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Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2014 Open to Public Inspection

OMB No 1545-0047

Address change THE AMERICAN COMMITTEE FOR KEEP, IN	15	D Employ	er identification number
	ic	26.0	170010
Name change  Doing business as  Number and street (or P O box if mail is not delivered to street address)	Room/suite	36-2 E Telephoi	179818
Initial return 825 GREEN BAY ROAD, SUITE 122	rtoonbane		853-2501
Final return/ City or town, state or province, country, and ZIP or foreign postal code			
wilmetre IL 60091		G Gross re	ceipts\$ 499,048
Amended return F Name and address of principal officer	11/-> 10 1/->		subordinates Yes X No
Application pending STACY SAULS	H(a) is this a gro	up return for	
825 GREEN BAY ROAD	H(b) Are all sub		
WILMETTE IL 60091	If "No,"	attach a list	(see instructions)
Tax-exempt status   X 501(c)(3) 501(c) ( )   √ (insert no ) 4947(a)(1) or 527	_		
Website ► WWW.ACKEEP.ORG	H(c) Group exer		ber
	Year of formation 1	<u>950                                    </u>	M State of legal domicile II
Part I Summary			
Briefly describe the organization's mission or most significant activities			
TO SUPPORT KEEP IN JAPAN WITH FINANCIAL & TECHNICAL PROVIDE PROGRAMMING WITH GLOBAL IMPACT IN INTERNATION COMMUNITY DEVELOPMENT, AND ENVIRONMENTAL EDUCATION  Check this box In the organization discontinued its operations or disposed of more than Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)  Total number of individuals employed in calendar year 2014 (Part V, line 2a)  Total number of volunteers (estimate if necessary)			IVING TO
PROVIDE PROGRAMMING WITH GLOBAL IMPACT IN INTERNATION	NAL RELAȚ	ions,	
COMMUNITY DEVELOPMENT, AND ENVIRONMENTAL EDUCATION	•		
2 Check this box I if the organization discontinued its operations or disposed of more that	n 25% of its net	assets.	
3 Number of voting members of the governing body (Part VI, line 1a)		3	7
4 Number of independent voting members of the governing body (Part VI, line 1b)		4	7
5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	
	-	. 6	7
7a Total unrelated business revenue from Part VIII, column (C), line 12		. 7a	0
b Net unrelated business taxable income from Form 990-T, line 34		7b	0
9. Contributions and grants (Part VIII June 4 h.)	Prior Year		Current Year
8 Contributions and grants (Part VIII, line 1h)  9 Program service revenue (Part VIII, line 2g)  10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	21	,766	69,447
9 Program service revenue (Part VIII, line 2g)	240	007	240 600
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	240	,997	249,690
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.63	577	210 127
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A) (line 12)	263	,340	319,137
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)			<u>U</u>
14 Benefits paid to or for members (Part IX, column (A), line 4)	05	705	06 254
15 Salanes, other compensation, employee benefits (Part IX, column (A), lines 5–10)	95	,795	96,354
15 Salanes, other compensation, employee benefits (Part IX Column (A), lines 5–10) 16aProfessional fundraising fees (Part IX, column (A), line 11e)  b Total fundraising expenses (Part IX, column (D), line 25)  17. Other expenses (Part IX, column (A), lines 11e, 11d, 11d, 11d, 11d, 11d, 11d, 11d,	***		0
b Total fundraising expenses (Part IX, column (D), line 25)   14,111	100		444 444
17 Other expenses (Part IX, Column (A), lines 11a-11d, 111-24e)		,825	111,144
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		,620	
19 Revenue less expenses Subtract line 18 from line 12	Beginning of Curr	,720	111,639 End of Year
20 Total assets (Part X, line 16)	1,361		1,403,286
20 Total assets (Fart X, line 10)		,011	21,039
22 Net assets or fund balances Subtract line 21 from line 20	1,346		1,382,247
	1,340	,, 000	1,302,247
Part II Signature Rlock	ntoments and to t	ho host of	Fmy knowledge and belief
Part II Signature Block  Index repaires of person, I declare that I have examined this return, including accompanying schedules and st			inly knowledge and belief, in
Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and st		vledge	
			-(1-16
Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and st true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer.			-(1-16
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Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and st true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.	Date	Date	X of PTIN
Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and st true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer is ignature of officer.  Signature of officer  Signature of officer  Type or print name and title  Print/Type preparer's name  JEFFREY T. STUART  Firm's name  CJBS, LLC  2100 SANDERS RD/STE 200	Date 2	Date  Check self-en	X of PTIN pployed P00542652 36-3524803
Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and st true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.    Image: Complete Declaration of preparer (other than officer) is based on all information of which preparer.	Date 2	Date  Check self-en	<b>X</b>   if   PTIN   PTIN

Part III Statement of Program		INC 36-2179818	Page
	n Service Accomplishments ontains a response or note to any	v line in this Part III	X
1 Briefly describe the organization's mission TO'SUPPORT KEEP IN JA	on <sup>.</sup> APAN WITH FINANCIAL WITH GLOBAL IMPACT I	& TECHNICAL ASSISTANCE IN INTERNATIONAL RELATIONAL RELATIONAL	STRIVING TO
2 Did the organization undertake any signi prior Form 990 or 990-EZ? If "Yes," describe these new services on		which were not listed on the	Yes X No
3 Did the organization cease conducting, of services?	or make significant changes in how it con	nducts, any program	Yes X No
	rvice accomplishments for each of its thre (4) organizations are required to report th	ee largest program services, as measured by he amount of grants and allocations to others,	
	E IN MODEL PROGR <mark>AMM</mark> I	CIONAL OPPORTUNITIES FOR TO IMPROVE COMMUNIT	R YOUTH &
WITH ECONOMIC DEVELOR	PMENT FOR BOTH REGIO	of \$ ) (Revenue S CURAL AWARENESS AND APP ONS, WHILE FOSTERING HO CRS THROUGH EDUCATIONAL	RECIATION PE FOR YOUTH,
TULGAO PROJECT - OUTI		PINES FOR COMMUNITY BUI	
TULGAO PROJECT - OUT	REACH IN THE PHILIPP		
TULGAO PROJECT - OUTI	REACH IN THE PHILIPE , ENVIRONMENTAL AND	PINES FOR COMMUNITY BUI	

Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		1	
	candidates for public office? If "Yes," complete Schedule C, Part I	_3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
_	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_ 1		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	İ		
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or		l	••
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			32
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		I	
_	VII, VIII, IX, or X as applicable	1	ŧ	
а	9		<b></b>	
	complete Schedule D, Part VI	11a	X	
b	•			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			7.7
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	ا		v
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	, , , , , , , , , , , , , , , , , , , ,			
12-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		į	37
L	Schedule D, Parts XI and XII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	40.		v
13	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	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		
Ü	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	446		x
15		14b		
13	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	45		x
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		
		46		X
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	47		x
18	· · · · · · · · · · · · · · · · · · ·	17		
. 0	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.0		x
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
J	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4.0		v
20	If "Yes," complete Schedule G, Part III	19	-	$\frac{\mathbf{x}}{\mathbf{x}}$
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
ט	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	]	

Form 990 (2014) THE AMERICAN COMMITTEE FOR KEEP, INC 36-2179818 Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 X Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 23 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 X through 24d and complete Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? X If "Yes." complete Schedule L. Part i 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or X disqualified persons? If "Yes," complete Schedule L, Part II 26 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 27 X entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 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) X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X Schedule L, Part IV 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X conservation contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," X complete Schedule N, Part II 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R. Part I 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1 X 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable X related organization? If "Yes," complete Schedule R, Part V, line 2 36 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,

19? 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

X Form 990 (2014)

37

X

38

Part VI

ra	Check if Schoolule O contains a response or note to any line in this Bort V					
	Check if Schedule O contains a response or note to any line in this Part V		<del> </del>		V	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	42	2		Yes	No
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1a 1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and					
•	reportable gaming (gambling) winnings to prize winners?			1c	•	Ī
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1	10		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	x	Ī
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	•	х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	nority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	•				
	account)?			4a		x
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial According to the control of	ounts				
	(FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	į į	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	1?		5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			į į		
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or		•		
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			ļ ,		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	ds				
	and services provided to the payor?			7a	ļ	X_
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	<u></u>	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					l
	required to file Form 8282?		1	7c	<u> </u>	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	<u> </u>			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contr			7e	<u> </u>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f	-	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form		•	7g		<u> </u>
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		Form 1098-C?	7h		
•	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained to	by the			1	Ī
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.			8		
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a	Ì	Ī
b	Did the sponsoring organization make any taxable distributions under section 4500?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b	<del> </del>	<del>                                     </del>
10	Section 501(c)(7) organizations. Enter			30		_
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter	لتتن	<u>.                                    </u>			
а	Gross income from members or shareholders	11a	1			
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	041?		12a		
	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.				<u> </u>	<u> </u>
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					l
b	Enter the amount of reserves the organization is required to maintain by the states in which					<b>‡</b>
	the organization is licensed to issue qualified health plans	13b				I
С	Enter the amount of reserves on hand	13c			L	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	L	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14b	<u> </u>	<u></u>
DAA				Fo	m <b>99</b>	0 (2014)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 7 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a X X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 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 X 12a X Ь Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X 15a  $\overline{\mathbf{x}}$ Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records, JENNIFER TRAUTVETTER 825 GREEN BAY ROAD, SUITE 122, WILMETTE IL 60091 847-853-2501

Form 990 (2014) THE AMERI										Page <b>7</b>
Independent Co	ontractors						-		hest Compensated E	imployees, and
								o any line in this Part \		
-								Compensated Employees		
1a Complete this table for all persons organization's tax year.								·	•	
<ul> <li>List all of the organization's cur compensation Enter -0- in columns (I</li> </ul>									regardless of amount of	
List all of the organization's cur				•				• •	•	
<ul> <li>List the organization's five currently who received reportable compensation organization and any related organization</li> </ul>	n (Box 5 of Forn									
<ul> <li>List all of the organization's fori</li> <li>\$100,000 of reportable compensation</li> </ul>									received more than	
• List all of the organization's <b>for</b> organization, more than \$10,000 of re List persons in the following order and	portable compe	nsatı	on fr	om tl	ne or	ganı	zatio	n and any related organizati	ions	
compensated employees, and former		or all	ecio	115, II	เรเเน	iliona	ıı tru:	stees, officers, key employe	es, nignesi	
Check this box if neither the organ	nization nor any	relate	ed or	gani	zatio	n coi	mpei	nsated any current officer, d	lirector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	١		Pos	sition			Reportable	Reportable	Estimated
	hours per week					than o s both		compensation from	compensation from related	amount of other
	(list any	1		ınd a c	Irecto	r/truste	ee)	the	organizations	compensation
	hours for related	or d	Inst	Officer	Σ <sub>Θ</sub>	e He	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	rect vidua	T To	ĕ	em Em	loye	l e			and related
	below dotted line)	S	l a		Key employee	°§				organizations
	·	Individual trustee or director	Institutional trustee		°	Highest compensated employee				
(1) DOUGLAS WHITLOCK				╁	<del> </del>	<del> </del>	<b></b> -	<del></del>		
(,,====================================	1.00									
DIRECTOR	0.00	x			l			o	o	0
	MCPHEE	+			╁	1				
(1) 31212121 1211003031	1.00				1					
TREASURER	0.00	x		x				o	o	o
(3) REV. STACY SAULS		† <del></del>	<u> </u>	<del> </del>	$\vdash$	1				
(-,	1.00					ŀ				
PRESIDENT	0.00	x		x				l o	o	o
(4) TOYOHISA ASADA		+	<del>                                     </del>		$\vdash$	İ	<u> </u>	·		
(., = : = : : : : : : : : : : : : : : : :	1.00									
EXOFFICIO MEM PRESID	0.00	x				1	1	l o	o	O
(5) MIDORI CURTIS		1			T					
(0,	1.00						ł		}	
DIRECTOR	0.00	x						l o	o	O
(6) HERBERT A. DONOV		+			T					
(-,	1.00									
VICE PRESIDENT	0.00	X		x				l o	l o	O
(7) SUSAN HUBBARD		+		1		<u> </u>				
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.00									
SECRETARY	0.00	x		x	ļ			o	l o	0
(8) JENNIFER TRAUTVE		†		1		<u>†                                      </u>			<del></del>	
(*, * = = = = = = = = = = = = = = = = = =	40.00									
EXECUTIVE DIRECTOR	0.00			x		l.		80,954	o	8,325
(9)				<del> </del>	┢	<b>†</b> —	T	00/00-		
`,										
(10)			$\vdash$	$\vdash$	$\vdash$	-	-			
•						-				
(11)										

