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## EXTENDED TO AUGUST 17, 2015

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ 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.

A	or the	2014 calendar year, or tax year beginning a	nd ending	
В	Check if applicabl	C Name of organization		D Employer identification number
Г	Addre	SPIRIT OF AMERICA WORLDWIDE		
	Name chang	Doing business as		20-1687786
Ļ	Initial return Final	Number and street (or P.O. box if mail is not delivered to street address) 12021 WILSHIRE BLVD.	Room/su 507	Ite E Telephone number 310-230-5476
_	return/ termin		<u> </u>	
	ated Amen	City or town, state or province, country, and ZIP or foreign postal code LOS ANGELES, CA 90025		G Gross receipts \$ 3,466,264
F	Ireturn Applic tion			for subordinates? Yes X No
-	pendir	12021 WILSHIRE BLVD., SUITE 507, LOS	ANGELI	
Τ.	Tax-ex	empt status: X 501(c)(3) 501(c) ( ) ( (insert no ) 4947(a)(		If "No," attach a list. (see instructions)
J	Websit	te: WWW.SPIRITOFAMERICA.NET		H(c) Group exemption number ▶
K	orm of	organization: X Corporation Trust Association Other ▶	L Ye	ear of formation: $2004$ M State of legal domicile; $CA$
Pi	art I	Summary		
ė	1	Briefly describe the organization's mission or most significant activities SPI	RIT O	F AMERICA'S MISSION IS
Activities & Governance	١.	TO HELP AMERICANS SERVING ABROAD ASSIST		
/eru		Check this box if the organization discontinued its operations or dis	sposed of m	1 1
ģ		Number of voting members of the governing body (Part VI, line 1a)	LV	3 4
وه در	5	Number of independent voting members of the governing body (Part VI, line 1 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	D)	5 10
ij		Total number of volunteers, (estimate if necessary)		6
Ę		Total unrelated business revenue from Part VIII, column (C), line 12		7a 0.
ĕ		Net unrelated business taxable income from Form 990-T, line 34		7b 0
	<u> </u>	The difficulties bearings takes in our of the first of the original of the ori	T	Prior Year Current Year
•	8	Contributions and grants (Part VIII line 1h)	Ī	1,553,296. 3,203,683.
Revenue		Program service revenue (Part VIII) line 2g)	İ	0. 0.
eve		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	Ţ	<1,439.> 3,661.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0. 0
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12	2)	1,551,857. 3,207,344
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	ļ	204,360. 252,671
	14	Benefits paid to or for members (Part IX, column (A), line 4)	1	0. 0
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1	10)	607,157. 657,135
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	210	0. 0
쭚	b		210.	407 000 726 555
_	1/	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		407,898. 736,555 1,219,415. 1,646,361
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	}	332,442. 1,560,983
<u> </u>		Revenue less expenses Subtract line 18 from line 12		Beginning of Current Year End of Year
sets or	20	Total assets (Part X, line 16)		1,071,204. 2,696,148
ASS	21	Total liabilities (Part X, line 26)	ŀ	87,497. 156,126
Net As	22	Net assets or fund balances Subtract line 21 from line 20	<b> </b>	983,707. 2,540,022
	art II	Signature Block		
		ilties of perjury a declare that I have examined this return, including accompanying sched	dules and stat	tements, and to the best of my knowledge and belief, it is
true	, correc	ct, and complete Declaration of preparer (other than officer) is based on all information o	f which prepa	arer has any knowledge
_				8.10.15
Sig	n	Signature of office		Date
He	re	JAMES HAKE, CHIEF EXECUTIVE OFFICER		
		Type or print name and title		Date   Check     PTIN
D - '		Print/Type preparer's name		
Pai		NAZ ARSHAR  Firm's name GURSEY SCHNEIDER CLAP		<b>9-10-  </b>
	parer Only	Firm's address 1888 CENTURY PARK HAST SUITE	900	Firm's EIN ▶ 95-3309779
USE	Unity	LOS ANGELES, CA 90067-1735	J 0 0	Phone no. 310 - 552 - 0960
Ma	u tha II	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
	y trie ii 001 11-0		ictions	Form <b>990</b> (2014
			· · · · ·	

m 990 (20		20-1687786	Pag
	tatement of Program Service Accomplishments		_
	heck if Schedule O contains a response or note to any line in this Part III		L
	lescribe the organization's mission		
SEE	STATEMENT A.		
		<del> </del>	
	<u>, , , , , , , , , , , , , , , , , , , </u>		
D. d Ab. a	and the control of th		
	organization undertake any significant program services during the year which were not listed on		<u> </u>
•	r Form 990 or 990-EZ?	Tes	5 [4]
	describe these new services on Schedule O		s X
	organization cease conducting, or make significant changes in how it conducts, any program service	sr tes	5 [2]
	describe these changes on Schedule O	as massured by evenes	
	e the organization's program service accomplishments for each of its three largest program services, 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to c		
		miers, the total expenses	, ariu
	, if any, for each program service reported  (Expenses \$ 1,290,520 · including grants of \$ 252,671 · ) (Re		
	STATEMENT A.	Aeura 2	
211	O 1111 1111111 1 1 1 1 1 1 1 1 1 1 1 1		
	1.14.00		
	•		
(Code	) (Expenses \$	evenue \$	
` -			
	<del>/* · · · · · · · · · · · · · · · · · · ·</del>		
	*******		
(Code	) (Expenses \$ including grants of \$ ) (Re	evenue \$	
_			
	· -		
-			
Other p	rogram services (Describe in Schedule O )		
(Expenses	\$ including grants of \$ ) (Revenue \$	)	
Total no	ogram service expenses ► 1,290,520.		

Form **990** (2014)

Form 990 (2014) SPIRIT OF AMERICA WORLDWIDE 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)?		v	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			х
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
3	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporanly restricted endowments, permanent			۱,,
	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, VIII, IX, or X		i	
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
_	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	Ha	- 11	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
Ŭ	assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			,,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	^
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		$\vdash$
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			1
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	(001.0)
		-orm	22211	いいしんり

Form	990 (2014) SPIRIT OF AMERICA WORLDWIDE 20-168	7786	Pa	age 4
	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	_23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		Х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			!
	instructions for applicable filing thresholds, conditions, and exceptions).			i . i
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?//f "Yes," complete	ļ		
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	l l		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		_X_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Form **990** (2014)

37

X

	990 (2014) SPIRIT OF AMERICA WORLDWIDE		20-1687	786	Р	age 🕏
Pa	T V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
		ı			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	13			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	L	1		Ì
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	еропа	ible gaming	-	x	-
_	(gambling) winnings to prize winners?	ı	I	1c	<u> </u>	<del>                                     </del>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		10		l	l
	filed for the calendar year ending with or within the year covered by this return	2a_	10		X	ļ
D	If at least one is reported on line 2a, did the organization file all required federal employment tax retu Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions			2b	<u>^                                   </u>	
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	5)		   3a	-	X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b	<del> </del>	
	At any time during the calendar year, did the organization have an interest in, or a signature or other		rity over a	30	<del> </del>	
44	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		x
<b>b</b>	If "Yes," enter the name of the foreign country.	accou	nic) t	70	· · · · · · · · · · · · · · · · · · ·	
U	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	nts (FRAR)			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	1000ai	its (i DAI)	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year.	action	2	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	20110111	<u>-</u>	5c		<del></del>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	he ora	anization solicit	<u> </u>		
Ų.	any contributions that were not tax deductible as charitable contributions?	og	arnzation conon	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions and the organization include with every solicitation and express statement that such contributions are statement to the statement to the statement that such contributions are statement to the statement that such contributions are statement to the statement to	tions o	or aifts	<u> </u>	<u> </u>	
_	were not tax deductible?		<b>9</b>	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 and se	rvices (	provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	uired			
	to file Form 8282?		•	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contra	ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 88	399 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz	ation f	ile a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by th	e			
	sponsoring organization have excess business holdings at any time during the year?			8	<u> </u>	Х
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b	<u> </u>	Х
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		Į		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		l		
11	Section 501(c)(12) organizations. Enter					Ī
а	Gross income from members or shareholders	11a				
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a	ļ	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
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	13b				
С	Enter the amount of reserves on hand	13c				<u> </u>

