZ

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit (rust or private foundation)
Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$200,000 and total assets less than \$200,000 at the end of the year may use this form
The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

| F | | | | alendar year, or tax year beginning and ending | | | | | | | | |
|--------------|---------------|---|----------------|--|--|--|---------------------------|--|--|--|--|--|
| 6 | } c | heck i | if ble | C Name of organization | D Emplo | yer iden | tification number | | | | | |
| | 一 | ٦ . | ress change | | | | | | | | | |
| | 一 | ٦ . | ne change | INTERNATIONAL ACADEMY OF DISPUTE RESOLUTION | 35. | -229 | 3056 | | | | | |
| | 〒 | ٦ . | al return | | E Teleph | | | | | | | |
| | Ħ | ٦ . | · · | C/O H. CASE ELLIS, 104 N. WALKUP AVE. | , | | 459-1001 | | | | | |
| | 늗 | ٦ | ninated | , | Group Exemption | | | | | | | |
| | 늗 | ٦ . | ended return | City or town, state or country, and ZIP + 4 CRYSTAL LAKE, IL 60014 | • | | 11011 | | | | | |
| - | <u> </u> | | cation pending | | | Number Number Number I Check I | | | | | | |
| G | | | nting Meth | od X Cash Accrual Other (specify) ▶ | | | | | | | | |
| j | | | | - | required to attach Schedule B (Form 990, 990-EZ, or 990-PF) | | | | | | | |
| Ī | $\overline{}$ | | kempt statu | | | | | | | | | |
| K | | | | normally not more than | | | | | | | | |
| | \$ | \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to | | | | | | | | | | |
| | а | retur | n, be sure | | | | | | | | | |
| L | . А | dd lin | nes 5b, 6c, | and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part | II, | | | | | | | |
| _ | lı | ne 25 | | B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ | | ▶ \$ 61672. | | | | | | |
| | Pa | rt I | Reve | enue, Expenses, and Changes in Net Assets or Fund Balances (see the instru | ctions for | r Part I) | | | | | | |
| | - | | Check | | X | | | | | | | |
| - | T | 1 | | ions, gifts, grants, and similar amounts received | | 1 | 22000. | | | | | |
| | | 2 | | service revenue including government fees and contracts | | 2 | 32459. | | | | | |
| | | 3 | - | hip dues and assessments | | 3 | 7213. | | | | | |
| | | 4 | | nt income | | 4 | | | | | | |
| 65) | | • | | count from sale of assets other than inventory 5a | ļ | | | | | | | |
| 2013 | | | | | | | | | | | | |
| | -1 | D | Less cos | ─┤. | _ 1 | | | | | | | |
| © | | C | Gain or (I | - | 5c | | | | | | | |
| \bowtie | ļ | 6 | Gaming a | | | | | | | | | |
| SEP | | а | | ome from gaming (attach Schedule G if greater than | | | | | | | | |
| O SEP | | | \$15,000) | | | | | | | | | |
| | | b | | ome from fundraising events (not including \$ of contributions | | 1 | | | | | | |
| SCANNED | - 1 | | | Iraising events reported on line 1) (attach Schedule G if the sum of such | | | | | | | | |
| \$ | ' | | gross inc | ome and contributions exceeds \$15,000) | | | | | | | | |
| \mathbb{Z} | - | C | Less dire | ct expenses from gaming and fundraising events | | | | | | | | |
| \mathbb{Q} | | đ | Net incon | ne or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) | 6 | 5d | | | | | | |
| (N) | ı | 7a | Gross sal | es of inventory, less returns and allowances | | | | | | | | |
| | ľ | b | Less cos | t of goods sold RECANTA | | | | | | | | |
| | | C | Gross pro | offit or (loss) from sales of inventory (Subtract line 7b from line 7a) | 7 | 7c | | | | | | |
| | 1 | 8 | Other reve | enue (describe in Schedule O) | | 8 | | | | | | |
| | | 9 | Total revo | enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 | ▶ [| 9 | 61672. | | | | | |
| _ | | 10 | | d similar amounts paid (list in Schedule O) | 1 | 10 | | | | | | |
| | - | 11 | | and to or for members OGDEN, UT | | 11 | | | | | | |
| u | - i | 12 | | other compensation, and employee benefits | 1 | 2 | 25000. | | | | | |
| Ехрепсес | 3 | 13 | | nal fees and other payments to independent contractors | _ | 3 | | | | | | |
| ٥ | 1 | 14 | | cy, rent, utilities, and maintenance | | 14 | | | | | | |
| ŭ | : | 15 | = | publications, postage, and shipping | | 15 | | | | | | |
| | | 16 | | enses (describe in Schedule 0) SEE SCHEDULE O | | 16 | 20097. | | | | | |
| | - 1 | 17 | | · | . — | 7 | 45097. | | | | | |
| - | + | | | enses. Add lines 10 through 16 | | | 16575. | | | | | |
| Ų. | ? | 18 | | (deficit) for the year (Subtract line 17 from line 9) | - | 8 | 103/3. | | | | | |
| ď | ; | 19 | | s or fund balances at beginning of year (from line 27, column (A)) | | | 225 | | | | | |
| Net Assets | [] | • | | ee with end-of-year figure reported on prior year's return) | | 9 | 325. | | | | | |
| Ž | | 20 | | nges in net assets or fund balances (explain in Schedule O) | | 20 | 0. | | | | | |
| _ | ٠ | 21 | | s or fund balances at end of year. Combine lines 18 through 20 | ▶ 2 | :1 | 16900. | | | | | |
| L | HΑ | For | Paperwor | k Reduction Act Notice, see the separate instructions. | | | Form 990-EZ (2012) | | | | | |

