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չ Form

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

Do not enter Social Security numbers on this form as it may be made public.

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

2013 Open to Public Inspection

OMB No 1545-0047

<u>A</u>	For the 2013 c	alendar year, or tax year beginning $10/01/13$ , and ending $09/30$	/14		
В	Check if applicable	C Name of organization		D Emplo	yer identification number
$\sqcup$	Address change	IRIS GLOBAL	<u>-</u>	1	
$\Box$	Name change	Doing Business As		33-	0648658
$\equiv$	·	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	one number
믬	Initial return	P.O. BOX 493995		530	)-255 <b>-</b> 2077
Ш	Terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amended return	REDDING CA 96049-3995		G Gross reco	eipts \$ 10,817,965
一	Application pending	F Name and address of principal officer			
	ripplication pending	HEIDI BAKER	H(a) Is this a gi	roup return for si	
		P. O. BOX 493995	H(b) Are all su	bordinates incli	uded? Yes No
		REDDING CA 96049-3995	If "No	," attach a list	(see instructions)
ī	Tax-exempt status	X 501(c)(3) 501(c) ( ) ◀ (insert no ) 4947(a)(1) or 527			
<u> </u>		WW.IRISGLOBAL.ORG	H(c) Group ex	emption numbe	ır 🕨
ĸ	Form of organization	X Corporation Trust Association Other ▶ L		1994	M State of legal domicile CA
		immary			
	<del></del>	scribe the organization's mission or most significant activities.			
ø.	1	SCHEDULE O			
ĕ					
Ē					
Activities & Governance	2 Check the	is box F if the organization discontinued its operations or disposed of more than	250/ of its not as	ooto	
ő			1 25% OF ILS HEL AS	1 1	6
<b>مخ</b>		of voting members of the governing body (Part VI, line 1a)		3	4
ţį		of independent voting members of the governing body (Part VI, line 1b)		4	
:	1	nber of individuals employed in calendar year 2013 (Part V, Ijne 2a)		5	27
AC	6 Total nun	nber of volunteers (estimate if necessary)		6	2800
		elated business revenue from Part VIII, column (C), line 12		7a	0
	b Net unrel	ated business taxable income from Form 990-T, line 34 \ 5 \ 2015		7b	0
		≪ ;‰	Pnor Ye		Current Year
ā	8 Contribut	ions and grants (Part VIII, line 1h)		9,673	8,400,060
en i	9 Program	service revenue (Part VIII, line 2g)		4,614	2,209,378
Revenue	10 Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		8,587	2,585
œ	11 Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4	1,981	138,514
	_12 Total reve	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,96	4,855	10,750,537
	13 Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)	8,47	6,376	6,458,652
	14 Benefits	paid to or for members (Part IX, column (A), line 4)		-	0
s	I	other compensation, employee benefits (Part IX, column (A), lines 5–10)	76	0,071	830,255
xpenses	1	onal fundraising fees (Part IX, column (A), line 11e)			0
ĕ		draising expenses (Part IX, column (D), line 25) ▶ 207,085			
Ä	I	penses (Part IX, column (A), lines 11a–11d, 11f–24e)	2.90	9,169	2,695,774
	1	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		5,616	9,984,681
	1	less expenses Subtract line 18 from line 12		0,761	765,856
DE 8	19 Revenue	less expenses Subtract line to from line 12	Beginning of Cu		End of Year
Net Assets of	20 Total ass	ets (Part X, line 16)		3,434	3,245,301
28.5 28.5 28.5 28.5 28.5 28.5 28.5 28.5	21 Total liab	illities (Part X, line 26)		0,602	809,185
<b>7</b>	27 Net acce	ts or fund balances Subtract line 21 from line 20		2,832	2,436,116
		gnature Block			
		<del></del>			and deep and belief it is
		perjury, I declare that I have examined this return, including accompanying schedules and stati omplete. Declaration of preparer (other than officer) is based on all information of which prepai			owledge and belief, it is
	10, 00, 100, 0, 0, 0	Compete Section of property (effect that office) is a fine of the competence of the		<del></del>	
·		Transfer of affine	<del></del>	Date	
Sig		ingnature of officer		Date	2-26-15
He	-	CHARLES PETERS CFO	<del>.</del>		2001/
_	<del></del>	ype or print name and title		<del></del>	<del></del>
		e preparer's name Preparer's signature	Date	Check	If PTIN
Pai	VI VIII	I R. PICHE', CPA Util	2/26	self-err	<del></del>
	parer Firm's na	D.H. SCOTT & COMPANY		Firm's EIN	68-0397834
Us	e Only	900 MARKET ST			
	Firm's ad	dress REDDING, CA 96001-0530		Phone no	530-243-4300
Ma		s this return with the preparer shown above? (see instructions)	-	-	X Yes No
_	<del>`</del>	uction Act Notice, see the separate instructions.	<del></del>		Form <b>990</b> (2013)

1,407,351 ) (Revenue \$

(Expenses \$

4e\_Total program service expenses ▶

4d Other program services (Describe in Schedule O)

1,407,351 including grants of \$

9,035,226

## Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		_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	4		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	5		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		j	v
-	"Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		X
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8	- {	x
9	complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
3	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or		[	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	J	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	<u> </u>	$\neg \uparrow$	<del></del> -
••	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	}	x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		$\neg \neg$	
•	VII, VIII, IX, or X as applicable		ł	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	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	11b		<u> </u>
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_ <u>X</u> _
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		- 1	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		1	v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	ı	х
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12b		x
13	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	$\dashv$	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	х	
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		J	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	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	15	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	16	<u> </u>	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	[	ĺ	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		ł	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	∤	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		ł	47
	If "Yes," complete Schedule G, Part III	19		X
20a		20a		X
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	

### Form 990 (2013) IRIS GLOBAL 33-0648658 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 12 If "Yes," complete Schedule I, Parts I and II X 21 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 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Schedule J X 23 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 Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 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 25a 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 pnor Forms 990 or 990-EZ? X If "Yes," complete Schedule L, Part I 25b 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 X disqualified persons? If so, complete Schedule L, Part II 26 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 X 27 entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 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) 28a Х A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X Schedule L, Part IV 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X 30 conservation contributions? If "Yes." complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 X or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable 36 X 36 related organization? If "Yes," complete Schedule R, Part V, line 2 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, 37 X

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 Form 990 (2013)

72	Statements Regarding Other IRS Filings and Tax Compliance			ভ
	Check if Schedule O contains a response or note to any line in this Part V		1,4	X
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1	-		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	┦ !	ĺ	[
•	reportable gaming (gambling) winnings to prize winners?	1c		)
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 27	}	}	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	7 2b	x	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1		
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		<u> </u>
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	ĺ
b	If "Yes," enter the name of the foreign country > SEE SCHEDULE O			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			İ
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
С	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	1 1		ł
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1		
	and services provided to the payor?	7a		X
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<b> </b> -
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		x
	required to file Form 8282?  If "Yes." indicate the number of Forms 8282 filed duning the year 7d	7c		
d	<b>5</b> , ,	7 <sub>0</sub>	1	x
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g 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	<del>                                     </del>		<u> </u>
Ü	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			ĺ
	organization, have excess business holdings at any time during the year?	8	-	ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		L
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter	( (		ĺ
а	Gross income from members or shareholders	_  !		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)	4		Ì
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	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			}
b	Enter the amount of reserves the organization is required to maintain by the states in which	]		
_	the organization is licensed to issue qualified health plans  Enter the amount of receives on head	<b>-</b>		
C 440	Enter the amount of reserves on hand  Did the emphysical procure any payments for indeer tenning convers during the tay year?	14a		X
14a	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<b></b> -	<del>  ^</del>
	" 100, 100 % 100 % 1000 120 to report since payments. If 110, provide an explanation in observation of	تتنب		

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 this Part VI X 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 6 1a 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 4 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customanly performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? а 8a X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a X 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c describe in Schedule O how this was done X Did the organization have a written whistleblower policy? 13 13 X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a The organization's CEO, Executive Director, or top management official X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a with a taxable entity during the year? 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 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 X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization > CHARLES PETERS 933 COLLEGE VIEW DR 530-255-2077 REDDING CA 96003