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

14b

Form 990 (2014) SPIRIT OF AMERICA WORLDWIDE 20-1687786 Page
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					LX.
Sec	tion A. Governing Body and Management					
			i		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		4		
	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 0.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b		3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other		l_	
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under th	e dire	ct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 wa	as filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		5		X
6	Did the organization have members or stockholders?			6		X
<b>7</b> a	Did the organization have members, stockholders, or other persons who had the power to elect or approximation of the power to elect or	ppoint	one or			
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders, or			1
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:			
а	The governing body?			8a	X	
ь	Each committee with authority to act on behalf of the governing body?			8b	İ	Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	e Code )			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	hapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	ly befo	re filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," d	escnbe			
	ın Schedule O how this was done			12c		Х
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	al by ır	ndependent			1
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment v	vith a		_	
	taxable entity during the year?			16a		Х
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its p	participation			17 - 73
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nızatıc	n's			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶CA, AL, AK, AZ, A	R,C	T,FL,GA,H	I,IL	,KS	, KY
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T					
	for public inspection. Indicate how you made these available. Check all that apply					
	X Own website X Another's website X Upon request Other (explain	ın Sci	hedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, col	nflict o	of interest policy, a	nd finan	cıal	
	statements available to the public during the tax year					
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks ar	nd records 🕨			
	PEGGY FINDLEY, SPIRIT OF AMERICA WORLDWIDE - 310-2	30-	5476			
	12021 WILSHIRE BLVD SILTE 507 LOS ANGELES CA 9	002	5			

•			
E0	000	(2014)	

## SPIRIT OF AMERICA WORLDWIDE

20-1687786

Page 7

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

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

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

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

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

(A)	(B)			_ ((				(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos heck	ition more	than :	one	Reportable	Reportable	Estimated
	hours per	box	unle	ss pe	rson irecto	is bot vr/trus	h an tee)	compensation	compensation	amount of
	week (list any	$\vdash$					_	from the	from related organizations	other compensation
	hours for	direct				D		organization	(W-2/1099-MISC)	from the
	related	e 04	stee			nsate		(W-2/1099-MISC)	(,	organization
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				and related
	below	wdua	ututio	Officer	emp!	hest c ployee	Former		,	organizations
	line)	ם	Ē	통	Key	울등	For			
(1) JAMES HAKE	50.00			,,				02 707		0
CEO, FOUNDER & CHAIRMAN	0.50	Х	_	Х			ļ	83,787.	0.	0.
(2) DONALD KARL	0.50	١					İ			•
BOARD MEMBER	0.50	Х	<u> </u>	L				0.	0.	0.
(3) JAMES PAPINEAU	0.50	١,,								
BOARD MEMBER	0.50	Х	<u> </u>				<u> </u>	0.	0.	0.
(4) MICHAEL BIGHAM	0.50									^
BOARD MEMBER	45 00	Х		<u> </u>				0.	0.	0.
(5) PEGGY FINDLEY	45.00	l		١,,				70 461	_	_
DIRECTOR OF FINANCE & ADMI		<u> </u>	L	Х			_	78,461.	0.	0.
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		-	_				_			
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	<del> </del>	$\vdash$		<u> </u>	$\vdash$	$\vdash$	$\vdash$			
		1								
	+	-		_	_	$\vdash$	$\vdash$			<u> </u>
		l	1			l	l			

1. 0	Section A. Unicers, Directors, Trus	tees, ⊾ey ⊑m	pioy	ees	, and	a ni	gne	SIL	,ompensated Employe	es (continued)			
	(A)	(B)				C)			(D)	(E)		(F)	
	Name and title	Average		not c		more	than		Reportable	Reportable		Estimated	
		hours per week					is bot or/trus		compensation from	compensation from related		amount of other	ì
		(list any	ë				Γ		the	organization		compensati	on
		hours for	dire				ted		organization	(W-2/1099-MI	SC)	from the	
		related organizations	nstee (	truste	}	بو	релѕа		(W-2/1099-MISC)		Ì	organizatio	
		below	Individual trustee or director	Institutional trustee		Key employee	st com	<u></u>				and related organization	
		line)	Indra	Institu	Officer	Key en	Highest compensated employee	Former					
			Г										
			L			L	_	<u> </u>					
			ł						1	1			
			<del> </del>	$\vdash$			├	<u> </u>				· -	
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			$\vdash$		$\vdash$	┢	$\vdash$	-					
							<u> </u>	L					
	<del></del>		l		l	l	L	<u> </u>	162,248.		0.		0.
	Sub-total Total from continuation sheets to Part VI	I Section A							0.		0.		0.
	Total (add lines 1b and 1c)	i, Section A							162,248.		0.		0.
	Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wh	no re		0,000 of reportab	le		
	compensation from the organization								•	· · · · · · · · · · · · · · · · · · ·			0
	<del></del>											Yes	No
	Did the organization list any former officer,			e, ke	y er	nplo	yee	, or	highest compensated e	mployee on			<u>.</u>
	line 1a? If "Yes," complete Schedule J for s										ŀ	3	Χ
	For any individual listed on line 1a, is the su and related organizations greater than \$150	•							•	the organization			X
	and related organizations greater than \$150 Did any person listed on line 1a receive or a									idual for services		4	
	rendered to the organization? If "Yes," com	•				•		Cial	ca organization of many	iddai for scrylocs	'	5	X
	ion B. Independent Contractors												
1 (	Complete this table for your five highest co	mpensated inc	depe	ende	nt c	onti	racto	ors t	that received more than	\$100,000 of cor	npens	ation from	
1	the organization Report compensation for	the calendar y	ear	endı	ng v	vith	or w	ıthır		year			
	(A) Name and business	address	NIC	ONE	7				( <b>B)</b> Description of s	ervices	C	(C) ompensation	
				7111							Ť		
								$\dashv$					
2	Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se lis	stec	d above) who received m	nore than			
	\$100,000 of compensation from the organi						0						

		Check if Schedule O con	tains a response	or note to any li	ne in this Part VIII			
	· <del> · ·</del>	Oneck ii Schedule O com	tallis a response	or note to any in	(A) Total revenue	(B)  Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribu All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines	nts, and ove 1f 3,	203,683. 258,229.	2 1/4 t			
<u>8 8</u>	h	Total. Add lines 1a-1f			3,203,683.			
Program Service Revenue	2 a b c d e			Business Code				
۵		All other program service rev	enue	<u> </u>			~ 、	
	3 4	Total. Add lines 2a-2f Investment income (including other similar amounts) Income from investment of ta		•	557.			557.
	5	Royalties	<del></del> -	<u> </u>		<del>-</del>		
	b	Gross rents Less. rental expenses Rental income or (loss) Net rental income or (loss)	(i) Real	(ii) Personal	*****	4 <b>6 8 9 9</b>		
	7 a	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	(i) Securities 261,124.	(ii) Other 900.	]	4		
ľ		Gain or (loss)	2,794.	310.		No can the management of the canal control of the c	·	
		Net gain or (loss) Gross income from fundraisir	na events (not	<b></b>	3,104.			3,104.
Other Revenue		contributions reported on line Part IV, line 18 Less direct expenses	of		× >			
°	С	Net income or (loss) from fun		<b></b>				· ·
		Gross income from gaming a Part IV, line 19 Less. direct expenses	ctivities See a b		. **	*		
	С	Net income or (loss) from gar Gross sales of inventory, less	ning activities	<b></b>		. ~ .	-	
		and allowances Less cost of goods sold	a b		TO at all type is interpretations.			
	С	Net income or (loss) from sale		<u> </u>				
	44	Miscellaneous Reveni	ne	Business Code		E E 24 EF HAMMONT ON MA MA MA	mente ma mana rea e	m
	11 a							
}	b				<del> </del>			<u> </u>
l	q C	All other revenue						
ŀ		Total. Add lines 11a-11d		<b></b>				
Į	12	Total revenue See instructions.		•	3,207,344.	0.	0.	3,661.
				-				