232171 01-11-13

232172 01-11-13

| INTERNATIONAL ACADEMY OF Form 990-EZ (2012) DISPUTE RESOLUTION | | | 25 ′ | 22930 |)56 Page |
|--|---|--|----------------------|----------------------------|---------------------------------|
| Form 990-EZ (2012) DISPUTE RESOLUTION Part II Balance Sheets (see the instructions for Part II) | | | 33-2 | 12930 | 136 raye |
| Check if the organization used Schedule O to re | | stion in this Part II | | | |
| I street, with a significant accordance of the re- | | (A) Beginning of year | Т | (B) E | End of year |
| 22 Cash, savings, and investments | | 325 | • 22 | | 16900 |
| 23 Land and buildings | | | 23 | | |
| 24 Other assets (describe in Schedule O) | | | 24 | - | , · _ |
| 25 Total assets | | 325 | • 25 | | 16900 |
| 26 Total liabilities (describe in Schedule O) | | | 26 | | |
| 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) | | 325 | | | 16900 |
| Part III Statement of Program Service Accomplishme | • | • | | | xpenses I for section |
| Check if the organization used Schedule O to re | | tion in this Part II | | | and 501(c)(4) |
| What is the organization's primary exempt purpose? SEE SCHEDULE (| | | | | ons and section |
| Describe the organization's program service accomplishments for each of its three largest program nanner, describe the services provided, the number of persons benefited, and other relevant infor | | enses in a clear and concise | | for others |) trusts, optional :) |
| 18 LAW SCHOOL MEDIATION TOURNAMENTS | Tiddon for each program and | | -+ | | · |
| B LAW SCHOOL MEDIATION TOOKNAMENTS | | <u> </u> | | | |
| | | | | | |
| (Grants \$) If this amount includes foreign | grante check here | <u> </u> | ┌ ┐, | 28a | |
| g COLLEGE MEDIATION TOURNAMENTS | grants, check here | | <u> </u> | .04 | |
| | | | - | | |
| | | | [| | |
| (Grants \$) If this amount includes foreign | grants, check here | | | 29a | |
| PROMOTE MEDIATION EDUCATION | | | | | |
| | | | | | |
| | | | | | |
| (Grants \$) If this amount includes foreign | grants, check here | | | 30a | |
| Other program services (describe in Schedule O) | | | | | |
| (Grants \$) If this amount includes foreign | grants, check here | <u> </u> | <u> </u> | 11a | |
| 2 Total program service expenses (add lines 28a through 31a) | | | | 32 | |
| Part IV List of Officers, Directors, Trustees, and Key I | | | | structions f | for Part IV) |
| Check if the organization used Schedule O to re- | T | tion in this Part IV | | | |
| 1 | (b) Average hours per week devoted to | (C) Reportable compensation (Forms | (1) Healf contrib | th benefits, outlons to | (e) Estimated |
| (a) Name and title | position | W-2/1099-MISC) (if not paid, enter -0-) | plans, an | ee benefit nd deferred | amount of other compensation |
| H. CASE ELLIS | , | (in the party of t | compe | ensation | |
| PRESIDENT AND DIRECTOR | 2.00 | 0. | | 0. | |
| BENJAMIN S. MACKOFF | 2.00 | 0. | | | 0. |
| 7.P. AND DIRECTOR | 1.00 | 0. | | 0. | ο. |
| TOM VALENTI | 1.00 | | _ | | <u> </u> |
| SECRETARY AND TREASURER | 1.00 | 0. | | 0. | 0. |
| FRANK A. DUSEK | | | | | |
| REASURER AND DIRECTOR | 1.00 | 0. | | 0. | 0. |
| RAHIM SHAMJI | | | | | |
| P. AND DIRECTOR | 1.00 | 0. | | 0. | 0. |
| DICK CALKINS | | <u> </u> | | | |
| P. AND DIRECTOR | 1.00 | 0. | | 0. | 0. |
| RED LANE | | | | | |
| P. AND DIRECTOR | 1.00 | 0. | | 0. | 0. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | I | 1 | | | İ |

