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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

Department of the Treasury
Internal Revenue Service

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

A For the 2013 calendar year, or tax year beginning , 2013, and ending , 20

B Check if applicable:
☐ Address change
☒ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization **OPERATION EXODUS USA**
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
PO BOX 568
 City or town state or province country, and ZIP or foreign postal code
LANCASTER, NY 14086

D Employer identification no. **20-2076659**
E Telephone number **(716) 681-6300**
G Gross receipts \$

F Name and address of principal officer **DEBRA MINOTTI**
SAME AS C ABOVE

H(a) Is this a group return for subordinates? ☐ Yes ☒ No
H(b) Are all subordinates included? ☐ Yes ☒ No
 If "No," attach a list (see instructions)
H(c) Group exemption number

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c)() (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: **WWW.OPERATIONEXODUSUSA.ORG**

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation **2004** **M** State of legal domicile **NY**

Part I Summary

1 Briefly describe the organization's mission or most significant activities During 2013 OEXUSA provided grant funding for humanitarian relief to Jewish people in the former Soviet Union, including funding for 3102 Jewish people to emigrate to their historic homeland of Israel, aid to 1107 persecuted Jewish families, a cultural and religious program for another 14,264 (cont. on Sch. O.)

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	3	7
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	5
5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	15
6 Total number of volunteers (estimate if necessary)	6	58
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,218,190	1,162,245
9 Program service revenue (Part VIII, line 2g)		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	987	2,779
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,219,177	1,165,024
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	454,085	517,821
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	462,333	485,282
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25)	88,150	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	314,191	269,489
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,230,609	1,272,592
19 Revenue less expenses. Subtract line 18 from line 12	(11,432)	(107,568)

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	308,024	241,238
21 Total liabilities (Part X, line 26)	11,536	52,318
22 Net assets or fund balances. Subtract line 21 from line 20	296,488	188,920

Part II Signature Block

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

Sign Here Signature of officer Debra Minotti Date 7/24/14
DEBRA MINOTTI, PRESIDENT/NATIONAL DIRECTOR
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name ALAN JEFF	Preparer's signature ALAN JEFF	Date 07-25-2014	Check ☒ if self-employed	PTIN P00605464
Firm's name ALAN JEFF CPA PC	Firm's EIN 716-693-3797			
Firm's address 2978 COLVIN BLVD TONAWANDA NY 14150	Phone no 716-693-3797			

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission

OPERATION EXODUS USA'S STATED CORPORATE PURPOSE IS TO PROVIDE HUMANITARIAN AID TO NEEDY JEWISH COMMUNITIES SUCH AS THOSE LIVING IN THE FORMER SOVIET UNION; TO FACILITATE PERSECUTED AND POVERTY STRICKEN JEWISH PEOPLE LIVING IN THESE AREAS TO EMIGRATE (CONT ON SCH.O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 586,232 including grants of \$ 344,842) (Revenue \$ 536,659)

DURING 2013, OPERATION EXODUS USA (OEUSA) PROVIDED FUNDING FOR HUMANITARIAN RELIEF AND ASSISTANCE TO JEWISH PEOPLE, INCLUDING THE ELDERLY AND INFIRM, LIVING PRIMARILY IN THE FORMER SOVIET UNION. OEUSA PROVIDED GRANT FUNDING TO EBENEZER EMERGENCY FUND INTERNATIONAL (EEFI) UNDER A GRANT CONTRACT (FULLY DESCRIBED IN SCHEDULE F) TO ENABLE EEFI TO PROVIDE HUMANITARIAN ASSISTANCE AND RELIEF TO JEWISH PERSONS SUFFERING PERSECUTION IN THE FORMER SOVIET UNION. THIS FUNDING ENABLED MORE THAN 3,102 JEWISH PEOPLE TO EMIGRATE (MAKE ALIYAH) FROM THE FORMER SOVIET UNION TO THEIR HISTORIC HOMELAND OF ISRAEL. GRANTS MADE BY OEUSA TO EEFI ALSO ALLOWED EEFI TO MAINTAIN OVER 84 STAFF AT 14 BASES AND SATELLITE OFFICES THROUGHOUT THE FORMER SOVIET UNION FROM WHICH EEFI WAS ABLE TO OFFER AID TO 7,737 PERSECUTED JEWISH FAMILIES AND PROVIDE CULTURAL AND RELIGIOUS EDUCATIONAL MATERIAL ABOUT RETURN TO THEIR HISTORIC HOMELAND OF ISRAEL.