	t IX Statement of Functional Expense			malata anti (A)	
Sect	on 501(c)(3) and 501(c)(4) organizations must comp			mpiete column (A)	
<u> </u>	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			7	•
	and domestic governments. See Part IV, line 21	500.	500.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	252,171.	252,171.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	175,639.	92,481.	64,662.	18,49
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	394,854.	352,548.	42,306.	
8	Pension plan accruals and contributions (include				<u></u>
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	39,977.	25,183.	12,660.	2,13
10	Payroll taxes	46,665.	35,952.	9,365.	1,34
11	Fees for services (non-employees)		·		
а	Management				
b	Legal	1,936.		1,936.	
c	Accounting	18,175.		18,175.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17			•	
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch O.)	163,020.	71,626.	7,958.	83,43
12	Advertising and promotion				
13	Office expenses	57,593.	36,817.	11,284.	9,49
14	Information technology	25,759.	18,984.	2,531.	4,24
15	Royalties				
16	Occupancy	89,422.	67,067.	20,567.	1,788
17	Travel	283,197.	268,961.	5,695.	8,54
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	į			
19	Conferences, conventions, and meetings	149.		149.	
20	Interest		.,.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	11,424.	3,199.	8,225.	
23	Insurance	45,066.	42,645.	1,937.	48
24	Other expenses. Itemize expenses not covered	<b>*</b>	- AND	, ****	
	above. (List miscellaneous expenses in line 24e. If line		4		
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)	]			
а	PROGRAM EQUIPMENT	13,519.	13,519.	0.	
b	BUSINESS TAXES & LICENS	9,247.	0.	0.	9,24
c	MERCHANT FEES	9,181.	0.	9,181.	
d	SUPPLIES & PHOTOGRAPHY	8,867.	8,867.		
	All other expenses				
:5	Total functional expenses. Add lines 1 through 24e	1,646,361.	1,290,520.	216,631.	139,21
26	Joint costs. Complete this line only if the organization		-		•
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here fit following SOP 98-2 (ASC 958-720)				

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 490,780. 326,017. 1 Cash - non-interest-bearing 1,182,799. 456,517. 2 Savings and temporary cash investments 150,000. 900,000. 3 Pledges and grants receivable, net 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L. 6 Assets 7 Notes and loans receivable, net 1,926. 1,926. 8 Inventories for sale or use 38,567. 40,871. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 74,070. basis Complete Part VI of Schedule D 10a 28,283. 45,787. 45,048. 10c 10b **b** Less accumulated depreciation 11 Investments - publicly traded securities 53,129. 51,489. 12 Investments · other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 2,696,148. 1,071,204. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 38,032. 86,323. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 49,465. 25 69,803. Schedule D 87,497. 26 156,126. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,369,580. 702,418. 27 27 Unrestricted net assets 281,289. 1,170,442. 28 28 Temporanly restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 983,707. 2,540,022. 33 33 Total net assets or fund balances 1,071,204. 2,696,148. Total liabilities and net assets/fund balances 34

Form	990 (2014) SPIRIT OF AMERICA WORLDWIDE	20-1	687786	Pag	<sub>je</sub> 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,207	7,3	44.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,646	5,3	61.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,560		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	983	3,7	07.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<4	1,6	<u>68.</u> :
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2,540	0,0	<u> 22.</u>
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u>Ш</u>
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_ [ ]	Yes	No
_	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	.0			<b>X</b>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	o on a			
	separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis				
	—		2b	х	
В	Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	la basia	20		
	consolidated basis, or both	ie Dasis,			;
	X Separate basis Consolidated basis Both consolidated and separate basis				1
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	o audit			
·	review, or compilation of its financial statements and selection of an independent accountant?	ie addit,	2c		<b>X</b>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	1		
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				,
Ja	Act and OMB Circular A-133?	ngio Addit	3a		$\mathbf{x}^{-}$
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	50 40411	3b		
	or addition on plane. They is a solitorate of and added his diff otopo tander to an adjoint addition		1 1	990 (	(2014)

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

Department of the Treasury

Internal Revenue Service

**Public Charity Status and Public Support** 

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

SPIRIT OF AMERICA WORLDWIDE

Employer identification number 20 - 1687786

Рa	rt I	Reason for Public (		All organizations must co		ıs part ) Se	ee instructions			
The	ne organization is not a private foundation because it is (For lines 1 through 11, check only one box)									
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2	$\overline{\Box}$	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3	一	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4	一	A nospital or a cooperative nospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital's name,  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
7		A medical research organization operated in conjunction with a nospital described in section 170(b)(1)(A)(iii). Enter the nospital's name, city, and state								
5		An organization operated for	or the benefit of a col	llege or university owner	d or operat	ted by a gr	overnmental unit describ	ned in		
3		section 170(b)(1)(A)(iv). (C		logo or armoronly owner	or opera	iou by a g	overmental and accord			
	$\Box$			antal unit described in i	ootion 17	70/h)/4)/A)	W			
7	$\overline{\mathbf{x}}$	A federal, state, or local gov	=					nublic described in		
′	LAN.	An organization that norma	-	illiai part of its support i	rom a gov	emmemai	unit or nom the general	public described in		
_	$\Box$	section 170(b)(1)(A)(vi). (C		4\(4\(\dagger) (O==== =t= D==						
8	H	A community trust describe								
9	ш	An organization that norma		•			·	_		
		activities related to its exer								
		income and unrelated busin		(less section 511 tax) tr	om busine	sses acqu	ired by the organization	aπer June 30, 1975		
		See section 509(a)(2). (Cor	•				201.1141			
10	님	An organization organized a	•	•	-					
11		An organization organized a								
		more publicly supported or	-					neck the box in		
		lines 11a through 11d that								
а	<u> </u>	Type I. A supporting orga								
		the supported organization			a majority (	of the dire	ctors or trustees of the s	supporting		
		organization You must o								
b			-				-	-		
		control or management o			ame perso	ons that co	ontrol or manage the sup	ported		
		organization(s) You mus	t complete Part IV,	Sections A and C.						
С								ed with,		
	_	its supported organization	n(s) (see instructions	) You must complete i	Part IV, Se	ections A,	D, and E.			
d			rintegrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organi	zation(s)		
		that is not functionally int	egrated The organiz	ation generally must sat	isfy a disti	ribution re	quirement and an attent	iveness		
		requirement (see instructi	ons) You must con	nplete Part IV, Sections	A and D,	and Part	V.			
е	_	Check this box if the orga	inization received a	written determination fro	m the IRS	that it is a	Type I, Type II, Type III			
		functionally integrated, or	Type III non-functio	nally integrated support	ng organiz	zation		r		
f	Ente	er the number of supported o	organizations							
g		vide the following information			Callana			() A		
	(	Name of supported     organization	(II) EIN	(iii) Type of organization (described on lines 1.9	(iv) Is the o		(v) Amount of monetary support (see	(vi) Amount of other support (see		
		Organization		above or IRC section	governing o		Instructions)	Instructions)		
				(see instructions))	Yes	No		,		

Schedule A (Form 990 or 990-EZ) 2014 SPIRIT OF AMERICA WORLDWIDE 20-1687786 Page 2

