



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



Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form.

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

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2013 calendar year, or tax year beginning 01-01-2013, and ending 12-31-2013

B Check if applicable

- Address change
Name change
Initial return
Terminated
Amended return
Application pending

C Name of organization TWO CRANES INSTITUTE
Number and street (or P O box, if mail is not delivered to street address) Room/suite 8512 20TH AVENUE NE
City or town, state or province, country, and ZIP or foreign postal code SEATTLE, WA 98115

D Employer identification number 26-3165486

E Telephone number (206) 524-0228

F Group Exemption Number

G Accounting Method Cash Accrual Other (specify)

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: WWW.TWOCRANESINSTITUTE.COM

J Tax-exempt status (check only one) 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527

K Form of organization Corporation Trust Association Other

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 23,234

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

Table with 21 rows and 2 columns. Rows include Revenue (Contributions, Program service, etc.), Expenses (Grants, Salaries, etc.), and Net Assets (Excess or deficit, beginning/end of year).

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	2,589	22 10,359
23 Land and buildings		23
24 Other assets (describe in Schedule O)	312	24 234
25 Total assets	2,901	25 10,593
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	2,901	27 10,593

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?
 TO PROVIDE EDUCATION PROGRAMS FOR CHILDREN, TEENS AND ADULTS THAT PROMOTE
 NONVIOLENCE AND CULTIVATE PEACEFUL SOLUTIONS TO CONFLICT

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses
 (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 YOUTH PROGRAMS - IN THE 2013 - 2014 SCHOOL YEAR TWO CRANES INSTITUTE (TCI) CONTINUED WITH THREE AFTERSCHOOL AIKIDO CLASSES AT JANE ADDAMS K-8 IN SEATTLE THIS WAS OUR FIFTH YEAR OF TEACHING AT THIS SCHOOL THROUGH THE THREE AFTERSCHOOL SESSIONS WE WORKED WITH 53 CHILDREN IN KINDERGARTEN THROUGH 5TH GRADE, AN INCREASE OVER THE PREVIOUS SCHOOL YEAR WE HAVE INVITATIONS TO EXPAND THE PROGRAM WHEN WE HAVE MORE TEACHERS AVAILABLE THIS PROGRAM CONTINUES TO GENERATE ENTHUSIASM WITH PARENTS, TEACHERS AND STUDENTS OF THE 53 CHILDREN 25 REPEATED THE CLASSES MORE THAN ONCE DURING THE YEAR, 19 REPEATED THE CLASS AFTER ATTENDING THE PREVIOUS YEAR AND SIX HAD TAKEN AT LEAST TWO FULL YEARS OR MORE OF CLASSES AS STAFFING, SPACE AND SUPPLIES BECOME AVAILABLE, WE CAN ACCOMMODATE MORE STUDENTS THERE IS ALWAYS A WAITING LIST TO GET INTO THE K-2ND GRADE PROGRAM CLASSES CURRENTLY, SCHOOLS USE A "LOTTERY SYSTEM" TO ALLOW STUDENTS ACCESS TO THE TCI CLASSES WITH FUNDING SUPPORT FROM THE PARENTS, TEACHERS, STUDENTS ASSOCIATION WE ALSO DID A PILOT "IN-CLASS" AIKIDO PROGRAM FOR THE KINDERGARTEN CLASSES FOR EIGHT WEEKS IN OCTOBER AND NOVEMBER TCI STAFF WORKED WITH 73 KINDERGARTENERS IN THREE CLASSROOMS WITH THE CLASSROOM TEACHERS AND AT LEAST ONE OTHER ADULT ASSISTANT ATTENDING IN EACH ROOM CONCEPTS OF BODY LANGUAGE, EMOTIONAL LITERACY, SELF-REGULATION AND AWARENESS WERE INTRODUCED TO THE CHILDREN THROUGH PHYSICAL GAMES AND EXERCISES DESIGNED TO PROMOTE COMPASSIONATE LEADERSHIP AND CONTACTFUL COMMUNICATION FROM A YOUNG AGE THE DEVELOPMENT OF OUR "AFTERSCHOOL" AND "IN THE CLASSROOM" PROGRAMS WERE PRESENTED AT AN INTERNATIONAL AIKI-EXTENSIONS CONFERENCE IN CALIFORNIA IN OCTOBER OF 2013 AIKI-EXTENSIONS IS A NONPROFIT ORGANIZATION DEVOTED TO EXPANDING THE APPLICATIONS OF AIKIDO OUTSIDE THE TRADITIONAL TRAINING HALLS
 (Grants \$) If this amount includes foreign grants, check here