DAA

<u>Pa</u>	rt VII Section A. Officers	, Directors, Tru	stee	s, Ke	y Er	nplo	yees	, an	nd Highest Compensated	Employees (continued)		
	(A) Name and title	(B) Average hours per week (list any hours for	of	x, unle ficer a	Pos check ess pe nd a d	rson i Irecto	than o s both r/truste	an e)	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimate amount other compensa from the	of ation e
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organızat and relat organızatı	ed
(12)												
(13)										<del></del>		
(14)												
(15)						-						
(16)												
(17)												
(18)												
(19)								-				
1b	Sub-total							<b>•</b>	80,954			8,325
	Total from continuation she Total (add lines 1b and 1c)							<b>&gt;</b>	80,954			8,325
2 	Total number of individuals (increportable compensation from	cluding but not lin the organization	ited	to th	ose	liste	d abo	ve)	who received more than \$1	00,000 of	· · · · · · · · · · · · · · · · · · ·	Van I Na
3	Did the organization list any fo								ee, or highest compensated	ı		Yes No
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	1a, is the sum of	f rep	ortab	le co	mpe	ensat	ion a		m the	3	x
5	Individual  Did any person listed on line 1stor services rendered to the or	ganızatıon? If "Ye								dividual	5	X
Secti 1	on B. Independent Contracto Complete this table for your fiv	e highest comper										
	compensation from the organiz	(A) I business address	nper	isatio	on to	r the	cale	ndai		(B) tion of services	Con	(C)
												_
								_				
								_	<del></del>			
2	Total number of independent or received more than \$100,000	ontractors (included from the compensation f	ling l from	out n	ot lin organ	nited nizat	to th	ose	listed above) who	0		
DAA										<u></u>	Form	n <b>990</b> (2014)

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

ı uı	t V		of Schedule (		ains a r	esponse o	r note to any line ir	n this Part VIII		
	•						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated can	npaigns	1a						······································
틸		Membership di	=	1b					1	
E'S	С	Fundraising ev	ents	1c			<b>!</b>		I	
ii ii		Related organi		1d			1		Ī	
S, Eli	е	Government grants		1e			Į.		1	
<u>Pisi</u>	f	All other contribution	is, gifts, grants,				I I		1	
開産		and similar amounts		1f		69,447	1			
들의	g	Noncash contribution	ns included in lines 1a-	1f \$			•		1	
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add line	es 1a–1f	•		•	69,447			
Program Service Revenue						Busn. Code			#	
ē	2a									
8	b									
اڅ	С									
₩.	d									
ᇤ	е									<del></del>
<u>5</u>			am service rever	nue			<u> </u>			
<del>-</del> +	_9	Total. Add line								
	3		ome (including o	liviaena:	s, interes	ι,	36,010			36,010
	4	and other simil	•	ovomnt	hand are		36,010		-	30,010
	4		vestment of tax-	exemp	bona pro	ceeds				<del></del>
	5	Royalties	(ı) Real		/u\ E	Personal				
	6a	Gross rents	(i) i teai		(11)	ersonar	I			
	b	Less rental exps					I			
	c	Rental inc or (loss)		<u> </u>			1			
	d	Net rental inco	me or (loss)	<u></u> L		<b>•</b>	Ť		Ì	
		Gross amount from	(i) Secunties		(u)	Other				
		sales of assets other than inventory	·	,591	.,	<del></del>	1			
	b	Less cost or other		,	-		1			
		basis & sales exps	179	, 911		į	1			
	С	Gain or (loss)		, 680			[			
-	d	Net gain or (lo	ss)			<b>•</b>	213,680	213,680		
	8a	Gross income fro	om fundraising eve	nts [						
Other Revenue		(not including \$								
ě e		of contributions r	eported on line 1c)				I			
E		See Part IV, line	18	a						
美	b	Less direct ex	penses	ьL			1			
٦			(loss) from fund		events	<b>•</b>				
	9a		om gaming activitie	s			1			
		See Part IV, line		a						
		Less: direct ex		ь[			•			
			(loss) from gam	ing activ	rities					:
	10a		inventory, less				1			
		returns and all		. a			1			
		Less. cost of g		þ			<b>I</b>			
	с		(loss) from sale:	s of inve	ntory	Busn, Code				
}	11a	MIS	Conditions revenue			Duan, Code	1		1	:
	b								-	
	C					<del>  </del>		_	<del></del> -	
	d	All other reven	iue							·-
	e	Total. Add line				<b></b>				
	12	Total revenue	e. See instruction	าร		<b>&gt;</b>	319,137	213,680	0	36,010