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants.")	4329669.	1565030.	1501369.	1553296.	3203683.	12153047.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	4329669.	1565030.	1501369.	1553296.	3203683.	12153047.
5	The portion of total contributions	·					<u> </u>
	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)		AM.	es los se ses			6296754.
6	Public support. Subtract line 5 from line 4						5856293.
	tion B. Total Support						<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	4329669.	1565030.	1501369.	1553296.	3203683.	12153047.
	Gross income from interest,						
-	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	2,330.	<4.934.	> <5,018.	> 567.	557.	<6,498.
q	Net income from unrelated business	_,	,	- ,			
٠	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI )	ĺ					
44	Total support. Add lines 7 through 10						12146549.
	Gross receipts from related activities,	oto (coo instructio				12	
	First five years. If the Form 990 is for	•	•	d fourth or fifth to	v voor oo o oosto		<del> </del>
13		-	inst, second, unit	u, louren, or men ta	ix year as a sectio	11 30 1(0)(3)	▶□
Sec	organization, check this box and stop ction C. Computation of Publ		rcentage	<del> </del>			
	Public support percentage for 2014 (I			column (fl)		14	48.21 %
	Public support percentage from 2013			, Old		15	42.19 %
	33 1/3% support test - 2014. If the c			n line 13, and line			
104	stop here. The organization qualifies	-			14 13 00 17070 01 11	iore, crieck tris be	►X
ь	33 1/3% support test - 2013. If the c		-		line 15 is 33 1/3%	or more, check th	
٠	and stop here. The organization qual				III 10 13 00 17070	or more, oneon ti	II3 500 ∧
170	10% -facts-and-circumstances tes	•	•		13 16a or 16b <i>a</i>	and line 14 is 1004	or more
ı ı d	and if the organization meets the "fac	-					
					•	t viriow the organ	
L	meets the "facts-and-circumstances"	-	-		•	17a and l-a 45 !-	1004 or
D	10% -facts-and-circumstances test	•				•	
	more, and if the organization meets the						,
46	organization meets the "facts-and-circ		=				
18	Private foundation. If the organization	n did not check a	pox on line 13, 16	a, 16b, 1/a, or 17b	o, check this box a	na see instruction	s <u> </u>

## Schedule A (Form 990 or 990-EZ) 2014 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

Sec	ction A. Public Support	elow, please com	piete Part II )				
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and	127.2.10	12,22,	1,2,	1,2,23.0	1 17,20	177 - 250
•	membership fees received. (Do not		i				1
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services per-					}	
	formed, or facilities furnished in any activity that is related to the			_			İ
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-					Ì	
	iness under section 513					<u> </u>	
4	Tax revenues levied for the organ-					}	
	ization's benefit and either paid to		]			}	
	or expended on its behalf		1		L		
5	The value of services or facilities						
	furnished by a governmental unit to					[	
	the organization without charge						
6	Total. Add lines 1 through 5					Ì	
7a	Amounts included on lines 1, 2, and					ļ	
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received					ł	
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the					ł	
	amount on line 13 for the year				<u> </u>		
C	Add lines 7a and 7b					<u> </u>	
	Public support (Subtract line 7c from line 6)	•	1		<u> </u>	<u> </u>	*
_	ction B. Total Support		•	,		_	
	ndar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6					<u> </u>	
10a	Gross income from interest, dividends, payments received on					l	
	securities loans, rents, royalties		ŀ			İ	
	and income from similar sources				-	1	
b	Unrelated business taxable income		1			l	
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b				-		
11	Net income from unrelated business activities not included in line 10b,				}		
	whether or not the business is						
12	regularly carried on Other income Do not include gain		<del></del>		<del>                                     </del>		+
12	or loss from the sale of capital						
40	assets (Explain in Part VI)	<del></del>			1	<del>                                     </del>	<del>-</del>
	Total support (Add lines 9, 10c, 11, and 12)	- *	- 6:				
14	First five years. If the Form 990 is for	r the organization :	s iirst, second, thi	ra, iourtii, or iiitii t	ax year as a secu	on 50 I(c)(3) orga	inization,
Sec	check this box and stop here	ic Support Pe	rcentage		·		
_	Public support percentage for 2014 (			column (fl)		15	%
16	Public support percentage from 2013	• • • • • • • • • • • • • • • • • • • •	- ·	00.0 (.,,		16	%
	ction D. Computation of Inve			)		1 1	·
17	Investment income percentage for 20					17	%
18	Investment income percentage from	•	-	(7)		18	%
	33 1/3% support tests - 2014. If the			on line 14, and line	e 15 is more than		
	more than 33 1/3%, check this box a	-					▶□
b	33 1/3% support tests - 2013. If the		-		- · ·		6, and
	line 18 is not more than 33 1/3%, che	-					. 🗀
20	Private foundation. If the organization			•		•	▶□

## Part IV | Supporting Organizations

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

Section A. All Supporting Organizati	ions
--------------------------------------	------

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
   (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <code>part VI</code>, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
1		
2		
3a		
		!
3b		
3c		
4a		<u>-</u>
		1
4b		
	- ~	
4c		
		***************************************
		:
5a		!
5b		
5c		_
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7		
8		
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9a		
	Ì	
9b		
 9c	**	
***********		
10a	-	
10b		
990 or 99	0-EZ)	2014

Sche	dule A (Form 990 or 990-EZ) 2014 SPIRIT OF AMERICA WORLDWIDE 20-1	68778	6 Pa	age 5
	rt IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			ĺ
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	L	i	L
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			1
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			ĺ
	controlled the organization's activities. If the organization had more than one supported organization,			ĺ
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		ļ	
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			İ
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	,		
-	or trustees of each of the organization's supported organization(s)? If "No," describe in part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Sec	tion D. Type III Supporting Organizations		•	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations	•		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see Instructions	):		
а	The organization satisfied the Activities Test Complete line 2 below	•		
ь	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	structions	s)	
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		] :	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			1
	that these activities constituted substantially all of its activities	2a		· ·
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		<b></b>	
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	ĺ		1
	reasons for the organization's position that its supported organization(s) would have engaged in these	1		
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			$\vdash$
				1
а		 3a		İ
L.	trustees of each of the supported organizations? Provide details in <i>Part VI.</i> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	34		
D	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		1
	are and the second of the seco			

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations							
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All							
	other Type III non-functionally integrated supporting organizations must cor	nplete	Sections A through E.					
Sect	ion A - Adjusted Net Income	(A) Pnor Year	(B) Current Year (optional)					
1	Net short-term capital gain	1		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or							
	collection of gross income or for management, conservation, or							
	maintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8						
Sect	ion B - Minimum Asset Amount		(A) Pnor Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see							
	instructions for short tax year or assets held for part of year)							
a	Average monthly value of securities	1a						
b	Average monthly cash balances	1b						
c	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other		*					
	factors (explain in detail in Part VI).							
_2	Acquisition indebtedness applicable to non-exempt-use assets	2						
_3_	Subtract line 2 from line 1d	3						
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,							
	see instructions)	4						
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 035	6						
_7_	Recoveries of prior-year distributions	7						
_8_	Minimum Asset Amount (add line 7 to line 6)	8						
Sect	ion C - Distributable Amount			Current Year				
_1_	Adjusted net income for prior year (from Section A, line 8, Column A)	1	?*^	,				
2	Enter 85% of line 1	2						
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3						
4	Enter greater of line 2 or line 3	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to							
	emergency temporary reduction (see instructions)	6	<u>'</u>					
7	Check here if the current year is the organization's first as a non-functionally	y∙ıntegr	ated Type III supporting org	anızatıon (see				
	instructions)							

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014

d Excess from 2013 e Excess from 2014

Schedule A	(Form 990 or 990-EZ) 2014 SPIRIT OF AMERICA WORLDWIDE	20-1687786 Page 8
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10, Part II, line 17a of Also complete this part for any additional information (See instructions)	or 17b, and Part III, line 12
	······································	
-		<u> </u>
		· · · · · · · · · · · · · · · · · · ·
•		<del></del>

## SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

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/torm990.