4b (Code:) (Expenses \$ 328,938 including grants of \$ 168,150) (Revenue \$ 301,122)

See SERVICES page for a description of this program service.

4c (Code:) (Expenses \$ 68,968 including grants of \$) (Revenue \$ 63,136)

DURING 2013, OEUSA PROVIDED GRANT FUNDING FOR THE DISTRIBUTION OF 4,270 CARE PACKAGES OF FOOD AND OTHER ESSENTIALS TO POOR AND ISOLATED JEWISH FAMILIES AS WELL AS 513 CARE PACKAGES TO OTHER POOR FAMILIES IN THE FORMER SOVIET UNION AND RELATED TERRITORIES.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 34,484 including grants of \$) (Revenue \$ 31,568)

4e Total program service expenses ► 1,018,622

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	12
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
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	2a	15
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	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	X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
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
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
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	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
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 and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

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

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

**Section A. Governing Body and Management**

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 7		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b Enter the number of voting members included in line 1a, above, who are independent	1b 5		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **AK AL AR AZ CA CT DC FL GA HI**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► **KATHLEEN ARDINO (716) 681-6300, PO BOX 568, LANCASTER, NY 14086**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) AL STEVENSON CHAIRMAN OF THE BOARD	3.00	X		X				0	0	0
(2) WENDY BECKETT SECRETARY & NATL PRAYER COORD.	3.00	X		X				0	0	0
(3) PHIL MARKWARDT VICE CHAIRMAN	3.00	X		X				0	0	0
(4) RICHARD LEGGATT DIRECTOR	3.00	X						0	0	0
(5) GARY KAH DIRECTOR	3.00	X						0	0	0
(6) TERRY GIDDINGS TREASURER	16.00			X				11,704	0	0
(7) DEBRA MINOTTI PRESIDENT/NATIONAL DIRECTOR	40.00			X				54,025	0	0
(8) KATHLEEN ARDINO OFFICE MANAGER	40.00				X			40,900	0	0
(9) _____	_____									
(10) _____	_____									
(11) _____	_____									
(12) _____	_____									
(13) _____	_____									
(14) _____	_____									

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) _____	_____									
(16) _____	_____									
(17) _____	_____									
(18) _____	_____									
(19) _____	_____									
(20) _____	_____									
(21) _____	_____									
(22) _____	_____									
(23) _____	_____									
(24) _____	_____									
(25) _____	_____									
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								106,629	0	0

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

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions) . .	1e	700				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,161,545				
	g	Noncash contributions included in lines 1a-1f \$						
	h	Total. Add lines 1a-1f ▶		1,162,245				
Program Service Revenue	2a _____			Business Code				
	b	_____						
	c	_____						
	d	_____						
	e	_____						
	f	All other program service revenue						
	g	Total. Add lines 2a-2f ▶						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		2,779			2,779	
	4	Income from investment of tax-exempt bond proceeds ▶						
	5	Royalties ▶						
	6a			(i) Real	(ii) Personal			
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
	d	Net rental income or (loss) ▶						
	7a			(i) Securities	(ii) Other			
		Gross amount from sales of assets other than inventory						
		Less: cost or other basis and sales expenses						
		Gain or (loss)						
	d	Net gain or (loss) ▶						
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a				
		Less: direct expenses		b				
		Net income or (loss) from fundraising events ▶						
	9a	Gross income from gaming activities See Part IV, line 19		a				
		Less: direct expenses		b				
		Net income or (loss) from gaming activities ▶						
	10a	Gross sales of inventory, less returns and allowances		a				
Less: cost of goods sold		b						
Net income or (loss) from sales of inventory ▶								
Miscellaneous Revenue		Business Code						
11a	_____							
b	_____							
c	_____							
d	All other revenue							
e	Total. Add lines 11a-11d ▶							
12	Total revenue. See instructions ▶			1,165,024	0	0	2,779	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,950	1,950		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	171,029	171,029		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	344,842	344,842		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	106,629	84,930	7,608	14,091
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	303,558	167,787	111,510	24,261
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	38,243	23,561	11,106	3,576
10	Payroll taxes	36,852	22,705	10,702	3,445
11	Fees for services (non-employees).				
a	Management				
b	Legal	4,147	4,147		
c	Accounting	4,500	2,250	2,250	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	2,925	1,802	849	274
12	Advertising and promotion	49,057	20,585		28,472
13	Office expenses	47,153	36,364	4,644	6,145
14	Information technology				
15	Royalties				
16	Occupancy	33,598	26,879	6,308	411
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,076	12,239	837	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	23,243	16,270	4,649	2,324
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	COMMUNICATION	17,702	14,187	1,456	2,059
b	DIRECT OPERATIONAL	13,999	12,071	1,928	
c	TRAINING AND DEVELOPMENT	48,016	48,016		
d	WORKERS COMP INSURANCE	4,639	2,858	1,347	434
e	All other expenses	7,434	4,150	626	2,658
25	Total functional expenses. Add lines 1 through 24e	1,272,592	1,018,622	165,820	88,150
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	58,307	1	72,723
	2 Savings and temporary cash investments	188,241	2	120,652
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	8,741	8	5,513
	9 Prepaid expenses and deferred charges	6,166	9	9,935
	10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D	10a 165,130		
	b Less accumulated depreciation	10b 135,318	43,966	10c 29,812
	11 Investments - publicly traded securities		11	
	12 Investments - other securities See Part IV, line 11		12	
	13 Investments - program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,603	15	2,603
16 Total assets. Add lines 1 through 15 (must equal line 34)	308,024	16	241,238	
Liabilities	17 Accounts payable and accrued expenses	11,536	17	52,318
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	11,536	26	52,318
Net Assets of Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	296,488	27	188,920
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	296,488	33	188,920
	34 Total liabilities and net assets/fund balances	308,024	34	241,238