3										
RISG										
Form 990 (2013) IRIS GLO	BAL							33-064	8658	Page <b>7</b>
Part VII . Compensation	of Officers,	Dire	ecto	rs,	Tru	ıste	 es,	Key Employees, Hig	hest Compensated	Employees, and
Independent C										
			_					o any line in this Part		<u> </u>
								t Compensated Employee		
1a Complete this table for all persor organization's tax year	ns required to be	liste	ed R	epor	t co	mpen	satio	on for the calendar year en	ding with or within the	
<ul> <li>List all of the organization's ci</li> </ul>									s), regardless of amount o	f
compensation Enter -0- in columns							•		andress II	
List all of the organization's cu		•		•					• •	
<ul> <li>List the organization's five cui who received reportable compensation organization and any related organi</li> </ul>	on (Box 5 of For	m W	/-2 a	nd/o	Bo:	x 7 of	Fo	m 1099-MISC) of more that	an \$100,000 from the	
<ul> <li>List all of the organization's fo \$100,000 of reportable compensation</li> </ul>									who received more than	
<ul> <li>List all of the organization's for</li> </ul>										
organization, more than \$10,000 of List persons in the following order i										
compensated employees, and forme		3 01	unc.	51015	, 1113	litatio	iai	tradiced, emocra, key empi	oyces, mgmest	
Check this box if neither the org	anization nor an	y rel	ated	orga	anıza	tions	cor	npensated any current offic	er, director, or trustee	
(A)	(B)			- 10	 2)			(D)	(E)	(F)
Name and Title	Average				iton			Reportable	Reportable	Estimated
	hours per week					than or s both a		compensation from	compensation from related	amount of other
	(list any					ritruste		the	organizations	compensation
	hours for related	or no	ह	Officer	<u>@</u>	캶	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	Individual or director	nstitutional	ह	em	of ext	mer	, , , , ,		and related
	below datted line)	학교	_		employee	° 8				organizations
	1	trustee	trustee	1	<b>1</b> 8	Highest compensated employee				I
			8		l	麗				
(1) ROLLAND BAKER										
,	60.00				ŀ	1				
VICE PRESIDENT	0.00	X	1	X		} }		63,320	0	20,000
(2) HEIDI BAKER										
	75.00	Ì							l	
PRESIDENT	0.00	X		X				54,939	0	0
(3) CHARLES PETERS	Ī									
	20.00	ľ	ĺ	ĺ	İ	ĺĺ				1
TREASURER	0.00	X		X				495	0	0
(4) KRIS VALLOTTON		_	1		_	{ T	-			
	2.00	}	1							
DIRECTOR	0.00	X	_	$ldsymbol{ld}}}}}}$	_			0	0	0
(5) MEL TARI		1				ΙĮ				

	week (list any	box, unless person is both an officer and a director/trustee)		from the	related organizations	other compensation				
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) ROLLAND BAKER	60.00			ĺ		(	ĺ	1		
VICE PRESIDENT	60.00	X	l	x			ļ	63,320	0	20,000
(2) HEIDI BAKER	0.00	┼≏	┢	₽	-	├╌	←	03,320		20,000
(2) HEIDI DAKEK	75.00									
PRESIDENT	0.00	X		x				54,939	0	0
(3) CHARLES PETERS		1 ==	T	-	1	<u> </u>			_	
	20.00	ľ	ĺ		ĺ		l	1		
TREASURER	0.00	X		X		<u>_</u>		495	0	0
(4) KRIS VALLOTTON										
	2.00	1	l				ļ			
DIRECTOR	0.00	X	L	L	<u> </u>	<u></u>	乚	0	0	0
(5) MEL TARI		ì					<u> </u>			
	2.00	ļ	ļ	ļ	1					
DIRECTOR	0.00	X	<del> </del>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0	0	0
(6) STACEY CAMPELL	2.00		ļ		)	1				
DIRECTOR	0.00	x					ļ	o	o	0
(7) DANIEL LI	0.00	1		$\vdash$		<del>                                     </del>	╁┈			
(1) 2121222	2.00						1	]		
DIRECTOR	0.00	x	]		•			J o	0	0
(8)										
(9)					-					
(10)		-		_	_	-				
(11)				-		-				
				L.						5 900

Га	IT VII Section A. Officers	, Directors, Tru	Stee	5, N	ey E	:mpi	oyee	es, a	ing Highest Compensated	Employees (continued)				
	(A) Name and title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	rson i	than o s both or/trust	an	(D) Reportable compensation from the	(E)  Reportable compensation from related organizations	a ∞r	(F) stimated mount of other npensation	n	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org ar	from the ganization nd related anizations		
(12)			,	-		-						_		
(13)														
(14)			-											
(15)														
(16)						<b> </b>								
(17)														
(18)													<del>.</del> .	
(19)														
	Sub-total	L	L	L				<u> </u>	118,754			20	,000	
c d	Total from continuation shee Total (add lines 1b and 1c)	ets to Part VII, S	Secti	on A	4			<b>&gt;</b>	118,754			20,000		
2	Total number of individuals (in reportable compensation from				thos	e list	ed a	bove	<del></del>	\$100,000 in	· · · · · · · · · · · · · · · · · · ·			
3	Did the organization list any fo								oyee, or highest compensa	ited		Υ <del>Υ</del> ε	s No	
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	e 1a, is the sum	of re	port	able	con	pens	satio				-		
5	individual  Did any person listed on line	-									_	4	<u> </u>	
	for services rendered to the or	ganizati <u>on?</u> If "Y										5	X	
1	Complete this table for your fit compensation from the organic	ve highest comp	ensa	ted i	ndep	end	ent c	ontr	ractors that received more t	than \$100,000 of	ear	<del></del> -		
		(A) business address	пре	11301		0. 0			Descript	(B) ion of services		(C Comper	) isation	
	INISTERIO ARCO IRIS ABO DELGADO	3			(	C F	27		PEMBA EDUCATION			1 3	28,086	
								_		<del>-</del>			20,000	
		· · · · · · · · · · · · · · · · · · ·												
2	Total number of independent or received more than \$100,000								se listed above) who	1		- 0	00 (00)	

Га	nt v	Check if Schedule (		tains a	response o	r 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
इइ	1a	Federated campaigns	1a				TOVERIGO		012-014
rai	b	Membership dues	1b						
ξ. GE	c	Fundraising events	1c						
ar fig	d	Related organizations	1d					ĺ	
nii.		Government grants (contributions)	10						
Service Revenue Contributions, Gifts, Grants	f	All other contributions, gifts, grants,	<del>''</del>						
ig e	•	and similar amounts not included above	1f	8.	400,060				
Ęŏ	g	Noncash contributions included in lines 1a			58,185				
P P	' h	Total. Add lines 1a–1f	11	Ψ	50,105	8,400,060			
9		Total. Add lilles Ta-TI			Busn. Code	0,100,000			
S	2a	HARVEST & GLOBAL SC	21001	TNG	Bush. Code	2,034,750	2,034,750		
<u>§</u>	b		HOOL	INC	<del> </del>	174,628	174,628		
8		MISSIONS			<b> </b>	1/1/020	1/1/020	<del>-</del>	<del></del>
ξΞ	C								<del></del>
S	·	d			<del></del>				<u></u>
ja j	•	All other program service reve			<del></del>				<del></del>
Program		· •	nue			2,209,378			
_		Total. Add lines 2a–2f Investment income (including	duador	de intere		2,203,370			
	3	and other similar amounts)	uividei	ios, intere	551,	2,585		i i	2,585
		Income from investment of tax	. 0400	nt bond n	rocode	2,303			2,005
	4		-exem	produci p	oroceeus -				
	5	Royalties (i) Real			Personai		<del></del>		
	٠.	<del></del>		(") .	er sorial				
	6a	Gross rents				j		ļ	
	b	Less rental exps				l			
	C	Rental inc or (loss)		-	<del>-</del>				
	7a	Gross amount from (i) Securities		1 (					
		sales of assets		(")	Other	}			
	L	other than inventory							
	þ	Less cost or other		ł		ł			
	_	basis & sales exps		<del> </del>					
		Gain or (loss)		<u> </u>		ļ			
	d	Net gain or (loss)							
enne	oa	Gross income from fundraising ever	11115	ı	1				
		(not including \$	`						
Other Rev		of contributions reported on line 1c		'	- 1	Í			
ĕ	_	See Part IV, line 18 Less direct expenses	a b			J			
₹		· ·	- 1						
		Net income or (loss) from fund Gross income from gaming activitie		events			<del></del>	r	<del></del>
	98					Ì		1:	
	_	See Part IV, line 19 Less direct expenses	a b			ł			
		Net income or (loss) from gan	- 1	du atroo					
			ing ac	liviues					
	iva	Gross sales of inventory, less returns and allowances			114,573				
	_		a		67,428				
		Less cost of goods sold	b		07,420	47,145	47,145		
	C	Net income or (loss) from sale Miscellaneous Revenue	s or in	veritory	Busn Code	4/,143	7/,175	<del></del>	<del></del>
	46-				Duan Code	70,088	70,088		
	11a	OTHER INCOME			<del> </del>	21,281	21,281	<del></del>	
	b	UNREALIZED GAINS			<del>                                     </del>	21,201	21,201	<del></del>	
	ر د	All athor							
	d	All other revenue				91,369			
	42	Total Add lines 11a-11d				10,750,537	2,347,892	0	2,585
	12	Total revenue. See instruction	115			10,100,001	4,341,034	<u> </u>	2,303