Open to Public Inspection

Name of the organization

SPIRIT OF AMERICA WORLDWIDE

Employer identification number 20-1687786

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the								
	organization answered "Yes" to Form 990, Part IV, line	e 6									
		(a) Donor advised funds	(b) Funds and other accounts								
1	Total number at end of year										
2	Aggregate value of contributions to (during year)										
3	Aggregate value of grants from (during year)										
4	Aggregate value at end of year										
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	ised funds								
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No								
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only								
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring								
	impermissible private benefit?										
Pai	Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7										
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	-								
	Preservation of land for public use (e.g., recreation or e	education) Dreservation of a his	torically important land area								
	Protection of natural habitat	Preservation of a ce	rtified historic structure								
	Preservation of open space										
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	n of a conservation easement on the last								
	day of the tax year										
			Held at the End of the Tax Year								
а	Total number of conservation easements		2a								
b	Total acreage restricted by conservation easements		2b								
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c								
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	ture								
	listed in the National Register		2d								
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax								
	year ▶										
4	Number of states where property subject to conservation ea	sement is located >									
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	·								
	violations, and enforcement of the conservation easements	t holds?	└── Yes └── No								
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year								
7	Amount of expenses incurred in monitoring, inspecting, and	<del>-</del>									
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17									
	and section 170(h)(4)(B)(ii)?		└── Yes  └── No								
9	In Part XIII, describe how the organization reports conservation	ion easements in its revenue and expens	se statement, and balance sheet, and								
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's accounting for								
_	conservation easements	/ A . I I I I I I I I I I I I I I I I I I	Other O're Heart								
Pai	t III Organizations Maintaining Collections o		Jiner Similar Assets.								
	Complete if the organization answered "Yes" to Form										
1a	If the organization elected, as permitted under SFAS 116 (AS										
	historical treasures, or other similar assets held for public ex		ance of public service, provide, in Part XIII,								
	the text of the footnote to its financial statements that descri										
b	If the organization elected, as permitted under SFAS 116 (AS	•									
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic service, provide the following amounts								
	relating to these items										
	(i) Revenue included in Form 990, Part VIII, line 1		<b>S</b>								
	(ii) Assets included in Form 990, Part X		► \$ ► \$								
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi									
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items									
а	Revenue included in Form 990, Part VIII, line 1		<b>&gt;</b> \$								
b	Assets included in Form 990, Part X		▶ \$								

_		OF AMERICA				- 011	0'		87786	
Pai	t III Organizations Maintaining C									
3	Using the organization's acquisition, access	on, and other record	ds, checl	k any of the	following that	t are a s	ignifican	t use of its	collection	items
	(check all that apply)									
а	Public exhibition	c	; <u> </u>	Loan or exc	hange progra	ms				
b	Scholarly research	€	• 🗀 •	Other						
C	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	ın how th	ney further t	he organization	on's exe	mpt purp	oose in Par	t XIII	
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	sures, or othe	er sımıla	r assets	_	_	
	to be sold to raise funds rather than to be m	aintained as part of	the orga	nization's c	ollection?			<u> </u>	Yes	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa	·	ete if the	organizatio	on answered "	Yes" to	Form 99	0, Part IV, I	line 9, or	
1a	Is the organization an agent, trustee, custod on Form 990, Part X?	ian or other intermed	diary for	contribution	ns or other ass	sets not	ıncluded	i	Yes	□ No
h	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowina i	table						
-	Tree, explain the arrangement in traces.	and complete the re	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						Amount	
С	Beginning balance						1c	<del> </del>	7 47110 4711	
	Additions during the year						1d	1		
	Distributions during the year						1e	1		
f	Ending balance						1f	<u> </u>		
	Did the organization include an amount on F	orm 990 Part X line	21 for	escrow or c	ustodial accor	unt liahi		٠	Yes	L No
	If "Yes," explain the arrangement in Part XIII	· · · · · · · · · · · · · · · · · · ·						_		
Pai							0.		•	
L		(a) Current year		rior year	(c) Two years		<del></del>	years back	(e) Four v	years back
10	Beginning of year balance	(a) Current year	(5).	nor year	(6) 1110 ) 54	- Duun	(u)oo	Jouro Suom	(6) - 66. ]	yours buom
	Contributions				<b>†</b>	1				
b			<del> </del>			1			<del> </del>	
ں م	Net investment earnings, gains, and losses		-		<del> </del>					
d	Grants or scholarships			<del></del>						
е	Other expenditures for facilities									
	and programs		-							
	Administrative expenses					<u></u>				
9	End of year balance		<u> </u>		<u> </u>	<u> </u>			ŀ	
2	Provide the estimated percentage of the cur	rent year end baland		g, column (	a)) held as					
	Board designated or quasi-endowment		%							
	Permanent endowment	%								
C	Temporanly restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administer	red for t	he organ	lization		
	by									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization								3b	
4	Describe in Part XIII the intended uses of the		owment	funds						
Pai	t Ⅵ				_					
	Complete if the organization answere				1					
	Description of property	(a) Cost or o			t or other		ccumula		(d) Book	value
		basis (investi	ment)	basis	(other)	de	preciatio	n		
1a	Land									
b	Buildings									
С	Leasehold improvements				9,650.			21.		,629.
d	Equipment				3,893.		35,5			3,331.
е	Other			2	20,527.		6,2	204.		,323.
Total	. Add lines 1a through 1e. (Column (d) must e	egual Form 990. Part	X. colur	nn (B), line	10c)			ightharpoonup	28	3,283.

Schedule D (Form 990) 2014

Part VII Investments - Other Securities.				age •
Complete if the organization answered "Yes" to	o Form 990, Part IV	, line 11b See Form 990,	Part X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation Cost or end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)			<u> </u>	
(G)			· · · · · · · · · · · · · · · · · · ·	
(H)			· · ·	
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		61		
Part VIII Investments - Program Related.	. F		D. 17 1 40	
Complete if the organization answered "Yes" to	o Form 990, Part IV (b) Book value			d-of-year market value
	(b) Book value	(C) Welliod of V	aluation. Cost of ent	
(1)				
(2)	,,			
(3)				
(4)				
(5) (6)		<del></del>		
(7)				
(8)			·	
(9)				
Total. (Col. (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes" to	o Form 990, Part IV	, line 11d. See Form 990, I	Part X, line 15.	
· · · · · · · · · · · · · · · · · · ·	Description	· ·		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		<b>_</b>	
Part X Other Liabilities.				
Complete if the organization answered "Yes" to	o Form 990, Part IV		990, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) ACCRUED VACATION		9,665.		
(3) CREDIT CARD PAYABLE		22,592.	,	
(4) ACCRUED PAYROLL		7,508.		
(5) ACCRUED EXPENSES - OTHER		30,038.		
(6)				
(7)				
(8)				
(9)		" # 2 " 2 2 2 -		
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)	69,803.		

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.