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,165,024
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,272,592
3	Revenue less expenses. Subtract line 2 from line 1	3	(107,568)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	296,488
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	188,920

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

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

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.**

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

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

OPERATION EXODUS USA

Employer identification number

20-2076659

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
- a ☐ Type I b ☐ Type II c ☐ Type III-Functionally integrated d ☐ Type III-Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
- (ii) A family member of a person described in (i) above? ☐
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2013

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	1,047,751	1,206,789	1,513,353	1,218,190	1,162,245	6,148,328
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,047,751	1,206,789	1,513,353	1,218,190	1,162,245	6,148,328
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)						2,223,009
6 Public support. Subtract line 5 from line 4						3,925,319

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	1,047,751	1,206,789	1,513,353	1,218,190	1,162,245	6,148,328
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	916	693	798	987	2,779	6,173
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		1,269	1,288			2,557
11 Total support. Add lines 7 through 10						6,157,058
12 Gross receipts from related activities, etc. (see instructions)					12	
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 ▶ ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	63.75	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	81.84	%
16a 33 1/3% support test - 2013. 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 - 2012. 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 - 2013. 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 - 2012. 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 ▶ ☐			

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus under sec 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Form 990
Worksheet

Schedule A, Line 5 - Excess 2% Limitation Contributors

2013

Name of the organization OPERATION EXODUS USA	(Keep for your records)	Employer identification number 20-2076659
---	-------------------------	---

2% of the amount on Schedule A, part II, line 11, column (f) 123,141

Name	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	(g) Excess contributions (col. (f) minus the 2% limit)
	350,000	300,000	150,000	150,000	400,000	1,350,000	1,226,859
	17,750	69,500	31,770	34,281	41,760	195,061	71,920
	110,000	95,500	38,500	42,000	40,500	326,500	203,359
	5,000	25,000	70,000	35,000	135,000	30,000	11,859
						30,000	
						38,000	
	21,200	21,500	27,160	23,000	23,300	116,160	
						20,404	
		8,000				12,280	
	6,000	7,000	12,000	13,000	12,000	50,000	
			7,650	9,800	11,700	29,150	
						8,987	
						8,500	
						8,454	
	9,000	9,750	6,750	8,000	8,250	41,750	
				5,650	7,500	13,150	
						7,500	
			10,000		7,000	17,000	
						6,000	
				9,710	5,900	15,610	
	6,000	6,000	6,000	5,500	5,500	29,000	
				5,950	5,200	11,150	
		5,100	5,000	5,000	5,035	20,135	
						5,000	
	5,000		7,000		5,000	17,000	
		5,000			5,000	10,000	
						5,000	
	21,000					21,000	
	12,700	51,585	259,650	254,500		578,435	455,294

Form 990
Worksheet

Schedule A, Line 5 - Excess 2% Limitation Contributors

2013

Name of the organization

OPERATION EXODUS USA

Employer identification number

20-2076659

(Keep for your records)

2% of the amount on Schedule A, part II, line 11, column (f)

.....