Form **990-EZ** (2012)

| 34. Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name (therwise, explain the change on Schedule 0 (see instructions) 35. Of the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? b) If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No," provide an explanation in Schedule 0 c) Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete schedule C, Part III 35. Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N 37a | 33 34 35a | Yes No X X X N/A X X X X X |
|--|--------------------------------------|--|
| activity in Schedule 0 34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions) 35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? b) If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule 0 c) Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III d) Did the organization of political expenditures, direct or indirect, as described in the instructions i) Did the organization be proxy of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions i) Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? i) If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A 39 Section 501(c)(7) organizations Enter a initiation fees and capital contributions included on line 9 b) Gross receipts, included on line 9. for public use of club facilities 39a N/A 40a Section 501(c)(3) and 501(c)(4) organizations but the organization engage in any section 4918 & 0 section 4911 & 0 | 34 35a 35b 35c 36 37b | X X N/A X X X |
| 34. Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name Otherwise, explain the change on Schedule 0 (see instructions) 35. Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? b. If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule 0 c. Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule N, complete applicable parts of Schedule N 36. Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 37a. O | 34 35a 35b 35c 36 37b | X X N/A X X X |
| documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) 33a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? b If Yes,* to line 35a, has the organization filled a Form 990-T for the year? If No,* provide an explanation in Schedule O c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)(6) proganization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If Yes,* complete Schedule C, Part III Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes,* complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization berrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If Yes,* complete Schedule L, Part II and enter the total amount involved 38b N/A 39i Section 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0. section 4912 ▶ 0. section 4912 ▶ 0. section 4915 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4956 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E2? If Yes,* complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year with the sections 4912, 4955, and 4958 0. Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c relimbursed by the organization. Altho | 35a 35b 35c 36 37b | X N/A X X |
| 35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule 0 c Was the organization a section 501(c)(4),501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 3 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete spelicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization for lie Form 1120-P0L for this year? b Did the organization before more make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule L, Part II and enter the total amount involved 3 Section 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 , section 4912 ▶ 0 , section 4915 ▶ 0 , section 4915 ▶ 0 , section 501(c)(4) organizations Enter amount of tax imposed on the organization during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I | 35a 35b 35c 36 37b | X N/A X X |
| on lines 2, 6a, and 7a, among others)? bit "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule 0 c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization file Form 1120-POL for this year? 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule L, Part II and enter the total amount involved 39b N/A 39 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 9 Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 C Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 C Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year year. We shall be pri | 35b 35c 36 37b 38a | N/A X X X |
| b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule 0 c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization file Form 1120-POL for this year? 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A 39a N/A 39a N/A 39a N/A 39b N/A 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 . section 4912 ▶ 0 . section 4955 ▶ 0 . b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4955 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0 . d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c relimburised by the organization which a copy of this return is filed ▶ IL 41 List the states with which a copy of this return is filed ▶ IL 42 The organization's books are in care of ▶ MR - RICHARD CALKINS Telephone no ▶ (515) 26 30 At any time during the calendar year, did | 35b 35c 36 37b 38a | N/A X X X |
| the was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 3 bid the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions | 35c 36 37b 38a | X X X |