# Part IX . Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must co		er organizations must com	olete column (A)	<del></del>
	Check if Schedule O contains a response			Diete Column (A)	
	ot include amounts reported on lines 6b, b, 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 U.S. See Part IV, line 21				<del></del>
2	Grants and other assistance to individuals in		1		
	the U.S. See Part IV, line 22	37,923	37,923		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	6 400 500	6 400 500		
	U S See Part IV, lines 15 and 16	6,420,729	6,420,729		
4	Benefits paid to or for members			<del></del>	
5	Compensation of current officers, directors,	116,337	102,126	14,211	
6	trustees, and key employees  Compensation not included above, to disqualified	110,337	102,120	14,211	
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	605,584	233,115	292,414	80,055
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	51,743	13,349	36,665	1,729
10	Payroll taxes	56,591	24,187	26,161	1,729
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				<del></del>
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column			7.07 5.07	
	(A) amount, list line 11g expenses on Schedule ()	101,521		101,521	
	Advertising and promotion	20 100	0.455	15 000	F 627
13	Office expenses	30,182 128,811	9,455	15,090	5,637 56,610
14	Information technology	120,011	72,201		30,010
15	Royalties	32,622	15,669	16,953	
16 17	Occupancy Travel	190,616	132,287	15,332	42,997
18	Payments of travel or entertainment expenses	150,010	232723.		
	for any federal, state, or local public officials			Ì	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	79,151	54,498	24,653	
23	Insurance	69,692	65,138	4,554	
24	Other expenses Itemize expenses not covered		_ T		
	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)	1 202 225	1 202 225		<del></del>
a	HARVEST SCHOOL	1,328,086	1,328,086		
þ	IRIS GLOBAL SCHOOL EXPENS	231,889	231,889		
C	COMPELLED BY LOVE FILM	167,554	167,554	147 145	60
d	BANK CHARGES	151,721	4,516	147,145 47,671	13,754
9	All other expenses	183,929	9,035,226	742,370	207,085
25 26		3,307,001	3,033,220	1=2,310	201,003
20	organization reported in column (B) joint costs	ľ		1	
	from a combined educational campaign and	j		1	
	fundraising solicitation Check here ► if following SOP 98-2 (ASC 958-720)				
DAA			<del></del>		Form <b>990</b> (2013)

P	art >	( , Balance Sheet				
_		Check if Schedule O contains a response or note	to any line in this Part X			
	•			(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		665,343	1	1,113,724
	2	Savings and temporary cash investments		000,510	2	101,799
	3	Pledges and grants receivable, net			3	202/133
	4	Accounts receivable, net			4	68,955
	5	Loans and other receivables from current and former off	icers directors	<del></del>	-	
	١	trustees, key employees, and highest compensated emp	·			
	Į	Complete Part II of Schedule L	oloyees		5	
	6		ons (as defined under section			
	ľ	4958(f)(1)), persons described in section 4958(c)(3)(B), a	-			
	[	sponsoring organizations of section 501(c)(9) voluntary				
		organizations (see instructions) Complete Part II of Schi	` •		6	
Assets	7	Notes and loans receivable, net	coule L		7	<del></del>
Ass	8	Inventories for sale or use		62,801	8	75,527
	9	Prepaid expenses and deferred charges		7,135	9	143,046
		Land, buildings, and equipment cost or	ſ	77155	-	113,010
	'0"	other basis Complete Part VI of Schedule D	10a 1,831,886			
	h	Less accumulated depreciation	1,633,070	10c	1,585,204	
	11	Investments—publicly traded securities	10b 246,682	125,085	11	157,046
	12	Investments—other securities See Part IV, line 11			12	237,010
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		<del> </del>	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34	N .	2,493,434	16	3,245,301
_	17	Accounts payable and accrued expenses	/	89,907	17	158,306
	18	Grants payable			18	
	19	Deferred revenue		770,695	19	650,879
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of	f Schedule D		21	
	22	· · · · · · · · · · · · · · · · · · ·				
Ě		trustees, key employees, highest compensated employe				
Liabilities	ļ	disqualified persons Complete Part II of Schedule L	,		22	
Ĕ	23	Secured mortgages and notes payable to unrelated third	parties	1	23	
	24	Unsecured notes and loans payable to unrelated third pa			24	
	25	Other liabilities (including federal income tax, payables to				
	ļ	parties, and other liabilities not included on lines 17-24)				
	İ	of Schedule D	·		25	
	26	Total liabilities. Add lines 17 through 25		860,602	26	809,185
		Organizations that follow SFAS 117 (ASC 958), check	c here ▶ X and			
or Fund Balances	l	complete lines 27 through 29, and lines 33 and 34.	_			
ğ	27	Unrestricted net assets		1,632,832	27	2,039,551
Ba	28	Temporarily restricted net assets			28	396,565
ď	29	Permanently restricted net assets	_		29	
₫	ł	Organizations that do not follow SFAS 117 (ASC 958)	), check here ▶ 🔲 and			
ō		complete lines 30 through 34.				
Sets	30	Capital stock or trust principal, or current funds			30	
Asi	31	Paid-in or capital surplus, or land, building, or equipment	fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or	other funds		32	
~	33	Total net assets or fund balances		1,632,832	33	2,436,116
	34	Total liabilities and net assets/fund balances		2,493,434	34	3,245,301

Form	990 (2013) IRIS GLOBAL	33-0648658			Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets	<del></del>				
	Check if Schedule O contains a response or note to an	y line in this Part XI				$\Box$
1	Total revenue (must equal Part VIII, column (A), line 12)		1	10,7	50,	537
2	Total expenses (must equal Part IX, column (A), line 25)		2	9,9	84,	681
3	Revenue less expenses Subtract line 2 from line 1		3	7	65,	856
4	Net assets or fund balances at beginning of year (must equal Part X, line	e 33, column (A))	4	1,6	32,	832
5	Net unrealized gains (losses) on investments		5			
6	Donated services and use of facilities		6			
7	Investment expenses		7			
8	Pnor period adjustments		8		37,	428
9	Other changes in net assets or fund balances (explain in Schedule O)		9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (	must equal Part X, line	1			
	33, column (B))		10	2,4	36,:	<u> 116</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to an	y line in this Part XII				ᆚᆚ
					Yes	No
1	Accounting method used to prepare the Form 990	Accrual Other				
	If the organization changed its method of accounting from a prior year o	r checked "Other," explain in		i '		
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by a	•		2a	X	
	If "Yes," check a box below to indicate whether the financial statements	for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both			1		
		ed and separate basis				
b	Were the organization's financial statements audited by an independent			2b		X
	If "Yes," check a box below to indicate whether the financial statements	for the year were audited on a			'	
	separate basis, consolidated basis, or both				1	}
		ed and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that as			1 -		
	of the audit, review, or compilation of its financial statements and select			2c	X	
	If the organization changed either its oversight process or selection proc	ess during the tax year, explain in		1		
	Schedule O					
3a	As a result of a federal award, was the organization required to undergo	an audit or audits as set forth in				v
	the Single Audit Act and OMB Circular A-133?			3a	<del> </del> -	<u> </u>
þ	If "Yes," did the organization undergo the required audit or audits? If the				}	ł
	required audit or audits, explain why in Schedule O and describe any ste	eps taken to undergo such audits		3b	900	) (2013)
				For	m マゴ	(2013) و

### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

IRIS GLOBAL

Employer identification number 33-0648658

P	art I	Reas	on for Public Charity	Status (All organizations	must co	omplete	this p	art.) Se	e ins	truction	าร			
The	orga			e it is (For lines 1 through 11, o										
1	Ĭ			ociation of churches described	-									
2	Н		cribed in section 170(b)(1)(				-70 -70-7-							
3	Н		,	ce organization described in se	ction 170	)(b)(1)( <b>A</b> )(	iiii							
4	H	•	•	in conjunction with a hospital				ν/4\/Δ\/	ii) Ent	er the h	nenital's	s name	۵	
•	ш	city, and state	•	an conjunction with a nospital	acoa ibca	30000		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ospitais	, marrie	٠,	
5	$\Box$	•		of a college or university owned	or operat	ed by a d	overnm	antal uni	t docen	had in				
•	ш	_		<u> </u>	or operat	cu by a g	OVEITHIN	sillai uiii	LUCSCII	ocu III				
6	$\Box$		(b)(1)(A)(iv). (Complete Part	•	ootion 1	70/6\/4\/	V(A)							
7	X		-	overnmental unit described in s				fram tha		مراطييم اد				
′			section 170(b)(1)(A)(vi). (C	substantial part of its support fro	uiii a yuv	errineritai	unit or	nom me	genera	ai public	•			
۰		_		·										
8	Н	-		170(b)(1)(A)(vi). (Complete Part		aante but		mbomb	n food	and ara				
9	ш		•	) more than 33 1/3% of its sup							155			
				npt functions—subject to certain	=	-								
				nd unrelated business taxable in				, 1101111	Jusii ies	565				
40	$\Box$	• •	_	0, 1975 See section 509(a)(2)										
10 11	Н	_	•	exclusively to test for public safe exclusively for the benefit of, to	•				out the					
••	ш	•	•	ed organizations described in s	•			-			1			
		• •		•						3001.01.				
	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													
е			<u>.</u> .	<u> </u>			,				•	og.		
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				rmination from the IRS that it is	a Type I.	Type II.	or Type	III supp	orting					
•		-	check this box		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,							
g		_		tion accepted any gift or contrib	ution from	anv of th	ne							
9		following per				•								
		٠.		ontrols, either alone or together	with perso	ons descr	ibed in (	ii) and					Yes	No
			w, the governing body of the		•		`	•				11g(i)		
			member of a person describ									11g(iı)		
		• •	•	described in (i) or (ii) above?								11g(iii)		
h		- •	•	the supported organization(s)										
	l) Nam	e of supported	(II) EIN	(Iii) Type of organization	(iv) Is the	organization	(v) Did	ou notify	(vi)	ls the	(vii)	Amount	of monet	ary
	org	janization		(described on lines 1-9		sted in your		nization in	organizati	ວກ ມາ col zed in the		supp	on	
				above or IRC section (see instructions))	governing	document?		of your cort?		S?				
				(655 11152 55115115)/	Yes	No	Yes	No	Yes	No_				
(A)														
					<u> </u>									
(B)														
					<b>↓</b>									
(C)														
<u></u>					<del> </del>				├─					
(D)														
(E)			<del></del>											
		<del></del>			ļ	ļ			<u> </u>					
Tota	.1					Ì								

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 I f the organization fails to qualify under the tests listed below, please complete Part III )

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,840,186	5,486,056	7,578,304	9,839,673	8,400,06	0 36,144,279
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						
5	Total. Add lines 1 through 3  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)	4,840,186	5,486,056	7,578,304	9,839,673	8,400,06	0 36,144,279
6	Public support. Subtract line 5 from line 4						36,144,279
_	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	4,840,186	5,486,056	7,578,304	9,839,673	8,400,06	0 36,144,279
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,431	7,007	4,978	3,510	2,58	5 23,511
9	Net income from unrelated business activities, whether or not the business is regularly carned 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	[					36,167,790
12	Gross receipts from related activities, etc	•				12	2,415,320
13	First five years. If the Form 990 is for the		, second, third, fou	irth, or fifth tax yea	ir as a section 501	(c)(3)	. 🗀
~-	organization, check this box and stop her		<u> </u>			<del></del>	
_	tion C. Computation of Public St	<del></del>					T 0/
14	Public support percentage for 2013 (line 6			n (t))		14	
15	Public support percentage from 2012 Sche			40	0.4/00/	15	98.40%
16a	33 1/3% support test—2013. If the organ				33 1/3% or more, c	check this	► X
h	box and stop here. The organization qual				5 is 33 1/3% or m	ore	<b>P</b> A
U	33 1/3% support test—2012. If the organic check this box and stop here. The organic				3 13 33 1/3 /6 01 111	ore,	▶ □
17a	10%-facts-and-circumstances test—201	•	• •	=	a or 16b and line	14 19	٠.
	10% or more, and if the organization mee	-					
	Part IV how the organization meets the "fi						
	organization	acto and chodinotal		, <b>4</b> 000			►∏
b	10%-facts-and-circumstances test—201	12. If the organization	on did not check a	box on line 13, 16	a, 16b, or 17a, an	d line	٠.
	15 is 10% or more, and if the organization	•					
	Explain in Part IV how the organization m						
	supported organization			-	·		▶ 🗀
18	Private foundation. If the organization did	d not check a box of	on line 13, 16a, 16	o, 17a, or 17b, che	ck this box and se	e	
	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.)

Sec	tion A. Public Support	quality direct to	ne tests hoted	below, piedse (	somplete i ait i		
	ndar 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						-4
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						
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						<del></del>
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6				ļ		
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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly camed 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, check this box and stop here		t, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	
Sec	tion C. Computation of Public Su		tage				
15	Public support percentage for 2013 (line 8,			nn (f))	······································	15	%
16	Public support percentage from 2012 Sche					16	%
Sec	tion D. Computation of Investme	nt Income Pe	rcentage				
17	Investment income percentage for 2013 (li	ine 10c, column (f)	divided by line 13	3, 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 organ						. ~-
b	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2012. If the organ	•	•				▶ [
-	line 18 is not more than 33 1/3%, check the						▶ [
20	Private foundation. If the organization did	•	•	•		=	▶

33-0648658

Page 4

Schedule A (Form 990 or 990-EZ) 2013 IRIS GLOBAL 33-0648658 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)