28a 5,417

29 LEADERSHIP PROGRAMS - THE FOCUS FOR 2013 WAS TO EXPLORE NEW WAYS FOR OUR FACILITATORS, WHO ARE ALSO AIKIDO PRACTITIONERS, TO MORE EASILY BRING THEIR EXPERIENCE TO A BROADER AUDIENCE OUR LEADERSHIP PROGRAM OFFERS WAYS TO IMPROVE MANAGEMENT SKILLS, DEVELOP THE EMOTIONAL INTELLIGENCE TO HANDLE COMPLEX SITUATIONS AND RESOLVE CONFLICTS, BUILD TRUST, FACILITATE EFFECTIVE TEAMWORK AND NEGOTIATE SUSTAINABLE AGREEMENTS WE ARE DEVELOPING TRAININGS THAT CAN BE TAKEN INTO A CORPORATE ENVIRONMENT FOR ONE DAY, TWO DAYS OR FIVE DAYS IN JANUARY OF 2013, TCI OFFERED A WEEKEND TRAINING CALLED THE SAMURAI GAME THIS PROGRAM IS AN INTERACTIVE SIMULATION THAT IS A UNIQUE, INTENSE WITH CHALLENGING LEADERSHIP AND TEAM BUILDING EXPERIENCES WE HAD MORE THAN 40 PEOPLE IN ATTENDANCE FOR THIS PROGRAM TENS OF THOUSANDS OF INDIVIDUALS FROM AROUND THE WORLD HAVE PARTICIPATED IN THE SAMURAI GAME AND HAVE USED IT IN ORGANIZATIONAL AND CORPORATE TRAININGS AND RETREATS, UNIVERSITY LEADERSHIP/MANAGEMENT AND ORGANIZATIONAL BEHAVIOR COURSES, SCHOOL PROGRAMS, AND PERSONAL DEVELOPMENT SEMINARS AND WORKSHOPS TCI PLANS TO INCLUDE THE SAMURAI GAME AS PART OF PROGRAM OFFERINGS WE HAVE TWO FACILITATORS BECOMING CERTIFIED TO PRESENT THE GAME AND TCI IS IN THE PROCESS OF SCHEDULING AT LEAST TWO WEEKEND EVENTS IN 2014 THIS IS AN EXAMPLE OF A LEADERSHIP TRAINING THAT CAN BE OFFERED TO BOTH TEENS AND ADULTS OVER THE PAST YEAR, TCI HAS ALSO BEEN RESEARCHING STRATEGIC PARTNERSHIPS THAT WILL HELP LEVERAGE GREATER AWARENESS OF OUR PROGRAMS WE ARE WORKING WITH COMPANIES AND OTHER TRAINERS WHO WISH TO OFFER A "BODY-BASED" LEADERSHIP EXPERIENCE OUR AIKIDO PRACTICE CAN BE PRESENTED AS A "PROGRAM" WITHIN AN EXISTING TRAINING FORMAT WHICH ALLOWS US TO EASILY PARTNER WITH OTHER TRAINERS OR IT CAN STAND ALONE TCI HAS ALSO BEEN AGGRESSIVELY PURSUING NEW AVENUES FOR FUNDING THAT INCLUDE GRANTS AND POTENTIAL CONTRACTS THROUGH CORPORATE, EDUCATIONAL AND GOVERNMENTAL PROGRAMS
 (Grants \$) If this amount includes foreign grants, check here

29a 5,528

30
 (Grants \$) If this amount includes foreign grants, check here

30a

31 Other program services (describe in Schedule O)
 (Grants \$) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32 10,945

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
See Additional Data Table				

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the

instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations Enter
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
40b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
40c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization
40e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed
42a The organization's books are in care of KIMBERLY RICHARDSON Telephone no (206) 524-0228 Located at 8512 20TH AVENUE NE SEATTLE, WA ZIP + 4 98115
42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country
42c At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041? Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

	Yes	No
46		No

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47		No
48		No
49a		No
49b		

47 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

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000.