## Part IX Statement of Functional Expenses

	tion 501(c)(3) and 501(c)(4) organizations must con		rganizations must complete	e column (A)	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				······································
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	ındıvıduals. See Part IV, line 22			<b>!</b>	
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			1	
	individuals See Part IV, lines 15 and 16		<u> </u>		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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	81,254	48,752	26,002	6,500
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	5,484	3,290	1,755	439
9	Other employee benefits	3,400	2,040	1,088	272
10	Payroll taxes	6,216	3,730	1,989	497
11	Fees for services (non-employees):				
а	- · · <b>3</b> · · · · · · · · · · · · · · · · · · ·				
b	· · · · · · · · · · · · · · · · · · ·				
С	- · · · · · · · · · · · · · · · · · · ·	10,815		10,815	· -
d	, , , , , , , , , , , , , , , , , , ,				
e	The state of the s	15 454		45 454	
f	Investment management fees	17,454		17,454	
g	Other (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	10 107		0 553	2 504
13	Office expenses	12,137		9,553	2,584
14	Information technology				
15 16	Royalties Occupancy	13,139		13,139	
17	Travel	45,263	11,122	31,754	2,387
18	Payments of travel or entertainment expenses	45,205		31,731	2,367
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		- "		
20	Interest				
21	Payments to affiliates	···			<del> </del>
22	Depreciation, depletion, and amortization	733		733	· · · · · · · · · · · · · · · · · · ·
23	Insurance	2,287		2,287	
24	Other expenses Itemize expenses not covered				······································
	above (List miscellaneous expenses in line 24e If	1			
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	TRANSLATING	3,050		3,050	
b	BANK CHARGES	2,773		2,773	
С	EQUIPMENT R&M	2,000		1,660	340
d	DUES&SUBSCRIPTIONS	1,125		33	1,092
е	All other expenses	368	280	88	
25	Total functional expenses. Add lines 1 through 24e	207,498	69,214	124,173	14,111
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 8,484 3,859 1 Cash--non-interest bearing Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 13,577 4 38,031 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 1,393 Prepaid expenses and deferred charges 1,496 9 10a Land, buildings, and equipment cost or 37,553 other basis. Complete Part VI of Schedule D 10a 35,685 873 1,868 b Less: accumulated depreciation 10b 10c 867,728 850,037 11 Investments—publicly traded securities 11 12 Investments—other securities See Part IV, line 11 468,185 12 506,755 13 Investments-program-related See Part IV, line 11 13 14 Intangible assets 14 1,439 1,240 15 Other assets See Part IV, line 11 15 1,361,679 1,403,286 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 15,011 21,039 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 15,011 21,039 Total liabilities. Add lines 17 through 25 26 X and Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 1,345,568 1,380,147 Unrestricted net assets 1,100 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 1,346,668 1,382,247 Total net assets or fund balances 33 1,361,679 1,403,286 Total liabilities and net assets/fund balances

Form 990 (2014)

Form	990 (2014) THE AMERICAN COMMITTEE FOR KEEP, INC 36-2179818			Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			137
2	Total expenses (must equal Part IX, column (A), line 25)	2	20	)7,	498
3	Revenue less expenses. Subtract line 2 from line 1	3	11	11,	639
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,34	16,	668
5	Net unrealized gains (losses) on investments	5	-7	76,	060
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	1,38	32,	<u> 247</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				_Ц_
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				l
	Schedule O				l
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			:	
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				ŧ
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in			:	1
	Schedule O.			:	ł
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			For	n 990	0 (2014)

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

**Public Charity Status and Public Support** 

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Employer identification number

			THE AMERICAN	COMMITTEE FOR I	KEEP,	INC	36-2179	9818	
P	art I	Reas	on for Public Charity	Status (All organizations i	must co	mplete t	his part.) See instructions	<b>.</b>	
The	orgar	nization is not	a private foundation because	it is. (For lines 1 through 11, che	ck only o	ne box )			
1		A church, coa	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(	<b>A</b> )(i).		
2		A school des	cribed in section 170(b)(1)(/	A)(ii). (Attach Schedule E )					
3		A hospital or	a cooperative hospital service	e organization described in <b>secti</b>	on 170(b	)(1)(A)(iii)	•		
4		A medical res	search organization operated	in conjunction with a hospital de-	scribed in	section 1	70(b)(1)(A)(iii). Enter the hospit	al's name,	
		city, and state	e						
5		An organizati	on operated for the benefit of	a college or university owned or	operated	by a gove	mmental unit described in		
			(b)(1)(A)(iv). (Complete Part		·	, ,			
6				vernmental unit described in sec	tion 170	(b)(1)(A)(v	١.		
7	П			ubstantial part of its support from					
	_		section 170(b)(1)(A)(vi). (Co		. a go		it of from the general pasie		
8				70(b)(1)(A)(vi). (Complete Part II	1				
9	Ħ			more than 33 1/3% of its suppor		ntrihiitions	membership fees, and gross		
Ī	Щ			ot functions—subject to certain e					
				d unrelated business taxable inco					
			=	, 1975. See section 509(a)(2).	•		r tax) from businesses		
10		-	=	xclusively to test for public safety	•	•	a)/4)		
11	X			xclusively for the benefit of, to pe				.f	
•				ons described in section 509(a)(					
				ribes the type of supporting organ				COR	
а	X			d, supervised, or controlled by its					
4	_			regularly appoint or elect a majo					
			You must complete Part IV		only of the	directors	or trustees or the supporting		
b		-	•	sed or controlled in connection w	uth ito our	norted are	anuzation(a) by baying		
•	ш					_			
			s) You must complete Part	organization vested in the same p	ersons in	iat control	or manage trie supported		
С	$\Box$	-	•			علممم طفيين			
٠	Ш			orting organization operated in co					
d	$\Box$			ons). You must complete Part					
u				supporting organization operated					
				inization generally must satisfy a		•	nent and an attentiveness		
				complete Part IV, Sections A a					
е				a written determination from the			e i, Type ii, Type iii		
f			of supported organizations	ctionally integrated supporting org	ganization	•			1
1			ring information about the sur	norted organization(s)				<u> </u>	1
<u>. a</u>		of supported			(int) to the	organization	(.) (	f. (1) A	
,		anization	(II) EIN	(iii) Type of organization (described on lines 1–9	1 ' '	ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see	
				above or IRC section		ment?	instructions)	instructions)	
				(see instructions))		N.			
A)	KE	EDTZ	PAN		Yes	No			
~,	111		99-9999999	0	x		69,214		0
B)	_		33 333333		<u>^</u>		09,214		
٥,									
C)					1			<del></del>	
٠,							1		
D)	_				<b> </b>			<del></del>	
υ,							1		
E)	-		-		<u> </u>		-		
-,									
			-		<u> </u>		_	·	
ota	ıl				1		69,214		0
				-	***************************************				