### 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

Open to Public

Inspection

Name of	the organization	ı	Employer Identifica	ation number
IR	IS GLOBAL		33-06486	558
Part	<u> </u>			
	Complete if the organization answered "Yes" to F	T		<del></del>
		(a) Donor advised funds	(b) Funds	and other accounts
	otal number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)	<u> </u>	<u> </u>	<del></del>
	Aggregate value at end of year	A the coasts hold in dones of used	L	
	Did the organization inform all donors and donor advisors in writing that			□ v <sub>2</sub> , □ v <sub>2</sub>
	unds are the organization's property, subject to the organization's exc	<del>-</del>		Yes No
	Did the organization inform all grantees, donors, and donor advisors in only for chantable purposes and not for the benefit of the donor or don-	• •		
	conferring impermissible private benefit?	or advisor, or for arry other purpose		☐ Yes ☐ No
Part			<del></del>	100 1100
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 7		
1 F	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 im	portant land area	ı
Ļ	Protection of natural habitat	Preservation of a certified histori	c structure	
L	Preservation of open space			
	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a conse		<del> </del>
	easement on the last day of the tax year			the End of the Tax Year
	otal number of conservation easements		2a	
	otal acreage restricted by conservation easements	hidad ia (a)	2b	
	Number of conservation easements on a certified historic structure incl		2c	
	Number of conservation easements included in (c) acquired after 8/17/	ob, and not on a	2d	
	nstoric structure listed in the National Register Number of conservation easements modified, transferred, released, ex	tinguished or terminated by the organiza		
	ax year ▶	tilliguished, or terminated by the organiza	don during the	
	Number of states where property subject to conservation easement is	located >		
	Does the organization have a written policy regarding the periodic mor			
	riolations, and enforcement of the conservation easements it holds?	and the same of th		Yes No
	Staff and volunteer hours devoted to monitoring, inspecting, and enfor	cing conservation easements during the y	/ear	
ı	•	-		
7 /	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year		
J	<b>&gt;</b> \$			
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
	n Part XIII, describe how the organization reports conservation easem	The state of the s		
	palance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements that of	describes the	
	organization's accounting for conservation easements  III Organizations Maintaining Collections of Art,	Historical Transuras or Other	Similar Acco	to
Part	Complete if the organization answered "Yes" to F		Jillilai Asse	<b></b>
1a 1	f the organization elected, as permitted under SFAS 116 (ASC 958), r		balance sheet	
	vorks of art, historical treasures, or other similar assets held for public			
	public service, provide, in Part XIII, the text of the footnote to its finance			
	f the organization elected, as permitted under SFAS 116 (ASC 958), t			
	works of art, historical treasures, or other similar assets held for public			
ţ	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		<b>▶</b> \$	
2 1	f the organization received or held works of art, historical treasures, or	r other similar assets for financial gain, pro	ovide the	
f	ollowing amounts required to be reported under SFAS 116 (ASC 958)	relating to these items		
a F	Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$	
<u>b</u> /	Assets included in Form 990, Part X		▶ \$	

Sche	dule D (Form 990) 2013 IRIS GLO	BAL			33-0	<u>648658</u>	Page 2	
_Pa	rt III · Organizations Maintainin	g Collections of	Art, Historical	Treasures,	or Other	r Similar Assı	ets (continued)	
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	, check any of the	following that a	re a signifi	cant use of its		
а	Public exhibition	d□	Loan or exchange	programs				
b	Scholarly research	<del>-</del>	Other					
С	Preservation for future generations							
4	Provide a description of the organization's of	collections and explain	how they further	the organization	s exempt p	ourpose in Part		
	XIII	·	•	· ·	• •	•		
5	During the year, did the organization solicit	or receive donations	of art, historical tre	asures, or other	sımılar			
	assets to be sold to raise funds rather than						Yes No	
Pa	rt IV Escrow and Custodial A							
	Complete if the organization 990, Part X, line 21	n answered "Yes"	to Form 990, I	Part IV, line 9	), or repo	rted an amour	nt on Form	
1a	Is the organization an agent, trustee, custoo	dian or other intermed	lary for contribution	ns or other asse	ts not			
	included on Form 990, Part X?		•				Yes No	
b	If "Yes," explain the arrangement in Part XII	II and complete the fo	llowing table					
	•	·	J			Γ'''	Amount	
С	Beginning balance					1c		
	Additions during the year					1d		
	Distributions during the year					10		
	Ending balance					1f		
	Did the organization include an amount on I	Form 990. Part X. line	21?				Yes No	
	If "Yes," explain the arrangement in Part XII			n provided in Pa	art XIII		— H	
	rt V Endowment Funds.							
	Complete if the organization	n answered "Yes"	to Form 990, I	Part IV, line_1	10			
		(a) Current year	(b) Prior year	(c) Two ye	ars back	(d) Three years bad	ck (e) Four years back	
1a	Beginning of year balance							
	Contributions							
С	Net investment earnings, gains, and							
	losses	_						
d	Grants or scholarships							
е	Other expenditures for facilities and				_			
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the cu	rrent year end balance	e (line 1g, column	(a)) held as				
а	Board designated or quasi-endowment ▶	%						
b	Permanent endowment ▶ %							
c	c Temporanly restricted endowment ▶ %							
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%						
3a	3a Are there endowment funds not in the possession of the organization that are held and administered for the							
	organization by Yes No							
	(i) unrelated organizations 3a(i)							
	(ii) related organizations 3a(ii)							
b	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 organizatio	n answered "Yes"	to Form 990, I	Part IV, line 1	1a. See	Form 990, Pa	rt X, line 10	
	Description of property	(a) Cost or other to	pasis (b) Cos	at or other basis	(c) A	Accumulated	(d) Book value	
		(investment)		(other)	de	preciation	<del> </del>	
1a	Land				<u> </u>		<del></del>	
b	Buildings							
С	Leasehold improvements	ļ					<del></del>	
d	Equipment		1	<u>,831,886</u>		246,682	1,585,204	
	Other	l						
Total	i. Add lines 1a through 1e (Column (d) must	equal Form 990, Part	t X, column (B), lin	e 10(c))		<u> </u>	1,585,204	

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

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

Sche	dule D (Form 990) 2013 IRIS GLOBAL	33-06486	5 <u>8</u>	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	•	leturn.	
	Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		1 1	
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	_}	
С	Recovenes of pnor year grants	2c		
d	Other (Describe in Part XIII)	2d	_}	
е	Add lines 2a through 2d		_2е	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	]	
С	Add lines 4a and 4b		_4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents With Expenses per	Return.	
	Complete if the organization answered "Yes" to Form 990, Page 1	art IV, line 12a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities		_	
b	Prior year adjustments	2b	]	
c	Other losses	2c	_	
ď	Other (Describe in Part XIII)	2d	_} _	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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	

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

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Schedule D (Form 990) 2013 IRIS GLOBAL
Part XIII · Supplemental Information (continued)

### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

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

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

2013
Open to Public

Inspection

Name of the organization

Part I

IRIS GLOBAL

Employer Identification number 33 - 0648658

Form 990, Part IV, line 14b 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 X 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 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total employees, agents, and independent expenditures for and investments offices in the region (by type) (e.g. a program service describe specific type of region fundraising, program services, contractors service(s) in region in region in region grants to recipients located in the region) SUB-SAHARAN AFRICA PROGRAM SERVICES COMMUNICATIONS 1,400 SOUTH ASIA PROGRAM SERVICES WELL DRILL SUPPLIES 32,244 SUB-SUHARAN AFRICA VEHICLE 117,472 (3) PROGRAM SERVICES SUB-SAHARAN AFRICA KODIAK AIRPLANE EXP SERVICES 75,764 PROGRAM (4) MIDDLE EAST AND NORTH AFRICA PROGRAM SERVICES GRANTS 18,695 (5) SUB-SAHARAN AFRICA PROGRAM SERVICES GRANTS 6,332,878 (6) SOUTH ASIA GRANTS 47,556 PROGRAM SERVICES (?)EAST ASIA AND THE PACIFIC PROGRAM SERVICES GRANTS 82,061 (8) CENTRAL AMERICA GRANTS 20,924 PROGRAM SERVICES (9) SOUTH AMERICA PROGRAM SERVICES GRANTS 35,121 (10)SOUTH AMERICA SCHOOL 32,642 PROGRAM SERVICES (11)SUB-SAHARAN AFRICA PROGRAM SERVICES SCHOOL 1,351,136 (12)(13)(14)(15) (16)8,147,893 3a Sub-total b Total from continuation

8,147,893

sheets to Part I

lines 3a and 3b)