| requirements during the year? If "Yes," complete Schedule C, Part III 35 Dut the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions b, Did the organization file Form 1120-POL for this year? 38a Dut the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A 39 i Section 501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 9 b) Gross receipts, included on line 9, for public use of club facilities 40 section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II c) Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 D 41 List the states with which a copy of this return is filed II The organization's books are in care of MR. RICHARD CALKINS Telephone no (515) 26 21P+4 50.3 b 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 **Very*, enter the name of the foreign country **Very*, enter the name of the foreign country **See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and | 36 37b 38a | X X |
| Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a | 36 37b 38a | X X |
| complete applicable parts of Schedule N 37a Sara | 37b | X |
| b) Did the organization file Form 1120-P0L for this year? 37a | 38a | Х |
| 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b if "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A 39 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 . section 4912 ▶ 0 . section 4955 ▶ 0 . b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "ves," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization at any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 41 List the states with which a copy of this return is filed ▶ IL 42a The organization's books are in care of ▶ MR - RICHARD CALKINS Telephone no ▶ (515) 28 26 26 27 27 28 28 27 28 28 27 28 28 27 28 28 28 28 28 28 28 28 28 28 28 28 28 | 38a | Х |
| in a prior year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule L, Part II and enter the total amount involved 39 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9 b) Gross receipts, included on line 9, for public use of club facilities 10 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 O Section 4912 O Section 4915 O Section 4915 O Section 4915 O Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 44 c) Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 O O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization O O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization O O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization O O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization O O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization O O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization O O Section 501(c)(4) organization O O O O O O O O O | | |
| b If "Yes," complete Schedule L, Part II and enter the total amount involved 39 Section 501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 9 b) Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 0 Section 4911 0 Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the earn under sections 4912, 4955, and 4958 O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the earn under sections 4912, 4955, and 4958 O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the earn and sections 4912, 4955, and 4958 O Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the earn and sections 4912, 4955, and 4958 O Section 501(c)(3) and 501(c)(4) organizations and 4958 O | | |
| 39 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9 b) Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4955 D. D. Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I C. Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 D. D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers D. di Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax im | iOb | X |
| a Initiation fees and capital contributions included on line 9 b) Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 . , section 4912 ▶ 0 . , section 4955 ▶ 0 . b) Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c) Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0 . d) Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization engage in an excess benefit transaction and the following the tax year, was the organization a party to a prohibited tax sheller transaction? If "Yes," complete Form 8886-T 41 List the states with which a copy of this return is filed ▶ IL 42a The organization's books are in care of ▶ MR - RICHARD CALKINS Telephone no ▶ (515) 28 (Located at ▶ 801 GRAND AVE., DES MOINES, IA ZIP+4 ▶ 503 b 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)? If "Yes," enter the name of the foreign country ▶ | ЮЬ | X |
| bi Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 . section 4912 ▶ 0 . section 4955 ▶ 0 . b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40 List the states with which a copy of this return is filled ▶ IL 41 List the organization's books are in care of ▶ MR • RICHARD CALKINS Telephone no ▶ (515) 28 ZIP+4 ▶ 50.3 b 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)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | 10Ь | X |
| 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 • section 4912 ▶ 0 • section 4955 ▶ 0 • Description 4911 ▶ 0 • section 4912 ▶ 0 • section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 4 | 10b | x |
| b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 41 List the states with which a copy of this return is filed. IL 42a The organization's books are in care of. MR. RICHARD CALKINS. Telephone no. (515) 28 Located at. 801 GRAND AVE., DES MOINES, IA ZIP+4 503 b 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)? If "Yes," enter the name of the foreign country. Mainterest in the financial account in a foreign country. Mainterest in the financial account in a foreign country. Mainterest in the financial account in a foreign country. Mainterest in the financial account in a foreign country. Mainterest in the financial account in a foreign country. Mainterest in the financial account in the financial account in a foreign country. Mainterest in the financial account in a foreign country. Mainterest in the financial account in a foreign country. Mainterest in the financial account in the financial account in a foreign country. Mainterest in the financial account in a foreign country. Mainterest in the financial account in the financial account in the financial account in a f | 106 | X |