Schedule A (Form 990 or 990-EZ) 2014 THE AMERICAN COMMITTEE FOR KEEP, INC 36-2179818 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.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its hehalf

	to or experience of its belian		<u> </u>	<del>                                     </del>			$\longrightarrow$		
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3						$\Box$		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4								
Sec	tion B. Total Support		•	•					
Caler	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	.	(f) Total	<del></del>
7	Amounts from line 4				•				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)								
11	Total support. Add lines 7 through 10		<u> </u>						
12	Gross receipts from related activities, etc. (	•				Ļ	12		
13	First five years. If the Form 990 is for the		second, third, four	th, or fifth tax year a	as a section 501(c)	(3)			
	organization, check this box and stop here								
	tion C. Computation of Public Su								
14	Public support percentage for 2014 (line 6,	• • • • • • • • • • • • • • • • • • • •	•	(f))		-	14		<u>%</u>
15	Public support percentage from 2013 Sche	•				L	15		<u>%</u>
16a	33 1/3% support test—2014. If the organi				1/3% or more, che	ck this		ſ	
	box and <b>stop here</b> . The organization qualif	• •			00 4/00/			J	
Ь	33 1/3% support test—2013. If the organic			· ·	is 33 1/3% or more	•		ı	
172	check this box and stop here. The organiz 10%-facts-and-circumstances test—201	•		•	or 16h and line 1	1 is		•	
	10% or more, and if the organization meets								
	Part VI how the organization meets the "factorganization		•		•			ľ	▶ □
b	10%-facts-and-circumstances test—201	3. If the organization	on did not check a	box on line 13, 16a	, 16b, or 17a, and I	ine			
	15 is 10% or more, and if the organization r	neets the "facts-an	d-circumstances" t	est, check this box	and stop here.				
	Explain in Part VI how the organization mee	ets the "facts-and-c	rcumstances" test	. The organization	qualifies as a public	:ly			
	supported organization			-	•			,	▶ □
18	<b>Private foundation.</b> If the organization did instructions	not check a box or	n line 13, 16a, 16b,	17a, or 17b, check	this box and see			ı	_ ▶ []

Part # 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.)

Sec	tion A. Public Support	quality arraor to	THE REGION OF THE PARTY OF THE	perevi, predec e	ompioto i dit ili	.,	
Cale	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
800	line 6 ) tion B. Total Support		<u> </u>				
	idar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(a) 2012	(4) 2012	(a) 2014	/f) Total
9	Amounts from line 6	(a) 2010	(6) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
10a	Gross income from interest, dividends,						
IVa	payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	:					
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	-	second, third, four	th, or fifth tax year a	s a section 501(c)	(3)	<b>▶</b> □
Sec	tion C. Computation of Public Su	pport Percent	tage				
15	Public support percentage for 2014 (line 8,	column (f) divided	by line 13, column	(f))		15	%
<u>16</u>	Public support percentage from 2013 Sche					16	%
	tion D. Computation of Investme					1 1	
17	Investment income percentage for 2014 (Iii		=	column (f))		17	%_
18 100	Investment income percentage from 2013	· ·	•	44		<u> 18  </u>	%_
19a	33 1/3% support tests—2014. If the organ						
b	17 is not more than 33 1/3%, check this bo. 33 1/3% support tests—2013. If the organ	-	•	• •			
~	line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did		-				<b>•</b>

#### 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. A	II Supporting	<b>Organizations</b>
--------------	---------------	----------------------

- 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).
- 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.
- 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.
- 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 **Part VI**, 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?
- 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)
- B 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**.
- 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	x	
2	х	
20		x
3a		
3b		
3с		
4a	х	
4b	X	
4c	X	
5a		X
5b		
5c		
6		Х
7		_ X
8		x
9a		х
9b		x
		х
9c		_ A
10a		X
10b		<u> </u>

	tule A (Form 990 or 990-EZ) 2014 THE AMERICAN COMMITTEE FOR KEEP, INC 36-217981	.8		Page 5
Pai	rt IV Supporting Organizations (continued)	1	Yes	N <sub>a</sub>
11	Has the organization accepted a gift or contribution from any of the following persons?		res	No
_	below, the governing body of a supported organization?	11a		х
b		11b		X
	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		X
	ion B. Type I Supporting Organizations	,		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	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		X
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 Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<del></del>	supervised, or controlled the supporting organization.	2		X
Sect	ion C. Type II Supporting Organizations			<del></del>
			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			İ
Sect	the supported organization(s). ion D. All Type III Supporting Organizations			L
	ion 217th Type in 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			110
	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		<u> </u>
	ion 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):			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	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 instructions	5)		
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		100	1
-	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	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			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		<u> </u>
	Schedule A (For	m 990	or 990_	F7\ 201

Schedule A (Form 990 or 990-EZ) 2014 THE AMERICAN COMMITTEE FOR I	KEEP	,INC 36-2179	818 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizati	ions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 2	0, 1970	). See instructions. All	
other Type III non-functionally integrated supporting organizations must complete Sections	A throu	gh E	
Section 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		_
Section B - Minimum Asset Amount		(A) Pnor Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):		•	
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		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI);	<u> </u>		
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		
Section 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		
7 Check here if the suggest year is the exposuration's first on a new functionally interested Time	a III au	nanting organization (see	

Schedule A (Form 990 or 990-EZ) 2014

instructions)

Schedule A (Form 990 or 990-EZ) 2014 THE AMERICAN COMMITTEE FOR KEEP, INC 36-2179818 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions 9 Distributable amount for 2014 from Section C, line 6 Line 8 amount divided by Line 9 amount (i) (ii) (iii) Section E - Distribution Allocations (see instructions) Underdistributions **Excess Distributions** Distributable Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014: а C e From 2013. f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f Distributions for 2014 from Section D, line 7 a Applied to underdistributions of prior years **b** Applied to 2014 distributable amount c Remainder Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2015. Add lines 3 and 4c. Breakdown of line 7:

Schedule A (Form 990 or 990-EZ) 2014

b

d Excess from 2013 . .e Excess from 2014 .