#### 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.

OMB No 1545-0047 2014

▲ Attach to Form 990. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization

Employer identification number

SPIRIT OF AMERICA WORLDWIDE 20-1687786 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 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) (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total (a) Region employees, agents, and expenditures offices (by type) (e g, fundraising, program is a program service, for and services, investments, grants to describe specific type in the region independent investments recipients located in the region) of service(s) in region in region in region VETERINARY TRAINING & PROGRAM SERVICES FOR SUPPLIES TO IMPROVE HUMANITARIAN AID. LIVESTOCK HEALTH. 33,260. SUB-SAHARAN AFRICA VOCATIONAL AND AGRICULTURAL TRAINING, ROGRAM SERVICES FOR CLEAN WATER SYSTEMS, HUMANITARIAN AID. SUPPORT & SUPPLIES. 62,686. SOUTH ASIA BOOTS FOR IRAQI REFUGEES, SOLAR POWERED MIDDLE EAST AND PROGRAM SERVICES FOR RADIOS WARNING SIRENS NORTH AFRICA HUMANITARIAN AID. WOMEN'S CONFERENCES. 121,175. SCHOOL REPAIR, GAS STATION & REPAIR SHOP, PROGRAM SERVICES FOR WHEELCHAIR MANUFACTURING BUSINESS. HUMANITARIAN AID. SOUTH AMERICA 11,371. MEDICAL SUPPLIES, SCHOOL SUPPLIES CLOTHING. CENTRAL AMERICA AND PROGRAM SERVICES FOR SPORTS EQUIPMENT. THE CARIBBEAN 0 HUMANITARIAN AID. 12,718. BOOKS, MEDICAL SUPPLIES, EAST ASIA AND THE PROGRAM SERVICES FOR SEAWEED SOLAR DRYER, PACIFIC n HUMANITARIAN AID. BAKERY CO-OP TOOLS. 4,409. SECURITY CAMERAS POST-FLOOD SCHOOL PROGRAM SERVICES FOR REFURBISHMENT, FIRST AID EUROPE 0 HUMANITARIAN AID. KITS. 5,968. RUSSIA AND PROGRAM SERVICES FOR NEIGHBORING STATES HUMANITARIAN AID SCRUBS FOR DOCTORS. 584. 1 252,171. 3 a Sub-total b Total from continuation 0 Ο. sheets to Part I c Totals (add lines 3a

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

Schedule F (Form 990) 2014

252,171.

and 3b)

Schedule F (Form 990) 2014 SPIRIT OF AMERICA WORLDWIDE

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

(i) Method of valuation (book, FMV appraisal, other)						
(h) Description of non-cash assistance			ļ			
(g) Amount of non-cash assistance					:	xempt by
(f) Manner of cash disbursement		:				, recognized as tax-e
(e) Amount of cash grant						foreign country
(d) Purpose of grant						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
(c) Region						ns listed above that are in
(b) IRS code section and EIN (if applicable)				erio.	,	recipient organization the grantee or counse
1 (a) Name of organization		•		Aggré d des		2 Enter total number of the IRS, or for which t

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2014

20-1687786

Page 3

Schedule F (Form 990) 2014 SPIRIT OF AMERICA WORLDWIDE 20–1687786

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

(a) Type of grant or assistance (b) Region	(b) Region	(c) Number of recipients	(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)
VETERINARY TRAINING & SUPPLIES TO IMPROVE LIVESTOCK HEALTH.	SUB-SAHARAN AFRICA	43,500	0.		33,260.	TANGIBLE GOODS AND SUPPLIES FOR NEEDY PEOPLE.	PAIR MARKET VALUE
VOCATIONAL AND AGRICULTURAL TRAINING, CLEAN WATER SYSTEMS, SUPPORT & SUPPLIES.	SOUTH ASIA	44,750	0.		TANGIB ASSIST 62,686.PEOPLE	FANGIBLE GOODS AND ASSISTANCE FOR NEEDY PEOPLE.	FAIR MARKET VALUE
BOOTS FOR IRAQI REPUGEES, SOLAR POWERED RADIOS, WARNING SIRENS, WOMEN'S CONFERENCES.	MIDDLE EAST AND NORTH AFRICA	172,500	0		121,175.	TANGIBLE GOODS AND SUPPLIES FOR NEEDY PEOPLE.	FAIR MARKET VALUE
SCHOOL REPAIR, GAS STATION & REPAIR SHOP, WHEELCHAIR MANUFACTURING BUSINESS.	SOUTH AMERICA	1,000	0		11,371.	TANGIBLE GOODS AND SUPPLIES FOR NEEDY PEOPLE.	FAIR MARKET VALUE
OL ORTS	CENTRAL AMERICA AND THE CARIBBEAN	550	0		TANGIBI SUPPLIE 12,718.PEOPLE.	TANGIBLE GOODS AND SUPPLIES FOR NEEDY PEOPLE.	PAIR MARKET VALUE
DICAL SUPPLIES, OLAR DRYER, BAKERY LS.	EAST ASIA AND THE PACIFIC	1,250	0		4,409.	TANGIBLE GOODS AND SUPPLIES FOR NEEDY PEOPLE.	PAIR MARKET VALUE
SECURITY CAMERAS, POST-FLOOD SCHOOL REFURBISHMENT, FIRST AID KITS.	EUROPE	10,000	0		5,968.	TANGIBLE GOODS AND SUPPLIES FOR NEEDY PEOPLE.	FAIR MARKET VALUE
OR DOCTORS.	RUSSIA AND NEIGHBORING STATES	0	0.		584,	TANGIBLE GOODS AND SUPPLIES FOR NEEDY PEOPLE.	FAIR MARKET VALUE
						Schedi	Schedule F (Form 990) 2014

chec	lule F	(Form 990) 2014 SPIRIT OF AMERICA WORLDWIDE	20-1687786	Page 4
Par		Foreign Forms	<del>-</del> ·	
1	orga	s the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the anization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926)	Yes	X No
2	may Rec	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization is required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and eight of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	X No
3	the d	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To tain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	qual Info	s the organization a direct or indirect shareholder of a passive foreign investment company or a lified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, rmation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund Instructions for Form 8621)	☐ Yes	X No
5	the d	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain eign Partnerships (see Instructions for Form 8865)	☐ Yes	X No
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If s," the organization may be required to file Form 5713, International Boycott Report (see Instructions Form 5713, do not file with Form 990)	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

### PART I, LINE 2:

ACCOUNTABILITY IS A CRITICAL COMPONENT OF SPIRIT OF AMERICA'S FIELD OPERATIONS. PRIOR TO INITIATING ANY PROJECT, CONTROLS ARE PUT IN PLACE TO ENSURE THE ORGANIZATIONS FUNDS WILL BE USED FOR THE INTENDED PURPOSE. SOA DRAFTS AGREEMENTS/CONTRACTS OUTLINING THE NATURE OF THE PROPOSED RELATIONSHIPS AND OBTAINING DETAILED INVOICES FROM ANY VENDORS OR OTHER IMPLEMENTERS INVOLVED IN THE PROJECT.

METHODS OF MONITORING AND EVALUATION ARE ALSO CLEARLY ESTABLISHED PRIOR TO EMBARKING ON ANY INITIATIVES. IN MOST CASES, FINAL ASSESSMENTS OF THE PRODUCTS DELIVERED/SERVICES RENDERED/WORK COMPLETED IS CONDUCTED BY EITHER THE SOA REPRESENTATIVE OR THE US GOVERNMENT PERSONNEL (EITHER DEPARTMENT OF DEFENSE OR DEPARTMENT OF STATE) WITH WHOM SOA WORKS. IN INSTANCES WHERE THE SOA REPRESENTATIVE IS NOT PHYSICALLY PRESENT AT THE COMPLETION OF THE PROJECT, DETAILED DOCUMENTATION - PHOTOS, STATEMENTS, AND OTHER EVIDENCE - IS REQUESTED.

## PART III, COL (C):

SUPPORT WAS BASED ON THE NUMBER OF TANGIBLE GOODS, AND/OR TRAINING AND	
SUFFORT WAS DASED ON THE NUMBER OF TANGEDED GOODS, AND/OR TRAINING AND	
SERVICES PROVIDED.	

## SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No 1545-0047

**2014** 

Open To Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 ▶ Attach to Form 990.