52 Did the organization complete Schedule A? **NOTE:** All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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 _____ Date 2014-08-12
 KIMBERLY RICHARDSON EXECUTIVE DIRECTOR
 Type or print name and title _____

Paid Preparer Use Only
 Print/Type preparer's name ELLEN JESSE Preparer's signature _____ Date 2014-08-14 Check if self-employed PTIN P01538773
 Firm's name ELLEN JESSE CPA Firm's EIN _____
 Firm's address 10561 13TH AVE NW SEATTLE, WA 981775227 Phone no (206) 363-2120

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

Additional Data

Software ID:
Software Version:
EIN: 26-3165486
Name: TWO CRANES INSTITUTE

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SUSAN ADAMS BOARD PRESID	10 00	0		
MICHELE BUCY BOARD SECRET	2 00	0		
DAN MURNAN BOARD TREASU	2 00	0		
CHRISTOPHER LEE BOARD MEMBER	2 00	0		
KIMBERLY RICHARDSON BOARD MEMBER	14 00	0		

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

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

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

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
TWO CRANES INSTITUTE

Employer identification number
26-3165486

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?

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

(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)

(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	
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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 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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						
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 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	
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 <input type="checkbox"/>		
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 <input type="checkbox"/>		
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 <input type="checkbox"/>		
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 <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 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.")		500	6,485	1,820	8,459	17,264
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	6,714	2,434	14,651	5,693	14,775	44,267
3 Gross receipts from activities that are not an unrelated trade or business under section 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	6,714	2,934	21,136	7,513	23,234	61,531
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)						61,531

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	6,714	2,934	21,136	7,513	23,234	61,531
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.)	6,714	2,934	21,136	7,513	23,234	61,531
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	100.000 %
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	0 %
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.

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2013

Open to Public Inspection

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization
TWO CRANES INSTITUTE