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

PART IV, LINE 2 - DETERMINE SECTION 509(A)(1) OR (2)

THE JAPANESE ORGANIZATION KIYOSATO EDUCATIONAL EXPERIMENT PROJECT

("K.E.E.P.") BUILDS BRIDGES OF UNDERSTANDING BETWEEN PEOPLES THROUGH

EDUCATIONAL, ENVIRONMENTAL, AND OUTREACH PROGRAMS. K.E.E.P. IS ORGANIZED

FOR CHARITABLE AND EDUCATIONAL PURPOSES.

PART IV, LINE 4B - CONTROLS WITH FOREIGN SUPPORTED ORGANIZATIONS

THE PRESIDENT OF KIYOSATO EDUCATIONAL EXPERIMENT PROJECT IN JAPAN (KEEP)'S

BOARD OF DIRECTORS SERVES AS AN EX OFFICIO MEMBER OF THE BOARD, WITH FULL

VOICE AND VOTE, NOT SUBJECT TO ROTATION OR REELECTION. NO OTHER COMMON

BOARD MEMBERS.

NO GRANTS IN CURRENT YEAR.

PART IV, LINE 4C - COMPLIANCE TO 170(C)(2)(B) FOR FOREIGN ORGANIZATIONS MONITOR HOW GRANTS ARE SPENT. THERE WERE NO GRANTS IN CURRENT YEAR.

PART IV, SECTION B, LINE 1 - SUPPORTED ORGANIZATIONS NOT LISTED BY NAME
THE PRESIDENT OF KIYOSATO EDUCATIONAL EXPERIMENT PROJECT IN JAPAN (KEEP)'S
BOARD OF DIRECTORS SERVES AS AN EX OFFICIO MEMBER OF THE BOARD, WITH FULL
VOICE AND VOTE, NOT SUBJECT TO ROTATION OR REELECTION. NO OTHER COMMON
BOARD MEMBERS.

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

T	HE AMERICAN COMMITTEE FOR KEEP, INC		36-23	179818
Pa	organizations Maintaining Donor Advised Fur		counts	
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 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			<u> </u>
5	Did the organization inform all donors and donor advisors in writing that the	he assets held in donor advised		
	funds are the organization's property, subject to the organization's exclus	sive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in w	riting that grant funds can be used		
	only for charitable purposes and not for the benefit of the donor or donor	advisor, or for any other purpose		
	conferring impermissible private benefit?			Yes No
Pa	Conservation Easements. Complete if the organization answered "Yes" to F	orm 990. Part IV. line 7.		
1	Purpose(s) of conservation easements held by the organization (check al			
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically importa	ant land a	ırea
	Protection of natural habitat	Preservation of a certified historic st		
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conserva	ation contribution in the form of a conservatio	n	
	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 structure include	ded in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	• •		
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, extin	nguished, or terminated by the organization d	uring the	
	tax year ▶		•	
4	Number of states where property subject to conservation easement is loc	cated >		
5	Does the organization have a written policy regarding the periodic monito			
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	ig conservation easements during the year		
	<b>&gt;</b>			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing con	nservation easements during the year		
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section 170(h)(4)(B)(i)		
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation easemen			
	balance sheet, and include, if applicable, the text of the footnote to the or	ganization's financial statements that describ	es the	
_	organization's accounting for conservation easements.			
Pa	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to F		milar A	ssets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not	•	re sheet	
	works of art, historical treasures, or other similar assets held for public ex	•		
	public service, provide, in Part XIII, the text of the footnote to its financial			
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to re-		heet	
-	works of art, historical treasures, or other similar assets held for public ex			
	public service, provide the following amounts relating to these items:	,		
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		•	\$
2	If the organization received or held works of art, historical treasures, or of	ther similar assets for financial dain, provide	the	₹
_	following amounts required to be reported under SFAS 116 (ASC 958) re			
а	Revenue included in Form 990, Part VIII, line 1	and the state of t	•	\$
	Assets included in Form 990. Part X		•	\$