123,141

Name	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	(g) Excess contributions (col. (f) minus the 2% limit)
	12,000	15,000	15,000	15,000		57,000	
	10,000	5,000	5,000			20,000	
	10,000		31,400			41,400	
	8,500	17,500	12,000			38,000	
	8,307					8,307	
	7,000					7,000	
	6,800	10,400	10,850	7,500		35,550	
	6,200					6,200	
	6,100					6,100	
	6,000	8,500	12,800			27,300	
	5,350					5,350	
	5,117					5,117	
	5,080		7,470			12,550	
		100,000	140,000	40,000		280,000	156,859
		11,000				11,000	
		7,400				7,400	
		7,000				7,000	
		6,000	5,000			11,000	
			220,000			220,000	96,859
			10,087			10,087	
			10,000			10,000	
			7,170			7,170	
			5,800			5,800	
			5,120			5,120	
			5,000			5,000	
				19,083		19,083	
				10,000		10,000	
				7,300		7,300	
				6,450		6,450	

**Form 990
Worksheet**

Schedule A, Line 5 - Excess 2% Limitation Contributors

2013

Name of the organization OPERATION EXODUS USA	Employer identification number 20-2076659
---	---

2% of the amount on Schedule A, part II, line 11, column (f) **123,141**

Name	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	(g) Excess contributions (col. (f) minus the 2% limit)
				5,600		5,600	
				5,350		5,350	

TOTAL 2,223,009

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Attach to Form 990.**

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

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

OPERATION EXODUS USA

Employer identification number

20-2076659

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

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

Part II Conservation Easements

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____	
4 Number of states where property subject to conservation easement is located ▶ _____	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No	
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No	
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.	
a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

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

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

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

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

Part V Endowment Funds.

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ▶ _____ %
 b Permanent endowment ▶ _____ %
 c Temporarily restricted endowment ▶ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		19,112	13,497	5,615
d Equipment		146,018	121,821	24,197
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				29,812

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) DEPOSITS	2,603
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	2,603

Part X Other Liabilities.

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

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

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

Part XI

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

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

1	Total revenue, gains, and other support per audited financial statements		1	1,165,024
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	1,165,024
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	1,165,024

Part XII

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

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

1	Total expenses and losses per audited financial statements		1	1,272,592
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	1,272,592
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	1,272,592

Part XIII

Supplemental Information

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

**Schedule F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions.

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

Name of the organization

Employer identification number

OPERATION EXODUS USA

20-2076659

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EUROPE (INCLUDING (1) ICELAND AND GREENLAND)			GRANT MAKING	N/A	344,842
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					344,842
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					344,842

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

Schedule F (Form 990) 2013

Part II

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE (INCLUDING ICELAND AND GREENLAND)	SEE PART V	344,842	DIRECT WIR		N/A	BOOK
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If Yes, the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If Yes, the organization may be required to 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) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If Yes, the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If Yes, the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If Yes, the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If Yes, the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) ☐ Yes ☒ No

Part V Supplemental Information

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

01. Use of grant monitoring procedures (Part I, line 2)

OEUSA ("GRANTOR") MONITORS THE USES OF ITS FUNDS OUTSIDE THE UNITED STATES TO ENSURE THAT ITS GRANTS ARE USED EXCLUSIVELY TO ADVANCE ITS OWN CHARITABLE PURPOSES AND ARE NOT DIVERTED FROM THESE APPROVED CHARITABLE USES. FOR EXAMPLE, GRANTOR HAS PROVIDED GRANTS TO EEFINTERNATIONAL ("GRANTEE") TO BE USED EXCLUSIVELY FOR GRANTOR'S CHARITABLE PURPOSES, INCLUDING DELIVERING HUMANITARIAN AID FOR NEEDY JEWISH COMMUNITIES SUCH AS THOSE IN THE FORMER SOVIET UNION.

GRANTOR MONITORS AND CONTROLS THE USE OF FUNDS IT DISTRIBUTES TO GRANTEE THROUGH A MINISTRY SUPPORT AGREEMENT ("AGREEMENT") WHICH WAS EXECUTED WITH GRANTEE OCTOBER 12, 1995. THE AGREEMENT CONSTITUTES A LEGALLY BINDING CONTRACT WHICH INCORPORATES SUCH SAFEGUARDS AS: PRE-GRANT INQUIRY; WRITTEN GRANT CONTRACTS WHICH ESTABLISH GRANT SELECTION CRITERIA AND DOCUMENTATION OF GRANT AMOUNTS; SITE EVALUATIONS; AND RECORDS RETENTION. FURTHER, BY REQUIRING GRANTEE TO ABIDE BY THE TERMS OF AGREEMENT, GRANTOR HAS RETAINED THE CONTROL AND DISCRETION NECESSARY FOR THE FUNDS IT DISTRIBUTES TO GRANTEE TO BE USED ONLY FOR ITS SECTION 501(C)(3) PURPOSES.