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

990 Inspec

Name of the organization

SPIRIT OF AMERICA WORLDWIDE

Employer identification number 20-1687786

Check if   Check if	Par	t I Types of Property							
1 Art - Works of art 2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Publicity traded 2 Securities - Publicity traded 3 Securities - Publicity traded 3 Securities - Publicity traded 4 Securities - Publicity traded 5 Securities - Publicity traded 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Miscellaneous 1 Qualified conservation contribution - Other 1 Seal estate - Sesidential 1 Real estate - Publicity - Securities			Check If	Number of contributions or	Noncash contribution amounts reported on	Method of de		_	s
2 Art - Histoncal treasures 3 Art - Fractonal interests Books and publications 5 Clothing and household goods 6 Cars and other vehicles Boats and planes Intellectual property 9 Securities - Publicly traded 10 Securities - Publicly traded 11 Securities - Publicly traded 12 Securities - Publicly traded 13 Securities - Publicly traded 14 Securities - Publicly traded 15 Securities - Publicly traded 16 Securities - Publicly traded 17 Real estate - Consely held stock 18 Securities - Publicly traded 19 Securities - Publicly traded 10 Securities - Publicly traded 10 Securities - Publicly traded 11 Securities - Publicly traded 12 Securities - Publicly traded 13 Qualified conservation contribution - Histones structures 14 Qualified conservation contribution - Other 15 Real estate - Commercial 16 Real estate - Commercial 17 Real estate - Commercial 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Histonical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other  () )	1	Art · Works of art		ICANS CONTIDUCCO	Tom occ, t are vin, into 1g				
3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 1 Intellectual property 9 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Publicity traded 1 Securities - Publicity traded 2 Securities - Publicity traded 3 Securities - Publicity traded 3 Securities - Publicity traded 3 Securities - Publicity traded 3 Securities - Publicity traded 3 Securities - Publicity traded 4 Securities - Publicity traded 5 Securities - Publicity traded 7 Securities - Publicity traded 8 Securities - Publicity traded 9 Securities - Publicity traded 9 Securities - Publicity traded 9 Securities - Publicity traded 9 Securities - Miscellaneous 9 Qualified conservation contribution - Other 9 Heal estate - Residential 9 Real estate - Residential 9 Real estate - Commercial 9 Real estate - Commercial 9 Real estate - Commercial 9 Real estate - Other 9 Drugs and medical supplies 9 Taxidermy 9 Drugs and medical supplies 9 Taxidermy 9 Listorical artifacts 9 Secentific specimens 9 Archeological artifacts 9 Secentific specimens 9 Archeological artifacts 9 Secentific specimens 9 Secentific specimens 9 Other	-								
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trust interests  2 Securities - Miscellaneous  3 Qualified conservation contribution - Historic structures  4 Qualified conservation contribution - Other  5 Real estate - Residential  6 Real estate - Commercial  7 Real estate - Other  8 Collectibles  9 Food inventory  10 Drugs and medical supplies  11 Taxidermy  22 Historical artifacts  23 Scientific specimens  24 Archeological artifacts  25 Other  ( )  26 Other  ( )  27 Other  ( )  30 During the year, did the organization completed Form 8283, Part IV, Donee Acknowledgement  Yes  30 During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?  b If "Yes," describe the arrangement in Part II  10 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	10	Securities - Closely held stock							
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20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other  ( ) 26 Other  ( ) 27 Other  ( ) 28 Other  ( ) 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement  29 Ves  30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?  30a If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?									—
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Historical artifacts  Scientific specimens  Archeological artifacts  Other ► (		• • • • • • • • • • • • • • • • • • • •							
23 Scientific specimens 24 Archeological artifacts 25 Other  ( ) 26 Other  ( ) 27 Other  ( ) 28 Other  ( ) 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement  29 Yes  30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?  30a b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		· .							
24 Archeological artifacts 25 Other  ( ) 26 Other  ( ) 27 Other  ( ) 28 Other  ( ) 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement  29 Suring the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?  30a If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?									
25 Other		·							
27 Other Oth		.~				<u> </u>		-	
27 Other Oth		Other (							
28 Other ()  29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement  29  Yes  30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?  30a b If "Yes," describe the arrangement in Part II  31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  31 X  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?			<del></del>						
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During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?  b If "Yes," describe the arrangement in Part II  31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  31 X  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		for which the organization completed Form 828	33, Part IV, I	Donee Acknowled	gement 29				
must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?  b If "Yes," describe the arrangement in Part II  31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  31 X  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?								Yes	No
exempt purposes for the entire holding period?  b If "Yes," describe the arrangement in Part II  31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  31 X  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	30a	During the year, did the organization receive by	contribution	on any property rep	oorted in Part I, lines 1 throu	gh 28, that it			!
b If "Yes," describe the arrangement in Part II  31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  32a 32a		must hold for at least three years from the date	of the initia	al contribution, and	d which is not required to be	used for	!		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  31 X  32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  32a 32a		exempt purposes for the entire holding period?	<b>&gt;</b>				30a		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  32a 32a	b	If "Yes," describe the arrangement in Part II							
contributions?							31	X	<b></b>
	32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sell noncash	ľ			
b If "Yes," describe in Part II		contributions?					32a		X
		•							
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	33	If the organization did not report an amount in	column (c) f	or a type of prope	rty for which column (a) is ch	necked,			1
describe in Part II							<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

## **SCHEDULE 0** (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.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

SPIRIT OF AMERICA WORLDWIDE	20-1687786
FORM 990, PART VI, SECTION A, LINE 8B:	
THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES AT THIS TIME	ME.
FORM 990, PART VI, SECTION B, LINE 11:	
A CPA FIRM IS HIRED TO PREPARE THE FORM 990 AND THE FORM	990 IS FORWARDED
TO THE GOVERNING BODY BEFORE THE RETURN IS FILED.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE COMPANY PURCHASES STANDARD COMPENSATION SURVEYS. EMP	LOYEE OFFER LETTERS
ARE DRAFTED BASED ON STANDARD PRACTICES DETERMINED FROM	THIS INFORMATION.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	Y OF FORM 990:
CA, AL, AK, AZ, AR, CT, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ	, NM, NY, NC, OK, OR, PA
RI, SC, TN, UT, VA, WV, WI, WA, OH, MO, ME, CO, ND	
FORM 990, PART VI, SECTION C, LINE 19:	
ALL PERTINENT DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC	ON THE
ORGANIZATION'S WEBSITE, AN INTERNET SEARCH, OR UPON REQUI	EST BY INTERESTED
PARTIES.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
BOOK/TAX DIFFERENCE - DEPRECIATION	-3,207.
BOOK/TAX DIFFERENCE - GAIN/LOSS ON SALE OF VEHICLE	-1,461.
TOTAL TO FORM 990, PART XI, LINE 9	-4,668.



Spirit of America FEIN: 20-1687786

**STATEMENT A** 

Mission and Objectives

Spirit of America's mission is to support the safety and success of US troops and diplomats and the local people and partners they seek to help.

#### What We Do

In 2014 Spirit of America spent over \$258,000 on over 60 projects worldwide for humanitarian, civic, and economic assistance in direct response to needs identified by US troops and diplomats worldwide.

#### Afghanistan

The Fall of 2014 marked the end of Spirit of America's persistent presence in Afghanistan, but our field representatives continued to serve as key partners to US Special Operations Forces (SOF) working to stabilize some of the most challenging parts of the country. We increased the capacity of local governance structures by providing computers and radio station equipment, funding shura meals to facilitate dialogue, and supporting women's vocational programs. We supported small-scale development initiatives — veterinary and agricultural training programs, educational and vocational supplies, and water pumps — to improve the futures of local populations. We provided Afghan security forces winter clothing, radios, tourniquets, and other nonlethal equipment to help protect innocent civilians. And, we provided humanitarian assistance to address emergent needs, funding items such as winter clothing, medical supplies, and emergency food supplies.

## Kurdistan/Iraq

In the Kurdish region of northern Iraq, we worked with the US Agency for International Development (USAID) at the Consulate in Erbil to react to a key gap in the humanitarian crisis that followed ISIS' capture of Mosul. Spirit of America provided 40,000 pairs of boots to the most vulnerable young refugees in the region, giving them protection during the harsh winter months. In addition to addressing a critical unmet need, this project also helped strengthen relationships with key members within the Kurdish and refugee populations.