| b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 41 List the states with which a copy of this return is filed. ► IL The organization's books are in care of. ► MR. RICHARD CALKINS. Telephone no. ► (515) 28 Located at ► 801 GRAND AVE., DES MOINES, IA DES MOINES, IA Telephone no. ► (515) 28 ZIP+4 ► 50.3 DES MOINES, IA ZIP+4 ► 50.3 If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country. ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | lOb | Х |
| year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization at any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 41 List the states with which a copy of this return is filled ► IL 42a The organization's books are in care of ► MR - RICHARD CALKINS Telephone no ► (515) 28 Located at ► 801 GRAND AVE - , DES MOINES , IA ZiP + 4 ► 50 b 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)? If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | 10b | x |
| If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed ► IL 12a The organization's books are in care of ► MR • RICHARD CALKINS Located at ► 801 GRAND AVE • , DES MOINES , IA Telephone no ► (515) 28 Located at ► 801 GRAND AVE • , DES MOINES , IA Telephone no ► (515) 28 ZIP+4 ► 503 b 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)? If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | 50b | Х |
| c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filled IL List the states with which a copy of this return is filled IL Telephone no (515) 28 Located at 801 GRAND AVE DES MOINES IA Located at 801 GRAND AVE DES MOINES IA 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)? If "Yes," enter the name of the foreign country Mainter Mainte | 10b | X |
| or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed IL 42a The organization's books are in care of MR. RICHARD CALKINS Telephone no (515) 28 Located at 801 GRAND AVE. DES MOINES IA ZIP + 4 503 b 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)? If "Yes," enter the name of the foreign country Mainterest | |
| d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 41 List the states with which a copy of this return is filed. ► IL 42a The organization's books are in care of ► MR - RICHARD CALKINS Located at ► 801 GRAND AVE - , DES MOINES , IA b 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)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | 1 |
| organization e i All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 41 List the states with which a copy of this return is filed ► IL 42a The organization's books are in care of ► MR - RICHARD CALKINS Located at ► 801 GRAND AVE - , DES MOINES , IA b 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)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | 5 | |
| e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filled IL 42a The organization's books are in care of MR. RICHARD CALKINS Located at 801 GRAND AVE., DES MOINES, IA Telephone no (515) 28 ZIP+4 503 b 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)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | |
| transaction? If "Yes," complete Form 8886-T 41 List the states with which a copy of this return is filed 42 The organization's books are in care of 43 MR. RICHARD CALKINS Located at 44 Note: No | | |
| List the states with which a copy of this return is filed ► IL The organization's books are in care of ► MR - RICHARD CALKINS Located at ► 801 GRAND AVE - , DES MOINES , IA 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)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | |
| Telephone no ► (515) 28 **Located at ► 801 GRAND AVE . , DES MOINES , IA **Description of 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)? **If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | 10e | X |
| Located at ► 801 GRAND AVE., DES MOINES, IA b 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)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | |
| b 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)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | <u>0331</u> |
| over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | <u> 309</u> | |
| account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | _ | |
| If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | es No |
| See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | 12b | X |
| · · · · · · · · · · · · · · · · · · · | | |
| c. At any time during the calendar year, did the organization maintain an office outside of the U.S.2 | | |
| | 12c | <u> </u> |
| If "Yes," enter the name of the foreign country | | |
| 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here | / 3 | |
| and enter the amount of tax-exempt interest received or accrued during the tax year | /A | |
| | <u> </u> | |
| No. But the account of the second and the second and the second to the s | Y | es No |
| 14a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of | | ı, |
| | 4a | <u> </u> |
| b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead | | v |
| · · · · · · · · · · · · · · · · · · · | 4b | X |
| | 4c | X |
| d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation | | |
| | 4d | X |
| The state of the s | 5a | _ <u>^</u> |
| 15 b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)2 If "Yes " Form 990 and Schedule R may need to be completed instead of Form 990-F7 (see instructions). | | |
| 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) 45 Form | Sh i | |