THE MINISTRY SUPPORT AGREEMENT BETWEEN THE GRANTOR AND THE GRANTEE SPECIFICALLY PROVIDES: AGREEMENT, SECTION 1A: GRANTOR MAY FROM TIME TO TIME DECIDE TO PROVIDE FINANCIAL SUPPORT ON TERMS IT SPECIFIES. GRANTOR SHALL DETERMINE THE AMOUNT AND NATURE OF AID TO BE GRANTED BASED ON DOCUMENTATION PROVIDED BY GRANTEE AND THE SPECIFIC PLANNED USES OF THE REQUESTED FINANCIAL SUPPORT. IN ITS SOLE DISCRETION, THE GRANTOR'S BOARD OF DIRECTORS SHALL APPROVE; DISAPPROVE; OR APPROVE WITH MODIFICATIONS ANY REQUEST FOR FINANCIAL SUPPORT. AGREEMENT, SECTION 2B: GRANTEE SHALL SUBMIT TO GRANTOR PERIODIC REPORTS AVAILABLE FOR REVIEW BY GRANTOR WHEN REQUESTED.

AGREEMENT, SECTION 2C: GRANTEE IS REQUIRED TO COLLECT, RECORD AND MAINTAIN RECORDS OF ITS PROGRAMS AND ACTIVITIES AND ITS USE OF THE FINANCIAL SUPPORT PROVIDED BY GRANTOR. GRANTEE SHALL MAKE THESE RECORDS AVAILABLE FOR INSPECTION BY GRANTOR AT ITS OFFICES AND SHALL SEND

Part V**Supplemental Information**

DOMUS USA 20-2076659

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

COPIES OF SUCH RECORDS TO GRANTOR UPON REQUEST. PURSUANT TO THIS AGREEMENT A MEMBER OF GRANTOR'S BOARD OF DIRECTORS REVIEWED THE RECORDS GRANTEE IS MAINTAINING. AGREEMENT, SECTION 2D: GRANTEE IS PROHIBITED FROM MAKING ANY MODIFICATIONS TO ITS PROGRAMS AND ACTIVITIES FOR WHICH FINANCIAL SUPPORT HAS BEEN PROVIDED BY GRANTOR. ALL FUTURE GRANTS APPROVED BY GRANTOR'S BOARD OF DIRECTORS FOR USE OUTSIDE THE UNITED STATES WILL CONFORM TO THESE STANDARDS OF CONTROL AND OVERSIGHT.

IN 2013, GRANTOR MAINTAINED SUPERVISION AND CONDUCTED ON-SITE INSPECTIONS OF THE USE OF THIS FUNDING BY GRANTEE AS REQUIRED BY A 2005 CONTRACT BETWEEN THE GRANTOR AND GRANTEE AND AS FURTHER DESCRIBED IN SCHEDULE F. SPECIFICALLY, THE TWO MEMBERS OF THE GRANTOR'S BOARD OF DIRECTORS, 23 ADDITIONAL STAFF AND TWO VOLUNTEERS ATTENDED MEETINGS IN ISRAEL WITH GRANTEE AT WHICH THE FINANCIAL REVIEW OF ACTIVITIES AND OPERATIONS WERE CONDUCTED. ADDITIONALLY, ONE MEMBER OF THE GRANTOR'S BOARD OF DIRECTORS ATTENDED MEETINGS WITH GRANTEE IN JERUSALEM CONDUCTING ON-SITE VISITS AND FINANCIAL REVIEW OF ACTIVITIES AND OPERATIONS ENGAGED IN BY GRANTEE. THROUGH THIS GRANT OPPORTUNITY, GRANTOR IS ABLE TO PURSUE ITS CHARITABLE ACTIVITIES.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

OPERATION EXODUS USA

Part I General Information on Grants and Assistance

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

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								

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

3 Enter total number of other organizations listed in the line 1 table ▲

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 SEE PART IV.	289	168,150		N/A	N/A
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.					