## Syria

We worked with the State Department's office in Turkey on their program to support independent Syrian media outlets. These stations, primarily focused on radio broadcasts, serve as honest brokers of information for the local population, providing information on impending attacks, commodities pricing, and other critical information. In addition, the staffs of these media platforms are envisioned as the foundation of Syrian civil society when the conflict eventually concludes. To support these efforts, we funded a longitudinal study of Syrian media consumption and preferences as well as 500 hand-cranked, solar-powered radios to one of the most successful stations.

## 4562 <sub>Form</sub>

Department of the Treasury Internal Revenue Service

Name(s) shown on return

## Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562

990 **201** 

Attachment Sequence No. 179

OMB No 1545-0172

dentifying number

#### 20-1687786 SPIRIT OF AMERICA WORLDWIDE FORM 990 PAGE 10 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 500,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (c) Elected cost (a) Description of property (b) Cost (business use only) 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 ▶ 13 Carryover of disallowed deduction to 2015 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 1,939. the tax year 14 15 15 Property subject to section 168(f)(1) election 6,245. 16 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property ) (See instructions ) Section A 3,143. 17 17 MACRS deductions for assets placed in service in tax years beginning before 2014 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and (d) Recovery (a) Classification of property (e) Convention (a) Depreciation deduction year placed 3-year property 19a 1,938. 5 YRS. 200DE 97. MQ ь 5-year property c 7-year property ч 10-year property 15-year property 20-year property 25-year property 25 yrs g 27 5 yrs мм S/L h Residential rental property мм S/L 27 5 yrs MM S/L 39 yrs Nonresidential real property ММ S/L Section C - Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs 40-year 40 yrs. ММ S/L Part IV | Summary (See instructions.) 21 21 Listed property. Enter amount from line 28

portion of the basis attributable to section 263A costs

23 For assets shown above and placed in service during the current year, enter the

22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21

Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr

11,424.

22

23

Form 4562 (2014) SPIRIT OF AMERICA WORLDWIDE 20-168	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for e	ntertainme	
recreation, or amusement )		
<b>Note:</b> For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, 24b, 24c, 25c, 24c, 25c, 24c, 25c, 24c, 25c, 25c, 26c, 26c, 26c, 26c, 26c, 26c, 26c, 26	24b, colun	nns (a)
Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles	)	
24a Do you have evidence to support the business/investment use claimed?	_ Yes _	No
(a) (b) (c) (d) (e) (f) (g) (h)		(i)
Type of property Date Business/ Cost or Basis for depreciation   Recovery   Method/   Depreciation	Elec sectio	
(list vehicles first)   placed in service   use percentage   other basis   (dusiness/investment use only)   period   Convention   deduction	CO	
25 Special depreciation allowance for qualified listed property placed in service during the tax year and		
used more than 50% in a qualified business use		
26 Property used more than 50% in a qualified business use	,	
%		
27 Property used 50% or less in a qualified business use	-1	
%   S/L ·	-	
%   S/L ·   S/L ·	-	
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1	-	
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1		
Section B - Information on Use of Vehicles	1	
Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provide	ed vehicles	S
to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicle		
(a) (b) (c) (d) (e)	(f	)
30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle	Veh	icle
year (do not include commuting miles)		
31 Total commuting miles driven during the year		
32 Total other personal (noncommuting) miles		
dnven	<u> </u>	
33 Total miles driven during the year		
Add lines 30 through 32	V	NI-
34 Was the vehicle available for personal use  Yes No Yes No Yes No Yes No Yes No	Yes	No
during off-duty hours?	<del>  </del>	
35 Was the vehicle used primarily by a more than 5% owner or related person?		
36 Is another vehicle available for personal	+ +	
use?		
Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees		
Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not	more than	5%
owners or related persons		
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	No
employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your		
employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners	ļ	
39 Do you treat all use of vehicles by employees as personal use?		_
40 Do you provide more than five vehicles to your employees, obtain information from your employees about		
the use of the vehicles, and retain the information received?	<u> </u>	-
41 Do you meet the requirements concerning qualified automobile demonstration use?	$\vdash$	<u></u>
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles	I	
Part VI   Amortization   (a) (b) (c) (d) (e)	(f)	
Description of costs Date amortization Amortizable Code Amortization	Amortization for this year	
begins amount section period or percentage 42 Amortization of costs that begins during your 2014 tax year	.,	

43

44

43 Amortization of costs that began before your 2014 tax year

44 Total. Add amounts in column (f) See the instructions for where to report

## Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

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

OMB No 1545-1709

• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		<u> </u>	$\Box$ X	
	are filing for an Additional (Not Automatic) 3-Month Ex			this form)	,		
	complete Part II unless you have already been granted				rm 8868		
Electron	nic filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of tin	ne to file (6	months for a corp	oration	
	to file Form 990-T), or an additional (not automatic) 3-mo						
· •	to file any of the forms listed in Part I or Part II with the ex						
Persona	al Benefit Contracts, which must be sent to the IRS in pag	er format	(see instructions) For more details of	on the elec	ctronic filing of this f	orm,	
	w irs gov/efile and click on e-file for Charities & Nonprofits		· · · · · · · · · · · · · · · · · · ·				
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded).			
A corpo	ration required to file Form 990-T and requesting an auto	matic 6-mo	onth extension - check this box and	complete			
Part I or	nly				<b>&gt;</b>		
All other	r corporations (including 1120-C filers), partnerships, REN	1ICs, and t	rusts must use Form 7004 to reques	t an exten	ision of time		
to file in	come tax returns			Enter file	er's identifying nun	nber	
Type or	Name of exempt organization or other filer, see instru	ictions		Employe	r identification numb	er (EIN) or	
print							
File by the							
due date for filing your return See	12021 WILSHIRE BLVD., NO.	Social security number (SSN)					
instruction	City, town or post office, state, and ZIP code For a foreign address, see instructions						
	LOS ANGELES, CA 90025						
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 1	
		1				T	
Applica	tion	Return	Application			Return	
Is For Code Is For Code  Service Code Is For Code Is F							
	00 or Form 990-EZ	01	Form 990-T (corporation)			07	
						08	
	/20 (individual)	03	Form 4720 (other than individual)			09	
Form 99		04	Form 5227			10	
	00-T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
Form 99	00-T (trust other than above)	O6	Form 8870 IT OF AMERICA WORL	<u>ידרו דער</u>		12	
• The !	pooks are in the care of > 12021 WILSHIRE					125	
	shone No ► 310 - 230 - 5476		Fax No ▶	MICHE	<u> </u>		
	organization does not have an office or place of busines	o in tha l li	•				
	s is for a Group Return, enter the organization's four digit			f this is fo	r the whole group, o	shack this	
box ▶	If it is for part of the group, check this box	_			• •		
	request an automatic 3-month (6 months for a corporation				era tric exterialorria	101	
•	4E 004E	•	tion return for the organization name		The extension		
is	for the organization's return for						
	X calendar year 2014 or						
•	tax year beginning	. an	nd ending				
_			<u> </u>		_		
2 If	the tax year entered in line 1 is for less than 12 months, o	check reas	on Initial return	Fınal retur	n		
L	Change in accounting period			<del>- 1</del>			
	this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			0.	
_	onrefundable credits. See instructions	) and	المراجع والمارات والم	3a	\$		
	this application is for Forms 990-PF, 990-T, 4720, or 6069			aL	•	0.	
_	stimated tax payments made. Include any prior year over			3b	\$		
	alance due. Subtract line 3b from line 3a Include your pa			3c	<b> </b> •	0.	
	If you are going to make an electronic funds withdrawal			_	L.¥ nd Form 8870.F∩ fo		
vaution	i. II you are going to make an electronic lunus withtitawal	i fairear ag	iony with this i only 0000, See FUITH C	TOULU di	IG I OITH OUT S'LO IC	a payment	