232174 01-11-13

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

INTERNATIONAL ACADEMY OF DISPUTE RESOLUTION

Employer identification number 35-2293056

| P | art I | Reason | for Public Cha | rity Status (All organiz | zations mu | ist comple | te this par | t.) See ins | tructions. | | | | |
|----------|-------------------------|----------------|-----------------------|--|--------------|------------------------------|--------------|--------------------------|---|--------------|--------------|----------|--------|
| The | organ | ization is not | a private foundation | because it is: (For lines | 1 through | 11, check | only one b | oox.) | • | | | | |
| 1 | | A church, co | nvention of churche | es, or association of chur | ches desc | ribed in se | ection 170 | (b)(1)(A)(i |). | | | | |
| 2 | | A school des | scribed in section 1 | 70(b)(1)(A)(ii). (Attach So | hedule E) |) | | | | | | | |
| 3 | | | | oital service organization | | | 170(b)(1) | (A)(iii). | | | | | |
| 4 | 一 | • | | operated in conjunction | | | | |)(b)(1)(A)(i | iii). Enter | the hospita | al's nar | me, |
| i | | city, and stat | | • | | • | | | | · | • | | |
| 5 | | • | | benefit of a college or u | niversity o | wned or o | perated by | a govern | mental un | it describ | ped in | | |
| Ť | _ | = | (b)(1)(A)(iv). (Comp | | | | • | | | | | | |
| 6 | | | | nent or governmental uni | t describe | d in sectio | n 170(b)(| 1)(A)(v). | | | | | |
| 7 | $\overline{\mathbf{X}}$ | • | | ceives a substantial part | | | | | or from the | e general | public desi | cribed | ın |
| • | | - | (b)(1)(A)(vi). (Compl | • | о. но осру | | g 0.0 | | | 90.,0,4. | p | | |
| R | | | | section 170(b)(1)(A)(vi). | (Complete | Part II) | | | | | | | |
| 8 | Ħ | | | ceives: (1) more than 33 | | | rom contr | ibutions n | nomborch | in food in | and arose re | ocolote | from |
| 1 | | _ | | unctions - subject to certa | | | | | | | - | | |
| | | | • | | | | | | | | - | | |
| | | | | taxable income (less sec | lion 511 te | <i>D</i> , 110111 DO | 311103303 | acquired t | y ille olg | amzanom | aitei Julie | 50, 19 | 75. |
| 10 | | | 509(a)(2). (Complet | perated exclusively to te | et for publ | lic cofety (| See sentic | n 500/a\/ | 4) | | | | |
| 11 | H | - | ** | perated exclusively to te | | | | | | n, out the | DUIDOCOC | of one | or |
| ',' | | _ | - | ations described in secti | | • | | | | • | • • | | Oi |
| ' | | | | organization and compl | | | | 2). O oc se i | ction 50 8 | (a)(S). On | eck (ile bo) | l iliai | |
| | | a Type | | | ype III - Fu | - | | | d 🗀 Tyr | oo III a Noo | n-functiona | dly inte | aratad |
| | • | | | at the organization is not | | | | | • | | | - | - |
| , | - | • | • | than one or more publicly | | • | • | • | | • | • | | |
| 11 | , | | - | · · | | _ | | | | 9(a)(1) OI | Section 50 | 5(a)(2) | • |
| ' | | | | itten determination from t | ine ino ini | atitisa iy | pe i, Type | ii, oi Typi | 9 111 | | | | |
| | _ | | rganization, check t | | | | . . | -646 - 6-11 | | | | | |
| ξ | , | | | organization accepted ar | | | | | | | | V | T N - |
| | | | | directly controls, either al | one or tog | etner with | persons c | iescribed | in (ii) and | (III) below | | Yes | No |
| ì | | | | supported organization? | | | | | | | 11g(i) | | + |
| Τ | | • | , | n described in (i) above? | | • | | | | | 11g(ii) | | ┼ |
| ١. | | | · | a person described in (i) o | | | | | | | [11g(iii) | Ц | |
| 1 | 1 | Provide the f | ollowing information | about the supported or | ganization | (S). | | | | | | | |
| | | | 1 | <u></u> | L | | | | () | | | | |
| (i | • | of supported | (ii) EIN | (III) Type of organization | | organization sted in your | | | (vi) II organizati | on in col | (vil) Amoun | t of mo | netary |
| i | orga | nization | | (described on lines 1-9 above or IRC section | | document? | | r support? | (i) organiz U S | zed in the | sut | pport | |
| | | | , | (see instructions)) | Yes | No | Yes | No | Yes | No | | | |
| ÷ | | | | | 163 | 110 | 163 | 140 | 163 | 100 | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 1 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | 1 | | | | | | | | |
| | | | | | | | i | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| i • - | | | | | | | | | | | | | |
| At: | ai | | ŀ | 1 | , | | 1 | 3 | 4 | . 1 | | | |