33-0648658

IRISG

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. Schedule F (Form 990) 2013 IRIS GLOBAL
Part II Grants and Other Assistance t

	ran IV, IIITE	e 15, for any reci	pierit who receiv	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is freeded	ari be dupilicated ii	additional spa	ce is needed.		
-	(a) Name of	(b) IRS code	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description	(I) Method of valuation
	organization	section and EIN		gram	cash grant	cash	non-cash	of non-cash	(book, FMV,
	,	(if applicable)				disbursement	assistance	assistance	appraisal other)
				MISSIONS	1,045,958	WIRE TRANSFER	SFER		COST
Ξ	,	,	SUB-SAHARAN	N AFRICA			83,650	VEH, COMP, BIBLE	BLE
				CHILDREN'S SERVICES	2,327,368	WIRE TRANSFER	SFER		
(2)			SUB-SAHARAN	N AFRICA					
				EDUCATION	864,518	WIRE TRANSFER	SFER		
(3)			SUB-SAHARAN	N AFRICA					
				COMMUNITY DEVELOPMEN	1,033,151	WIRE TRANSFER	SFER		COST
4			SUB-SAHARAN	N AFRICA			32,244	WELL DRILLING	ING
				IMPOVERISHED WOMEN	285,495	WIRE TRANSFER	SFER		
(2)			SUB-SAHARAN	N AFRICA					
				MISSIONS	19,850	WIRE TRANSFER	SFER		
(9)			SUB-SAHARAN AFRICA	N AFRICA					
				CHILDREN'S SERVICES	41,721	WIRE TRANSFER	SFER		
0			SUB-SAHARAN AFRICA	N AFRICA					
				EDUCATION	22,459	WIRE TRANSFER	SFER		
(8)			SUB-SAHARAN AFRICA	N AFRICA					
			i	COMMUNITY DEVELOPMEN	6,907	WIRE TRANSFER	SFER		
(6)			SUB-SAHARAN AFRICA	N AFRICA					
				CHILDREN'S SERVICES	000'6	WIRE TRANSFER	SFER		
(10)			SUB-SAHARAN AFRICA	N AFRICA					
				CHILDREN'S SERVICES	7,827	WIRE TRANSFER	SFER		
(11)			SUB-SAHARAN	N AFRICA					
	1			CHILDREN'S SERVICES	84,261	WIRE TRANSFER	SFER		
(12)			SUB-SAHARAN	N AFRICA					
				IMPOVERISHED WOMEN	13,895	WIRE TRANSFER	SFER		
(13)			MIDDLE EAS	EAST AND NORTH AFRICA					
				CHILDREN SERVICES	72,689	WIRE TRANSFER	SFER		
(14)			SUB-SAHARAN	N AFRICA					
				COMMUNITY DEVELOPMEN	11,897	WIRE TRANSFER	SFER		
(15)			SUB-SAHARAN	N AFRICA					
				EDUCATION	6,862	WIRE TRANSFER	SFER		
(16)			SUB-SAHARAN AFRICA	N AFRICA					

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

Schedule F (Form 990) 2013

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2013 IRIS	
F (Form 990) 20	
Schedule	

33-0648658

Schedule r	Schedule F (Form 990) 2013	THEOTO STAT	1		0000000				7 pho -
Part II	Grants and	Grants and Other Assistance to Organizations Part IV line 15 for any recipient who received mo	nce to Organiz	<b>Grants and Other Assistance to Organizations or Entities Outside the United States.</b> Complete if the organization answered "Yes" on Form 990, Part IV line 15 for any recinent who received more than \$5,000. Part II can be dublicated if additional space is needed.	e United States. ( an be duplicated if	complete if the	organization answ se is needed	vered "Yes" on F	orm 990,
•	A STATE OF THE STA		200	A COMP. (1977)	(a) Amount of	Manner of	of the American	del Description	(i) Method of
-	(a) Name of organization	(b) IRS code	(c) Kegion	(d) Purpose of orant	cash grant	(r) manner or cash	non-cash	of non-cash	valuation (book FMV,
		(if applicable)				disbursement	assistance	assistance	appraisal, other)
				MISSIONS	2,680	WIRE TRANSFER	SFER		
£			SUB-SAHARAN	IN AFRICA					:
				MISSIONS	14,400	WIRE TRANSFER	SFER		
(2)			SUB-SAHARAN AFRCIA	IN AFRCIA					
				EDUCATION	160'01	WIRE TRANSFER	SFER		
ව			SOUTH ASI	d					
				MISSIONS	5,555	WIRE TRANSFER	SFER		
<b>Ð</b>			SOUTH ASI	~ I					
				MISSIONS	13,110	WIRE TRANSFER	SFER		
(2)			SOUTH AME	AMERICA		- 1			
				MISSIONS	7,000	WIRE TRANSFER	SFER	•	
(9)			SUB-SAHARAN AFRICA	IN AFRICA					
				SNOISSIW	17,749	WIRE TRANSFER	SFER		
9			MULTIPLE						
				MUTI	115,679				
(8)									
<u>6</u>									;
									<b>I</b>
<u>(10</u>									}
(11)									
(42)									
(13)									
5									: :
<u></u>									!
(16)									

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 ~

Enter total number of other organizations or entities

Schedule F (Form 990) 2013 IRIS GLOBAL Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.	GLOBAL ssistance to Ind	ividuals Outside space is needed.	the United States	33-0648658 s. Complete if the organization	zation answered "	Yes" on Form 990, Part	Page 3 IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of reapients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV appraisal, other)
(I) MISSIONS	EAST AS	ASIA AND THE PA	PACIFIC 53,991	WIRE/ACH			
(2) COMMUNITY DEVELOPMENT	EAST AS	ASIA AND THE PA	PACIFIC 7,032	WIRE/ACH			
(3) MISSIONS	SOUTH !	AMERICA 2	17,450	WIRE/ACH			
(4) CHILDREN'S SERVICES	SOUTH P	ASIA 1	11,425	WIRE/ACH			
I	SOUTH A	ASIA 1	14,822	WIRE/ACH			
(6) CHILDREN'S SERVICES	SUB-SAHARAN	ARAN AFRICA 1	14,236	WIRE/ACH			
	SUB-SAHARAN 11	ARAN AFRICA 11	125,925	WIRE/ACH			
WISSIONS	CENTRAL	AMERICA	10,832	WIRE/ACH			] }
(6)							
(10)							
(4)					:		
(12)	;						
(13)							
(14)							
(15)							
(16)							
(17)							
(18)	<u></u>	_					
						Schedule	Schedule F (Form 990) 2013

for Form 5713)

	edule F (Form 990) 2013 IRIS GLOBAL	33-0648658		Page
1	Was the organization a U.S. transferor of property to a foreign corporate the organization may be required to file Form 926, Return by a U.S. Tr. Corporation (see Instructions for Form 926)		Yes	X No
2	Did the organization have an interest in a foreign trust during the tax yet may be required to file Form 3520, Annual Return to Report Transaction Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information U.S. Owner (see Instructions for Forms 3520 and 3520-A)	ons with Foreign Trusts and	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation the organization may be required to file Form 5471, Information Return Certain Foreign Corporations (see Instructions for Form 5471)		Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreignalified electing fund during the tax year? If "Yes," the organization malinformation Return by a Shareholder of a Passive Foreign Investment Fund (see Instructions for Form 8621)	ay be required to file Form 8621,	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership the organization may be required to file Form 8865, Return of U.S. Per Foreign Partnerships (see Instructions for Form 8865)	· _	Yes	X No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2013

Yes

X No

### Part V Supplemental Information

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

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

IRIS GLOBAL HAS A REVIEW PROCESS THAT EXECUTIVE LEADERSHIP AND/OR LONG-TERM

COMMITTEE APPROVES WITH SUBSEQUENT ONGOING MONITORING. GRANT RECIPIENTS

RECEIVING RECURRING GRANTS ARE REQUIRED TO SUBMIT DETAILED BUDGETS AND FUND

REQUESTS THAT ARE SUBSEQUENTLY REVIEWED AND APPROVED BY THE BOARD OF

DIRECTORS. FURTHER, RECIPIENTS RECEIVING RECURRING GRANTS ARE REQUIRED TO

SUBMIT MONTHLY EXPENSE REPORTS DETAILING THE USE OF GRANTED FUNDS. MEMBERS

OF SENIOR MANAGEMENT RESIDE PRIMARILY IN PEMBA, MOZAMBIQUE AND PROVIDE

DIRECT OVERSIGHT OVER THE OPERATIONS OF MINISTERIO ARCO IRIS, IRIS GLOBAL'S

LARGEST GRANT RCIPIENT. LONG-TERM COMMITTEE MEMBERS ARE ASSIGNED SPECIFIC

REGIONS AND PROVIDE OVERSIGHT FOR GRANT RECIPIENTS WITHIN EACH OF THEIR

REGIONS.