03. Additional Information for Schedule I**PART IV, SUPPLEMENTAL INFORMATION:**

THE ORGANIZATION PROVIDED DIRECT GRANTS TO NEEDY US INDIVIDUALS FOR THE SOLE PURPOSE OF MAKING ALIYAH TO ISRAEL. THE GRANTS WERE MADE WITH THE APPROVAL OF THE BOARD OF DIRECTORS. THE ORGANIZATION DOCUMENTED THE USE OF GRANT FUNDS, WHICH WERE USED AS DIRECTLY RELATED TO THE CHARITABLE ORGANIZATION.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013

**Open to Public
Inspection**

Employer identification number

OPERATION EXODUS USA

20-2076659

01. Officer, directors, etc. family relationship (Part VI, line 2)

DEBRA MINOTTI AND KATHLEEN ARDINO HAVE A FAMILY RELATIONSHIP. THEY ARE SISTERS.

02. Organizational document changes (Part VI, line 4)

**THE ORGANIZATION AMENDED ITS ARTICLES OF INCORPORATION TO CHANGE ITS NAME ON 2/12/14. THIS
CHANGE WAS REPORTED TO THE IRS/GE CORRESPONDANCE UNIT ON 2/20/14. AN UPDATED SECTION
501(C)3 LETTER WAS ISSUED BY IRS OGDEN, UTAH ON MAY 1, 2014.**

03. Form 990 governing body review (Part VI, line 11)

**THROUGHOUT THE ORGANIZATION'S 2013 FINANCIAL YEAR ALL OFFICERS AND DIRECTORS REGULARLY
REVIEWED FINANCIAL STATEMENTS PREPARED BY THE ORGANIZATION'S TREASURER. THIS REVIEW
INCLUDE A COMPARISON WITH THE BUDGET THAT THE BOARD HAD FORMALLY APPROVED FOR 2013. THE
INFORMATION NECESSARY TO PREPARE THE ORGANIZATION'S 2013 FORM 990 RETURN WAS GATHERED
THROUGHOUT ITS 2013 CALENDAR YEAR BY ACCOUNTING STAFF AND VERIFIED BY ITS TREASURER.
THIS INFORMATION WAS DELIVERED TO THE ORGANIZATION'S CERTIFIED PUBLIC ACCOUNTANT(CPA). THE
ORGANIZATION'S CPA THEN PREPARED AND FORWARDED A COPY OF A COMPLETE FORM 990, AS WELL AS
THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS TO THE ORGANIZATION'S TREASURER AND
NATIONAL DIRECTOR, WHO, IN TURN, DISTRIBUTED THE FORM 990 TO THE ENTIRE BOARD OF DIRECTORS
FOR FINAL REVIEW AND APPROVAL. THE RETURN IS THEN TIMELY FILED WITH THE INTERNAL REVENUE
SERVICE. THE ORGANIZATION UPDATES AND FOLLOWS THIS PROCEDURE EACH AND EVERY YEAR.**

04. Conflict of interest policy compliance (Part VI, line 12c)

**THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS
CONFLICT OF INTEREST POLICY. THE ORGANIZATION'S BOARD UNANIMOUSLY ADPOTED THE CONFLICT**