232021 12-04-12

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 DISPUTE RESOLUTION

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (d) 2011 (e) 2012 (f) Total (a) 2008 **(b)** 2009 (c) 2010 1' Gifts, grants, contributions, and membership fees received. (Do not 194588. 11425. 53855. 60811 61672 6825 include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 6825. 11425. 53855. 60811. 61672. 194588. 4' Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 194588. 6 Public support. Subtract line 5 from line 4 **Section B. Total Support** Calendar year (or fiscal year beginning in) (a) 2008 (c) 2010 (d) 2011 **(b)** 2009 (e) 2012 (f) Total 6825. 11425 53855 60811 61672 194588. 7 Amounts from line 4

| 8 | Gross income from interest, | | | | | |
|-----|---------------------------------------|---|--|---|------------|---------|
| - 1 | dividends, payments received on | | | | | |
| 1 | securities loans, rents, royalties | | | | | |
| | and income from similar sources | | | | | |
| 9 | Net income from unrelated business | | | | | |
| | activities, whether or not the | ! | | | | |
| 1 | business is regularly carried on | | | | | |
| 10 | Other income. Do not include gain | | | | | |
| | or loss from the sale of capital | | | | | |
| | assets (Explain in Part IV.) | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | 194588. |
| | | | | - | , <u> </u> | |

12 12 Gross receipts from related activities, etc. (see instructions)

| 13 | First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) | |
|----|--|---|
| - | organization, check this box and stop here | • |
| _ | - Alice O. Occasion of Dublic Occasion A December | |

Section C. Computation of Public Support Percentage 100.00 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 100.00 15 Public support percentage from 2011 Schedule A, Part II, line 14 15

16a 33 1/3% support test - 2012. 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 - 2011. 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 10% -facts-and-circumstances test - 2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