PART I, LINE 3 - ACTIVITIES PER REGION

REGION	EX	PENDITURES	INVESTMENT	S
SUB-SAHARAN AFRICA	\$	1,400	\$	0
SOUTH ASIA	\$	32,244	\$	0
SUB-SUHARAN AFRICA	\$	117,472	\$	0
SUB-SAHARAN AFRICA	\$	75,764	\$	0
MIDDLE EAST AND NORTH AFRICA	\$	18,695	\$	0
SUB-SAHARAN AFRICA	\$	6,332,878	\$	0
SOUTH ASIA	\$	47,556	\$	0
EAST ASIA AND THE PACIFIC	\$	82,061	\$	0
CENTRAL AMERICA	\$	20,924	\$	0
SOUTH AMERICA	\$	35,121	\$	0
SOUTH AMERICA	\$	32,642	\$	0

Schedule F (Form 990) 2013 IRIS GLOBAL

33-0648658

Page 5

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).

SUB-SAHARAN AFRICA

\$ 1,351,136 \$

0

**≗** □ Schedule I (Form 990) (2013) Open to Public OMB No 1545-0047 2013 Inspection Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, (h) Purpose of grant or assistance Employer Identification number X Yes 33-0648658 (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of noncash assistance ▶ Attach to Form 990. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable General Information on Grants and Assistance (p) EIN For Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? (a) Name and address of organization IRIS GLOBAL or government Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE I (Form 990) Part Part II \_ 8 9 3 ල 3 **②** 9 8 Ξ

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Page	

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33-0648658	Is in the United
TRIS GLOBAL	Assistance (
IRIS	Other A
Schedule 1 (Form 990) (2013)	Grants and Other Assistance to Individua
T) I ali ibados	Part III

IRISG

	Part III can be duplicated if additional space is needed	onal space is needed.				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
•		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
			000			
1 MISSI	1 MISSION GRANTS	1	31,923			
7						
64						
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7						
Dart IV	Supplemental Information Provide the information	wide the information re	equired in Part I, line	2. Part III, column (b	on required in Part I. line 2. Part III, column (b), and any other additional information.	information.

IRIS GLOBAL HAS A REVIEW PROCESS THAT EXECUTIVE LEADERSHIP AND/OR LONG-TERM RECEIVING RECURRING GRANTS ARE REQUIRED TO SUBMIT DETAILED BUDGETS AND FUND COMMITTEE APPROVES WITH SUBSEQUUENT ONGOING MONITORING. GRANT RECIPIENTS DIRECTORS. FUTHER, RECIPIENTS RECEIVING RECURRING GRANTS ARE REQUIRED TO REQUESTS THAT ARE SUBSEQUENTLY REVIEWED AND APPROVED BY THE BOARD OF SUBMIT MONTHLY EXPENSE REPORTS DETAILING THE USE OF GRANTED FUNDS. PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS Supplemental Information. Provide the information required in Part Part IV

### IRISG

### SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions With Interested Persons**

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

Attach to Form 990 or Form 990-EZ.

See separate instructions.

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

2013

Open To Public Inspection

Name of the organization

Employer identification number

	IRIS GLOBAL							6486	58				
Part I	<b>Excess Benefit Transaction</b>												
	Complete if the organization answer	red "Yes" on For	m 990, Part IV	, lıne	25a	or 25b, or Fon	m 990-EZ, Part V,	line 40	0b				_
1	(a) Name of disqualified person	(b) Relatio	nship between disqu	ualified	pers	on and	(c) Description of tra	ensaction	n		(d)	Correc	ted?
···			organization							_	Yes		No.
(1)											<u> </u>		_
(2)											<u> </u>		
(3)											<u> </u>		
(4)													_
(5)											ļ		
(6)											L		
	he amount of tax incurred by the organ	ization manager	s or disqualified	d per	sons	s during the yea	ar						
	section 4958		41	<b>.</b>				<b>P</b> \$	` —				
3 Enter tr	he amount of tax, if any, on line 2, abo	ve, reimbursea t	by the organization	uon				<b>&gt;</b> \$	· ——				
D . ( )	<del></del>												
Part II	Loans to and/or From Inter							٠					
	Complete if the organization answer				ine :	38a or Form 99	0, Part IV, line 26,	or if th	ne				
<del></del>	organization reported an amount on  (a) Name of interested person	Form 990, Part		22 (d) L	on fo	(e) Onginal	(f) Balance due	(g) In	default?	I (b) Ar	nomword	(I) W	Intton
	(a) Name of interested person	with organization	loan	or fro			(i) balance due	(9) ""	uciauit,	by bo	oard or		ment?
		ĺ		or				<u></u>			nttee?	<u> </u>	
		<del> </del>		То	From		<del></del>	Yes	No	Yes	No	Yes	No
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(3)		<del></del>	<del></del>	$\vdash$	_		<del> </del>	├	-	-	<del> </del>		
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(5)				╁╌	_	<del></del>	<del> </del>	<del> </del> -		<del>                                     </del>	├─	├	
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10)		Ì		1	•			Ì	l	ŀ	1		l
Total		<del></del> _	<del></del>			<b>▶</b> \$							
Part III	Grants or Assistance Bene	efiting Intere	sted Persor	1S.									
	Complete if the organization answer				27		_						
	(a) Name of interested person	(b) Relation	ship between intere	sted	(c) A	mount of assistance	(d) Type of assistance		(8)	Purpos	e of ass	sistance	
			and the organization					<u> </u>					
(1)													
(2)													
(3)													
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(7)													
(8)													
(9)													
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Part IV · Business Transactions Involv			_·		
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a	, 28b, or 28c			
(a) Name of interested person	(b) Relationship between	(c) Amount of	(d) Description of transaction		Shanng
	interested person and the	transaction		reve	org nues?
	organization			Yes	No
(1) HEIDI BAKER	BOARD MEMBER	47,763	ROYALTIES		X
(2) HEIDI BAKER	BOARD MEMBER	33,681	RENT		X
(3) JAMES HUMAN	FAMILY OF PRES	16,773	SALARY		X
(4) CRYSTALYN HUMAN	FAMILY OF PRES	37,110	SALARY		X
(5)					Г
(6)					Г
(7)			i		Г
(8)					Г
(9)					
10)					Г
Part V Supplemental Information					
Provide additional information for respo	onses to questions on Schedule L (se	ee instructions)			
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# SCHEDULE M (Form 990)

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

 $\blacktriangleright$  Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

IRIS GLOBAL Employer Identification number 33~0648658

_ <u>Pa</u>	int I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determining			
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution amou	ınts		
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional Interests							
4	Books and publications							
5	Clothing and household			-				
	goods	X		2,054	FMV			
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded	X	5	54,522	FMV			
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,	ĺ						
	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
	contribution — Historic							
	structures							
14	Qualified conservation							
	contribution — Other							
15	Real estate Residential			L				
16	Real estate Commercial				<del></del>			
17	Real estate - Other		·					
18	Collectibles							
19	Food inventory				 			
20	Drugs and medical supplies				 			
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens		<u> </u>					
24	Archeological artifacts							
25	Other ▶ ( COMPUTER & EQ )	X	1	1,609	FMV			
26	Other ►(							
27	Other ▶(							
28	Other ►(	<u>L</u> _1						
29	Number of Forms 8283 received by	the organiz	zation dunng the tax yea	r for contributions for				
	which the organization completed Fo	om 8283, I	Part IV, Donee Acknowle	edgement	29 0			
							Yes	No
30a	During the year, did the organization	receive by	contribution any proper	ty reported in Part I, lines 1	- 28, that			
	it must hold for at least three years f	rom the da	ite of the initial contributi	on, and which is not require	ed to be			ł
	used for exempt purposes for the er	itire holding	penod?			30a		X
ь	If "Yes," describe the arrangement in	Part II				ĺ		
31	Does the organization have a gift ac	ceptance p	policy that requires the re	eview of any non-standard				
	contributions?					31	X	
32a	Does the organization hire or use th	ird parties	or related organizations	to solicit, process, or sell n	oncash			
	contributions?					32a	X	<u> </u>
b	If "Yes," describe in Part II							[
33	If the organization did not report an a	amount in e	column (c) for a type of (	property for which column (	a) is checked,			
	describe in Part II					L		<u> </u>

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

PART I, LINE 32B - THIRD PARTY USED TO PROCESS NONCASH CONTRIBUTIONS IRIS GLOBAL UTILIZES IDONATE TO COLLECT, PROCESS, AND SELL NON-CASH CONRIBUTIONS.