Name of the organization

Employer identification number

OPERATION EXODUS USA

20-2076659

POLICY IN 2005. ARTICLE 2 OF THE POLICY EXPLAINS WHICH PERSONS ARE COVERED UNDER THE POLICY. ARTICLE 2 DEFINES THOSE IN A POSITION TO EXERCISE TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF THE ORGANIZATION AS "PERSONS CONCERNED" ("DISQUALIFIED PERSONS"). THOSE AT THE LEVEL TO DETERMINE WHETHER A CONFLICT EXISTS ARE THE ORGANIZATION'S DIRECTORS. ARTICLE 6 OF THE ORGANIZATION'S CONFLICT OF INTEREST POLICY CHARGES THE DIRECTORS WITH THE RESPONSIBILITY OF BEING "ALERT TO RECOGNIZE... AREAS AND RELATIONS" WHICH CONSTITUTE A CONFLICT OF INTEREST. THE BOARD OF DIRECTORS EXERCISES THIS RESPONSIBILITY BY UPDATING ITS RECORDS ON A REGULAR BASIS REGARDING POTENTIAL TRANSACTIONS BETWEEN DISQUALIFIED PERSONS AND THE ORGANIZATION. THE LEVEL OF AUTHORITY WHICH ACTUAL CONFLICTS ARE REVIEWED ALSO RESTS WITH THE BOARD OF DIRECTORS WHICH ENFORCES PROVISIONS SUCH AS ARTICLE 6 OF THE CONFLICT OF INTEREST POLICY PROVIDING THAT "...IT IS THE POLICY OF THE BOARD OF DIRECTORS THAT THE EXISTENCE OF ANY OF THE DIRECT OR INDIRECT CONFLICTING INTERESTS DESCRIBED IN ARTICLES 4 AND 5 SHALL BE DISCLOSED BEFORE ANY TRANSACTION IS CONSUMMATED". FINALLY, ARTICLE 1 IN THE CONFLICT OF INTEREST POLICY CHARGES THE DIRECTORS WITH "THE RESPONSIBILITY TO ADMINISTER THE AFFAIRS OF THE ORGANIZATION HONESTLY AND PRUDENTLY." THIS RESPONSIBILITY INCLUDES ADHERENCE TO THE ORGANIZATION'S ARTICLES OF INCORPORATION WHICH IN SECTION 5.2.2 PROHIBIT THE ORGANIZATION FROM ENGAGING IN ANY ACT OF SELF-DEALING. IN ACCORDANCE WITH THIS POLICY ALL OFFICERS, DIRECTORS, KEY EMPLOYEES OR OTHER DISQUALIFIED PERSONS ARE RESPONSIBLE TO ANNUALLY DISCLOSE INTEREST WHICH COULD GIVE RISE TO CONFLICTS AND ARE PROHIBITED FROM EXERCISING DECISION-MAKING AUTHORITY IN RELATION TO THESE INTERESTS.

05. CEO, executive director, top management comp (Part VI, line 15a)

THE REVIEW AND APPROVAL PROCESS FOR DETERMINATION OF THE COMPENSATION OF PERSONS DESCRIBED IN LINES 15A AND 15B IS AS FOLLOWS:

1. REVIEW AND APPROVAL BY THE ORGANIZATION'S BOARD OF DIRECTORS.
2. EACH MEMBER OF THE BOARD OF DIRECTORS WHO IS AUTHORIZED TO VOTE IS PRESENT DURING

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DEBATE AND THE VOTE, EITHER IN PERSON OR BY MEANS OF TELECOMMUNICATIONS EQUIPMENT.

3. THE BOARD OF DIRECTORS OBTAINS AND RELIES ON DATA REGARDING SALARIES OF PERSONS IN COMPARABLE POSITIONS IN THE GEOGRAPHIC AREA IN WHICH THOSE EMPLOYEES ARE LOCATED.

4. ANY DIRECTOR HAVING A CONFLICT OF INTEREST IN VOTING FOR COMPENSATION FOR A PARTICULAR EMPLOYEE ABSTAINS FROM THE VOTE.

5. DOCUMENTATION OF DATA IS MADE BEFORE THE BOARD'S NEXT MEETING.

6. LASTLY, AFTER DOCUMENTATION, RECORDS ARE APPROVED AS REASONABLE, ACCURATE AND COMPLETE.

06. Other officer or key employee compensation (Part VI, line 15b

SAME AS FOR LINE 15A.

07. Governing documents, etc, available to public (Part VI, line 19)

THE ORGANIZATION POSTS PERIODICALLY ON THEIR WEBSITE, AND ALSO IN THEIR NEWSLETTER, THAT THEIR AUDITED FINANCIAL STATEMENTS AND IRS FORM 990 ARE AVAILABLE UPON REQUEST. THESE DOCUMENTS ARE AVAILABLE EITHER BY MAIL OR BY ELECTRONIC FORMAT.

08. General explanation attachment

PART 3, LINE 1, ORGANIZATIONS MISSION

TO ISRAEL; TO ALSO PROVIDE HUMANITARIAN RELIEF TO CHRISTIAN CHURCHES LOCATED IN THE FORMER SOVIET UNION; TO PROMOTE AWARENESS AMONG CHRISTIANS OF THEIR JEWISH HERITAGE; AND TO STRENGTHEN THE BODY OF CHRISTIAN BELIEVERS. PART VI, LINE 17- STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED (CONT.):

ILLINOIS, KANSAS, KENTUCKY, MASSACHUSETTS, MARYLAND, MAINE, MICHIGAN, MINNESOTA, MISSOURI, MISSISSIPPI, NORTH CAROLINA, NORTH DAKOTA, NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEW YORK, OHIO, OKLAHOMA, OREGON, PENNSYLVANIA, RHODE ISLAND, SOUTH

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CAROLINA, TENNESSEE, UTAH, VIRGINIA, WASHINGTON, WISCONSIN, WEST VIRGINIA

PAGE 1, PART I, LINE 1:

JEWISH ADULTS AND CHILDREN ABOUT THEIR HISTORIC HOMELAND OF ISRAEL, AND DISTRIBUTION OF

4783 CARE PACKAGES OF FOOD AND OTHER ESSENTIALS TO POOR FAMILIES IN THE FORMER SOVIET

UNION.