 $\triangleright X$

| | edule A (Form 990 or 990 EZ) 2012 art III Support Schedule for (| Organizations | Described in | Section 509/a |)(2) | <u></u> | Page 3 |
|---------------------------------------|--|----------------------------|-----------------------|------------------------|---------------------|--------------------------|----------------|
| المنتا | (Complete only if you checked | _ | | | | Part II. If the organize | ation fails to |
| ĺ | qualify under the tests listed b | | | rgamzation railed | to quality direct t | art ii. ii tiio organizi | ation idia to |
| Se | ction A. Public Support | ociow, picaso com | ipioto i drt ii.j | | | | |
| | ndar year (or fiscal year beginning in) | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| | Gifts, grants, contributions, and | 15/2555 | 10/2000 | 19, 20.10 | (4) 2011 | (0/20,2 | (// 1010 |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | | ļ | | | |
| 2 | Gross receipts from admissions, | | | | | | |
| | merchandise sold or services per- | | | | | Ì | |
| | formed, or facilities furnished in | | | | İ | | |
| | any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that | | | | | | |
| | are not an unrelated trade or bus- | | | | | | |
| | iness under section 513 | | | | | + | |
| 4 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | 1 | |
| | or expended on its behalf | | | | | 1 | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7a | Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received | | | | | | |
| | from other than disqualified persons that exceed the greater of \$5,000 or 1% of the | | | | | | |
| | amount on line 13 for the year | | | | | | |
| c | Add lines 7a and 7b | | | | | | |
| _8_ | Public support (Subtract line 7c from line 6) | | | | | | |
| | ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, | | | | | | |
| | dividends, payments received on securities loans, rents, royalties | | | | | | |
| | and income from similar sources | | | | | | |
| b | Unrelated business taxable income | | | | | | |
| | (less section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| C | Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business | | | | | | | |
| | activities not included in line 10b, whether or not the business is | | | | | | |
| | regularly carried on | | | | | | |
| 12 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 13 | assets (explain in Part IV.) 13 Total support. (Add lines 9, 10c, 11, and 12) | | | | | | |
| 14 | First five years. If the Form 990 is for | the organization' | s first, second, thir | d, fourth, or fifth ta | ax year as a secti | on 501(c)(3) organiz | ation, |
| | check this box and stop here | | 77.17.11 | | | | ▶□ |
| <u>Sec</u> | tion C. Computation of Publ | <u>ic Support Pe</u> | rcentage | | | | |
| 15 | Public support percentage for 2012 (I | ine 8, column (f) d | livided by line 13, o | olumn (f)) | | 15 | % |
| 16 | Public support percentage from 2011 | Schedule A, Part | III, line 15 | | | 16 | % |
| Sec | tion D. Computation of Inves | stment Incom | e Percentage | | | | |
| 17 | Investment income percentage for 20 | 12 (line 10c, colui | mn (f) divided by lin | e 13, column (f)) | | 17 | % |
| 18 | Investment income percentage from 2 | 2011 Schedule A, | Part III, line 17 | | | 18 | % |
| 19a | 33 1/3% support tests - 2012. If the | organization did r | not check the box | on line 14, and line | 15 is more than | 33 1/3%, and line 1 | 7 is not |
| | more than 33 1/3%, check this box ar | | | | • | | ▶ □ |
| | 33 1/3% support tests - 2011. If the | | | | | | ınd |
| | line 18 is not more than 33 1/3%, che | | | | | _ | ▶□ |
| 20 | Private foundation. If the organization | n did not check a | box on line 14, 19a | a, or 19b, check th | is box and see in | structions | |

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

INTERNATIONAL ACADEMY OF DISPUTE RESOLUTION

Employer identification number 35-2293056

| FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES: | |
|--|----------|
| DESCRIPTION OF OTHER EXPENSES: | AMOUNT: |
| AWARDS | 3034. |
| ADVERTISING | 1050. |
| CATERING | 5097. |
| FEES | 410. |
| INTERPRETER | 3380. |
| OTHER | 26. |
| SPEAKER FEES | 500. |
| SUPPLIES | 1800. |
| TELEPHONE | 352. |
| TRAVEL | 4448. |
| TOTAL TO FORM 990-EZ, LINE 16 | 20097. |
| | |
| FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - TO PROMOTE MEDIA | ATION, A |
| FORM OF ALTERNATIVE DISPUTE RESOLUTION, THROUGH EDUCATIONAL PROC | GRAMS |
| AND COLLEGE AND LAW SCHOOL MEDIATION TOURNAMANTS ON A NATIONAL A | AND |
| INTERNATIONAL BASIS. | |
| | |
| FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONT | FRACTS: |
| THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DI | IRECTLY, |
| OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT. | |
| THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DI | [RECTLY, |
| OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT. | |
| | |
| | |