<u>Scne</u>	dule D (Form 990) 2014 I DE AMER	ICAN COMMIT	ILL FOR REE	P, INC	30-2	T / 30TO			Pag	<u>e ∠</u>
Pa	ert III Organizations Maintainin	g Collections of	Art, Historical Tre	easures, c	r Other	Similar Asse	ets (contir	iued)	_	
3	Using the organization's acquisition, accessic collection items (check all that apply)	on, and other records,	check any of the follow	ing that are a	significant	t use of its				
а	Public exhibition	d $\square$	Loan or exchange prog	ırams						
b	Scholarly research	<del></del>	Other	,						
c	Preservation for future generations	ب -								
4	Provide a description of the organization's co	illections and evoluin h	now they further the ora	anization'e ev	emnt nurn	ose in Part				
•	XIII	incoloris and explain in	iow they lattice the org	amzadon 3 ez	criipt purp	ose iiii ait				
e		dtf	aut 16.242-2214-222		.1					
5	During the year, did the organization solicit o				liar			f	$\neg$	
	assets to be sold to raise funds rather than to		t of the organization's o	collection?				Yes		No
Pa	ert IV Escrow and Custodial Ar							_		
	Complete if the organizatio	n answered "Yes"	to Form 990, Par	10, line $9$ ,	or repo	rted an amou	nt on Forn	n		
	990, Part X, line 21.					<u></u>				
1a	Is the organization an agent, trustee, custodi	an or other intermedia	ry for contributions or o	ther assets n	ot			,		
	ıncluded on Form 990, Part X?							Yes		Νo
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	wing table							
							Amo	unt		
С	Beginning balance					1c				
d	Additions during the year					1d				_
	Distributions during the year					1e				_
f	Ending balance					1f				_
22	Did the organization include an amount on Fe	orm 000 Bort V line 2	1 for accrow or auctod	ial account li	shilibi/2			Yes	$\neg$	— No
					-		لــا	163	_	140
	If "Yes," explain the arrangement in Part XIII  If "Yes," explain the arrangem	Check here it the exp	ianation has been prov	ided in Part A	JII					
Fø				N	`					
	Complete if the organizatio			1			<del></del>			
	-	(a) Current year	(b) Pnor year	(c) Two yea	irs back	(d) Three years b	ack (e) F	our year	rs bac	.k
1a	Beginning of year balance			ļ		•				
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end halance	(line 10, column (a)) he	ly as.						
a	Board designated or quasi-endowment	%	(iiiio 1g, oolaliiii (a)) lio							
b		70								
-	Temporarily restricted endowment	0/								
C	• •	%								
	The percentages in lines 2a, 2b, and 2c shou	•								
3a	Are there endowment funds not in the posse	ssion of the organization	on that are held and ad	ministered to	r the				Τ.	
	organization by						_	Ye	S	No
	(i) unrelated organizations						3a(		4	
	(ii) related organizations						3a(	<u>ii)</u>	4.	
b	If "Yes" to 3a(II), are the related organizations	s listed as required on	Schedule R?				3t	<u>,                                     </u>		
4	Describe in Part XIII the intended uses of the	organization's endow	ment funds							
Pa	rt VI Land, Buildings, and Equ	ipment.								
	Complete if the organizatio	n answered "Yes"	to Form 990, Par	t IV, line 1	1a. See	Form 990, Pa	art X, line	10.		
	Description of property	(a) Cost or other t				Accumulated		ook value	•	
		(investment)	(oth	er)	de	epreciation				
12	Land									_
	Buildings						<del></del>			_
							<del>                                     </del>			
_ _	Leasehold improvements			37,553		35,685	<del>                                     </del>		, 8	60
	Equipment		<u> </u>	<i>., </i>		33,863			, 0	<u> </u>
	Other		( ashum (B) 1 : 40 : 1	<u> </u>			<del> </del>		-	60
ota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part >	k, column (B), line 10c.	)		<u> </u>			, 8	00

	form 990) 2014 THE AMERICAN COMMITTEE	FOR KEEP, INC	36-2179818	Page
Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" to Fo	orm 990, Part IV, line	11b. See Form 990, Pa	art X, line 12.
•	(a) Description of security or category	(b) Book value	(c) Method of	
	(including name of security)		Cost or end-of-year	ar market value
(1) Financial				<del></del>
	eld equity interests	0.61 0.40	1.00	
	COMMON STOCK	261,942		
1 7	TUAL FUNDS	244,813	MARKET	
(B)				
(C)				
(D)				
(E)				
(F)				
(G) (H)				
	n (b) must equal Form 990, Part X, col. (B) line 12 ) ▶	506,755		
Part VIII	Investments—Program Related.	300,733		
* DIE VIII	Complete if the organization answered "Yes" to Fo	orm 000 Part IV line	11c See Form 990 Pa	ert Y line 13
	(a) Description of investment	(b) Book value	(c) Method o	
	(a) Description of investment	(b) book value	Cost or end-of-ye	
(1)				
(2)				· · · · · · · · · · · · · · · · · · ·
(3)				
(4)				
(5)			<del></del>	
(6)				
(7)				
(8)				
(9)	<u>.                                    </u>			
	n (b) must equal Form 990, Part X, col (B) line 13.) ▶			<u> </u>
Part IX	Other Assets.			
	Complete if the organization answered "Yes" to Fo	orm 990, Part IV, line	11d. See Form 990, Pa	art X, line 15
	(a) Description			(b) Book value
(1)		<del></del>		
(2)				
(3)				
(4)		<del>.</del>		-
(5) (6)				
(7)				
(8)				
(9)	<u> </u>			
	n (b) must equal Form 990, Part X, col. (B) line 15 )		<b>•</b>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" to Fe line 25.	orm 990, Part IV, line	11e or 11f. See Form 9	990, Part X,
1.	(a) Description of liability	(b) Book value		
	income taxes	(a) con raise		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ▶ 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

2d

4a

4b

2e 3

4c

5

Part XIII Supplemental Information.

4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b

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

d Other (Describe in Part XIII )

Subtract line 2e from line 1

b Other (Describe in Part XIII.)

c Add lines 4a and 4b

e Add lines 2a through 2d

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

#### PART X - FIN 48 FOOTNOTE

AS OF MARCH 31, 2015, THE ORGANIZATION DID NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT IT IS OBLIGATED TO DISCLOSE IN ACCORDANCE WITH FASB ASC 740, INCOME TAXES. ADDITIONALLY, THERE WERE NO RETURNS OPEN TO REVIEW OR UNDER REVIEW BY TAXING AUTHORITIES IN EXCESS OF ANNUAL STATUTORY PERIODS. THE ORGANIZATION FOLLOWS A CONSERVATIVE APPROACH OF RESEARCH AND OPEN DISCLOSURE IN REGARD TO ITS TAX-EXEMPT STATUS AND POSITIONS HELD. THE ORGANIZATION FILES FORMS 990 IN THE U.S. FEDERAL JURISDICTION AND THE STATE OF ILLINOIS. THE ORGANIZATION IS GENERALLY NO LONGER SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR YEARS BEFORE 2012.