Employer identification number

26-3165486

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 16	EXPENSES MARKETING 53 OFFICE SUPPLIES 220 TRAVEL 4,303 LIABILITY INSURANCE 1,013 LICENSES AND PERMITS 130 TELEPHONE 868 MEETING EXPENSE-MEALS 632 BANK SERVICE CHARGES 116 SUPPLIES 69 TOTAL 7,404
FORM 990-EZ, PART II, LINE 24	PREPAID EXPENSES AND DEFERRED CHARGES 312 234 TOTAL 312 234
FORM 990-EZ, PART III	TO PROVIDE EDUCATION PROGRAMS FOR CHILDREN, TEENS AND ADULTS THAT PROMOTE NONVIOLENCE AND CULTIVATE PEACEFUL SOLUTIONS TO CONFLICT
FORM 990-EZ, PART III, LINE 28	YOUTH PROGRAMS - IN THE 2013 - 2014 SCHOOL YEAR TWO CRANES INSTITUTE (TCI) CONTINUED WITH THREE AFTERSCHOOL AIKIDO CLASSES AT JANE ADDAMS K-8 IN SEATTLE. THIS WAS OUR FIFTH YEAR OF TEACHING AT THIS SCHOOL THROUGH THE THREE AFTERSCHOOL SESSIONS WE WORKED WITH 53 CHILDREN IN KINDERGARTEN THROUGH 5TH GRADE, AN INCREASE OVER THE PREVIOUS SCHOOL YEAR WE HAVE INVITATIONS TO EXPAND THE PROGRAM WHEN WE HAVE MORE TEACHERS AVAILABLE. THIS PROGRAM CONTINUES TO GENERATE ENTHUSIASM WITH PARENTS, TEACHERS AND STUDENTS OF THE 53 CHILDREN 25 REPEATED THE CLASSES MORE THAN ONCE DURING THE YEAR, 19 REPEATED THE CLASS AFTER ATTENDING THE PREVIOUS YEAR AND SIX HAD TAKEN AT LEAST TWO FULL YEARS OR MORE OF CLASSES AS STAFFING, SPACE AND SUPPLIES BECOME AVAILABLE, WE CAN ACCOMMODATE MORE STUDENTS THERE IS ALWAYS A WAITING LIST TO GET INTO THE K-2ND GRADE PROGRAM CLASSES CURRENTLY, SCHOOLS USE A "LOTTERY SYSTEM" TO ALLOW STUDENTS ACCESS TO THE TCI CLASSES WITH FUNDING SUPPORT FROM THE PARENTS, TEACHERS, STUDENTS ASSOCIATION WE ALSO DID A PILOT "IN-CLASS" AIKIDO PROGRAM FOR THE KINDERGARTEN CLASSES FOR EIGHT WEEKS IN OCTOBER AND NOVEMBER TCI STAFF WORKED WITH 73 KINDERGARTENERS IN THREE CLASSROOMS WITH THE CLASSROOM TEACHERS AND AT LEAST ONE OTHER ADULT ASSISTANT ATTENDING IN EACH ROOM CONCEPTS OF BODY LANGUAGE, EMOTIONAL LITERACY, SELF-REGULATION AND AWARENESS WERE INTRODUCED TO THE CHILDREN THROUGH PHYSICAL GAMES AND EXERCISES DESIGNED TO PROMOTE COMPASSIONATE LEADERSHIP AND CONTACTFUL COMMUNICATION FROM A YOUNG AGE THE DEVELOPMENT OF OUR "AFTERSCHOOL" AND "IN THE CLASSROOM" PROGRAMS WERE PRESENTED AT AN INTERNATIONAL AIKI-EXTENSIONS CONFERENCE IN CALIFORNIA IN OCTOBER OF 2013 AIKI-EXTENSIONS IS A NONPROFIT ORGANIZATION DEVOTED TO EXPANDING THE APPLICATIONS OF AIKIDO OUTSIDE THE TRADITIONAL TRAINING HALLS
FORM 990-EZ, PART III, LINE 29	LEADERSHIP PROGRAMS - THE FOCUS FOR 2013 WAS TO EXPLORE NEW WAYS FOR OUR FACILITATORS, WHO ARE ALSO AIKIDO PRACTITIONERS, TO MORE EASILY BRING THEIR EXPERIENCE TO A BROADER AUDIENCE. OUR LEADERSHIP PROGRAM OFFERS WAYS TO IMPROVE MANAGEMENT SKILLS, DEVELOP THE EMOTIONAL INTELLIGENCE TO HANDLE COMPLEX SITUATIONS AND RESOLVE CONFLICTS, BUILD TRUST, FACILITATE EFFECTIVE TEAMWORK AND NEGOTIATE SUSTAINABLE AGREEMENTS WE ARE DEVELOPING TRAININGS THAT CAN BE TAKEN INTO A CORPORATE ENVIRONMENT FOR ONE DAY, TWO DAYS OR FIVE DAYS IN JANUARY OF 2013, TCI OFFERED A WEEKEND TRAINING CALLED THE SAMURAI GAME THIS PROGRAM IS AN INTERACTIVE SIMULATION THAT IS A UNIQUE, INTENSE WITH CHALLENGING LEADERSHIP AND TEAM BUILDING EXPERIENCES WE HAD MORE THAN 40 PEOPLE IN ATTENDANCE FOR THIS PROGRAM TENS OF THOUSANDS OF INDIVIDUALS FROM AROUND THE WORLD HAVE PARTICIPATED IN THE SAMURAI GAME AND HAVE USED IT IN ORGANIZATIONAL AND CORPORATE TRAININGS AND RETREATS, UNIVERSITY LEADERSHIP/MANAGEMENT AND ORGANIZATIONAL BEHAVIOR COURSES, SCHOOL PROGRAMS, AND PERSONAL DEVELOPMENT SEMINARS AND WORKSHOPS TCI PLANS TO INCLUDE THE SAMURAI GAME AS PART OF PROGRAM OFFERINGS WE HAVE TWO FACILITATORS BECOMING CERTIFIED TO PRESENT THE GAME AND TCI IS IN THE PROCESS OF SCHEDULING AT LEAST TWO WEEKEND EVENTS IN 2014 THIS IS AN EXAMPLE OF A LEADERSHIP TRAINING THAT CAN BE OFFERED TO BOTH TEENS AND ADULTS OVER THE PAST YEAR, TCI HAS ALSO BEEN RESEARCHING STRATEGIC PARTNERSHIPS THAT WILL HELP LEVERAGE GREATER AWARENESS OF OUR PROGRAMS WE ARE WORKING WITH COMPANIES AND OTHER TRAINERS WHO WISH TO OFFER A "BODY-BASED" LEADERSHIP EXPERIENCE OUR AIKIDO PRACTICE CAN BE PRESENTED AS A "PROGRAM" WITHIN AN EXISTING TRAINING FORMAT WHICH ALLOWS US TO EASILY PARTNER WITH OTHER TRAINERS OR IT CAN STAND ALONE TCI HAS ALSO BEEN AGGRESSIVELY PURSUING NEW AVENUES FOR FUNDING THAT INCLUDE GRANTS AND POTENTIAL CONTRACTS THROUGH CORPORATE, EDUCATIONAL AND GOVERNMENTAL PROGRAMS

TY 2013 Compensation Explanation

Name: TWO CRANES INSTITUTE

EIN: 26-3165486

Person Name	Explanation
SUSAN ADAMS	
MICHELE BUCY	
DAN MURNAN	
CHRISTOPHER LEE	
KIMBERLY RICHARDSON	