Statement of Program Service Accomplishments**2013 01**

Name(s) as shown on return

Your Social Security Number

OPERATION EXODUS USA

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FORM 990, PART III(A)**PROGRAM SERVICE CODE****PROGRAM SERVICE EXPENSES**

\$328938

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE

\$168150

PROGRAM SERVICES REVENUE

\$301122

EXPLANATION

DURING 2013, OEUSA'S 15 STAFF MEMBERS AND 58 VOLUNTEERS CONTINUED EDUCATING BOTH CHRISTIANS AND THE JEWISH COMMUNITY IN THE UNITED STATES ABOUT THE URGENCY OF ASSISTING JEWISH PEOPLE IN EMIGRATING TO ISRAEL. OEUSA'S 376 KEY INTERCESSORS (PRAYER INTERCESSORS) PROVIDED VITAL SUPPORT FOR ITS OPERATIONS. TO FURTHER OEUSA'S GOALS, THE ORGANIZATION'S NATIONAL DIRECTOR, AS WELL AS OTHER STAFF AND VOLUNTEERS, VISITED ALASKA, ARKANSAS, COLORADO, CONNECTICUT, ILLINOIS, INDIANA, MICHIGAN, MINNESOTA, NEW YORK, OHIO, TEXAS, AND WISCONSIN TO RAISE AWARENESS OF THE ORGANIZATION'S MISSION AND THE URGENCY OF SUPPORTING SUFFERING AND PERSECUTED JEWISH PERSONS IN THE FORMER SOVIET UNION. IN ADDITION, IN MARCH AND OCTOBER, OEUSA SPONSORED EDUCATIONAL SPEAKING ENGAGEMENTS BY AN EEFI REPRESENTATIVE FROM ISRAEL IN NY, CONNECTICUT, AND THE GREAT LAKES REGION. OEUSA ALSO SPONSORED EDUCATIONAL PRESENTATIONS FOR THE PUBLIC BY ANOTHER EEFI REPRESENTATIVE FROM ITALY IN NY. OEUSA IS A MEMBER OF THE EVANGELICAL COUNCIL FOR FINANCIAL ACCOUNTABILITY. OEUSA'S DATA BASE HAS GROWN TO 296 CHURCH CONTACTS FOR A TOTAL OF 4,967 INDIVIDUALS AND ORGANIZATION CONTACTS. OF THE ORGANIZATIONS 4,967 SUPPORTERS, 861 ARE PRAYER SUPPORTERS.

Statement of Program Service Accomplishments**2013 01**

Name(s) as shown on return

Your Social Security Number

OPERATION EXODUS USA

20-2076659

FORM 990, PART III(B)**PROGRAM SERVICE CODE****PROGRAM SERVICE EXPENSES**

\$34484

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE

\$0

PROGRAM SERVICES REVENUE

\$31568

EXPLANATION

OTHER FUNDING FOR JEWISH INDIVIDUALS TO EMIGRATE TO HISTORIC HOMELAND OF ISRAEL.

**Application for Extension of Time To File an
Exempt Organization Return**► **File a separate application for each return.**

OMB No. 1545-1709

► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. OPERATION EXODUS USA	Employer identification number (EIN) or 20-2076659
	Number, street, and room or suite no. If a P.O. box, see instructions PO BOX 568	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LANCASTER, NY 14086	

Enter the Return code for the return that this application is for (file a separate application for each return) **0 1**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► **KATHLEEN ARDINO, PO BOX 568, LANCASTER, NY 14086**

Telephone No. ► **716-681-6300**

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **08-15**, 20 **14**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ calendar year 20 **13** or

► ☐ tax year beginning _____, 20____, and ending _____, 20____.

- 2** If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
- ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.**For Privacy Act and Paperwork Reduction Act Notice, see Instructions.****Form 8868 (Rev. 1-2014)**