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SCHEDULE O (Form 990 or 990-EZ) 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.

OMB No 1545-0047
2013

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization

IRIS GLOBAL

Employer Identification number 33-0648658

FORM 990 - ORGANIZATION'S MISSION

WE ARE A HOLISTIC CHRISTIAN ORGANIZATION, WHICH FUNDS ONGOING AND EXPANDING PROGRAMS IN UNDERDEVELOPED NATIONS. SINCE INCEPTION, WE HAVE BEEN EXPRESSING THE LOVE OF GOD THROUGH PROVIDING EDUCATION AND BASIC NEEDS FOR ORPHANS, CHILDREN AT RISK, WIDOWS, VULNERABLE WOMEN AND THE DISABLED. OUR PROGRAMS INCLUDE EDUCATION, HEALTHCARE, COMMUNITY DEVELOPMENT, WELL DRILLING, LOW-COST HOUSING, COTTAGE INDUSTRIES, MICRO AND MACRO AGRICULTURAL PROJECTS, ARTS AND MEDIA, AND FAITH-BASED LEADERSHIP TRAINING.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT
STUDENTS PAY TUITION IN ORDER TO
COVER THE COST OF OPERATING THE MISSIONS TRANING SCHOOLS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

OTHER PROGRAM SERVICES ARE COMPRISED OF TWO CATEGORIES: COMMUNITY

DEVELOPMENT AND IMPOVERISHED WOMEN'S SERVICES. COMMUNITY DEVELOPMENT

EMCOMPASSES ACTIVITIES INCLUDING WELL DRILLING AND WATER PROJECTS, HOUSE

BUILDING AND CONSTRUCTION PROJECTS, HEALTH CLINICS AND MEDICAL SUPPLIES,

VOCATIONAL TRAINING, SMALL BUSINESS DEVELOPMENT, RELIEF IN NATURAL

DISASTERS, AND PUBLIC HEALTH EDUCATION ABOUT AIDS/HIV, NUTRITION, AND

HYGIENE AS WELL AS HEALTH EDUCATION FOR RURAL VILLAGES. IRIS GLOBAL ALSO

OPERATES FARMS THAT PROVIDE FOOD TO SUPPLEMENT THE DIETARY NEEDS OF THE

CHILDREN IN OUR FEEDING PROGRAMS AND PROVIDE JOBS AND VOCATIONAL TRAINING.

COMMUNITY DEVELOPMENT GRANTS AND EXPENSES FOR THE YEAR WERE \$1,101,101.

Name of the organization

IRIS GLOBAL

Employer Identification number 33-0648658

IMPOVERISHED WOMEN'S SERVICES INCLUDES PROGRAMS TO PROVIDE HOUSING,
MEDICAL CARE, FOOD, AND PERSONAL CARE SUPPLIES AS WELL AS NUTRITIONAL
EDUCATION FOR THE GROWTH AND DEVELOPMENT OF BABIES, CHILDREN AND ADULTS,
AND SPECIFIC NUTRITION INFORMATION FOR PREGNANCY. IRIS GLOBAL ALSO
PROVIDES VOCATIONAL TRAINING AND EMPLOYMENT ASSISTANCE INCLUDING A SEWING
SCHOOL. TOTAL GRANTS AND EXPENSES FOR IMPOVERISHED WOMEN'S SERVICES FOR
THE YEAR WERE \$306,250.

FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRIES ZAMBIA, MOZAMBIQUE, MALAWI

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS FAMILY AND BUSINESS RELATIONSHIPS

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE COMPLETE COPY WILL BE REVIEWED AND EVALUATED BY THE MEMBERS OF THE
BOARD. THE PRESIDENT WILL APPROVE BEFORE FILING AND THE CHIEF FINANCIAL
OFFICER WILL REVIEW AND SIGN.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

FULL DISCLOSURE, BY NOTICE IN WRITING, MUST BE MADE TO THE BOARD OF ALL

RELATIONSHIPS AND FINANCIAL INTERESTS WITH THIRD PARTIES THAT GIVE RISE TO

A CONFLICT OF INTEREST. FOLLOWING SUCH A DISCLOSURE, THE BOARD CHAIR MUST

APPOINT A COMMITTEE TO DETERMINE THE SPECIFIC NATURE OF THE CONFLICT OF

INTEREST AND INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION

ARRANGEMENT. AFTER INVESTIGATING THE ALTERNATIVES, THE COMMITTEE MUST

DETERMINE WHETHER THE CORPORATION CAN OBTAIN A MORE ADVANTAGEOUS

IRISG

Name of the organization

IRIS GLOBAL

Employer identification number 33-0648658

TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE MUST DETERMINE BY A MAJORITY VOTE OF DISINTERESTED BOARD MEMBERS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE CORPORATION'S BEST INTEREST, FOR THE CORPORATION'S OWN BENEFIT, AND FAIR AND REASONABLE TO THE CORPORATION.

AN INTERESTED BOARD MEMBER, OFFICER, OR MANAGING EMPLOYEE MAY NOT PARTICIPATE IN ANY DISCUSSION OR DEBATE WITH THE BOARD, OR OF ANY COMMITTEE OR SUBCOMMITTEE THEREOF IN WHICH THE SUBJECT OF DISCUSSION IS A CONTRACT, TRANSACTION, OR SITUATION IN WHICH THERE MAY BE A PERCEIVED OR ACTUAL HOWEVER, THE INTERESTED PERSON MAY BE PRESENT TO CONFLICT OF INTEREST. PROVIDE CLARIFYING INFORMATION IN SUCH A DISCUSSION OR DEBATE UNLESS OBJECTED TO BY ANY PRESENT BOARD OR COMMITTEE MEMBER.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE BOARD OF DIRECTORS DETERMINES THE COMPENSATION OF THE PRESIDENT AND VICE PRESIDENT.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS WILL BE AVAILABLE TO PUBLIC UPON REQUEST VIA A PHONE NUMBER: 1-530-255-2077.

5,275 1,167 4,299 13,754 Raising Raising Fund Fund ‹› 1,520 6,703 3,665 946 7,418 1,632 25,787 Management & Management & 47,671 101,521 101,521 General General Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee) ረን Form 990, Part IX, Line 24e - All Other Expenses 1,069 24,578 22,628 3,066 1,949 2,355 1,288 39,000 26,571 122,504 Program Service Program Service Federal Statements 33,478 28,593 24,578 24,225 10,936 5,690 4,021 1,691 183,929 101,521 50,717 101,521 Expenses Expenses Total Total Ś S TRAINING AND EDUCATION DUES AND SUBS Description Description PROFESSIONAL SERVICES POSTAGE AND SHIPPING PRINTING AND COPYING GIFTS AND OFFERINGS MISSIONS AVIATION RISG IRIS Global FYE: 9/30/2014 MEDICAL AID TOTAL TOTAL 33-0648658 UTILITIES OTHER

720 403

	Amount	\$ 54,522 2,054 1,609 4,390,024 2,310,742 1,013,100 380,000 248,009 \$ 8,400,060	Amount	\$ 2,568	Amount	\$ 2,034,750 174,628 70,088 21,281 114,573 \$ 2,415,320
Federal Statements	Schedule A. Part II, Line 1(e) Description		Schedule A. Part II, Line 8(e)		Schedule A. Part II. Line 12 Description	
IRISG IRIS Global 33-0648658 FYE: 9/30/2014		SECURITIES CLOTHING AND HOUSEHOLD GOODS COMPUTER EQUIPMENT DIRECT SUPPORT DIRECT SUPPORT-RESTRICTED FIDELITY CHARITABLE GIFTS FUND CASH CONTRIBUTION KVINNER NETTVERK-RESTRICTED CASH CONTRIBUTION TOTAL		DIVIDENDS INTEREST TOTAL		HARVEST & GLOBAL SCHOOL INC MISSIONS OTHER INCOME UNREALIZED GAINS TOTAL

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