Part XIII Supplemental Information (continued)

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

Supplemental Information to Form 990 or 990-EZ

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

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Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

THE AMERICAN COMMITTEE FOR KEEP, INC

Employer identification number 36-2179818

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

BRIAN KANE FELLOWSHIP - AWARDED TO AN INDIVIDUAL WHO WILL BEST PROMOTE

KEEP'S IDEAL OF BUILDING CROSS-CULTURAL UNDERSTANDING BY SERVICE TO OTHERS

THROUGH INTERNATIONAL EXCHANGE AND EDUCATION PROGRAMS

CONVENTION - CONVENTION BUILDS CROSS-CULTURAL UNDERSTANDING AND PROMOTES

KEEP'S WORK IN COMMUNITY DEVELOPMENT AND ENVIRONMENTAL EDUCATION WITHIN THE

EPISCOPAL CHURCH AND RELATED ORGANIZATIONS

KEEP FOR THE FUTURE - A CAPITAL CAMPAIGN TO ENSURE THE FUTURE OF KEEP'S

ABILITY TO PROVIDE QUALITY PROGRAMMING

PAUL RUSCH FUND AT RIKKYO UNIVERSITY - SCHOLARSHIP PROGRAM

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE RETURN IS REVIEWED BY THE EXECUTIVE DIRECTOR, THE PRESIDENT, THE
TREASURER, AND THE BOARD OF DIRECTORS.

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

THE EXECUTIVE DIRECTOR DISTRIBUTES THE POLICY ANNUALLY FOR REVIEW AT THE

BOARD MEETINGS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE PRESIDENT AND THE EXECUTIVE DIRECTOR WORK TOGETHER WORK TOGETHER TO

PREPARE A PRESENTATION. THE PRESENTATION IS GIVEN AT A BOARD MEETING WHILE

THE EXECUTIVE DIRECTOR IS NOT PRESENT, AND COMPENSATION FOR THE EXECUTIVE

DIRECTOR IS AGREED UPON BY THE REST OF THE BOARD.

Name of the organization

THE AMERICAN COMMITTEE FOR KEEP, INC

Employer identification number

36-2179818

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION ALL DOCUMENTS ARE AVAILABLE UPON REQUEST.

Schedule R (Form 990) 2014 Section 512(b)(13)
controlled entity?
Yes N-Open to Public inspection 2014 OMB No 1545-0047 Direct controlling **Employer identification number** entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. 36-2179818 (f) Direct controlling entity (e) End-of-year assets N/A (e)
Public chanty status
(if section 501(c)(3)) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. <u>\_</u> ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. (d) Total income Related Organizations and Unrelated Partnerships (d) Exempt Code section 501C3 (c) Legal domicile (state or foreign country) (c)
Legal domicile (state
or foreign country) J. ▶ Attach to Form 990. (b) Primary activity (b) Primary activity PART VII THE AMERICAN COMMITTEE FOR KEEP, INC For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA (a)
Name, address, and EIN (if applicable) of disregarded entity 3545 KIYOSATO TAKANE-CHO, HOKUTO-SH 407-0301 (a)
Name, address, and EIN of related organization YAMANASHI Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R (Form 990) KEEP P Part III Part Ξ Ξ (4) <u>2</u> ල **₹** (2) 3 ල (2)

×

Page 💈 Schedule R (Form 990) 2014 (k) Percentage ownership (i) Section 512(b)(13) controlled entity? Yes (J) , General or managing partner? Yes No Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Percentage ownership Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) end-of-year assets Share of (h)
Disproportionate
alloc ? Yes No **(B**) (g) Share of end-ofyear assets Share of total (f) Share of total Type of entity (C corp, S corp, (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (d)
Direct controlling Schedule R (Form 990) 2014 THE AMERICAN COMMITTEE FOR KEEP, INC 36-2179818 (d) Direct controlling (c) Legal domicile foreign country) (state or (c) Legal domicile (state or foreign country) Primary activity Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV Part # ĕ

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<u>|</u>ල

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Page 3

Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Note Complete line 1 if any entity is listed in Parts II. III or IV of this schedule					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ited organizations listed II	n Parts II–IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				4		×
c Giff grant or capital contribution from related prognization(s)				10		×
				7		×
<ul> <li>Loans or loan guarantees by related organization(s)</li> </ul>				e L	T	4
				·. ;		Þ
f Dividends from related organization(s)				=		4
g Sale of assets to related organization(s)				1g		×
h Purchase of assets from related organization(s)				4		×
i Exchange of assets with related organization(s)				÷		×
i Lease of facilities, equipment or other assets to related organization(s)				=		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
<ol> <li>Performance of services or membership or fundraising solicitations for related organization(s)</li> </ol>				=	×	
m Performance of services or membership or fundraising solicitations by related organization(s)				Ę		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				두		×
o Sharing of paid employees with related organization(s)				9		×
<b>p</b> Rembursement paid to related organization(s) for expenses				5		×
				10	×	
ל יוכוווסמיספוויפור לסומיס כן פמוכס כן פמוכס כן פמוכס כן פמוכס כן						
r Other transfer of cash or property to related organization(s)				+		×
s Other transfer of cash or property from related organization(s)				1s	7	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	line, including covered re	elationships and transacti	on thresholds.			
(a)	(q)	(9)	(p)			
Name of related organization	Transaction type (a–s)	Amount involved	Method of determining amount involved	ount involved	g	
(1)						
(2)						
(3)						
(4)						
(5)						
(9)						
			Schedule R (Form 990) 2014	R (Form	) 990)	2014

Page 4

Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

**Schedule R (Form 990) 2014** (k) Percentage ownership ŝ General or тападіпд partner? Yes amount in box 20 of Schedule K-1 Code V-UBI (Form 1065) (h) Disproportionate allocations? ŝ Yes (g)
Share of
end-of-year
assets total income (f) Share of (e) Are all partners organizations? Yes No section 501(c)(3) from tax under sections 512-514) unrelated, excluded (d) Predominant income (related, (c) Legal domicile (state or foreign country) (b) Primary activity Name, address, and EIN of entity (E) Ξ <u>4</u> 9 (2) ල 9 9 3 8 6)

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

SCHEDULE R - ADDITIONAL INFORMATION

PART II, LINE 1 (B) PRIMARY ACTIVITY

TO BUILD BRIDGES OF UNDERSTANDING BETWEEN PEOPLE THROUGH EDUCATIONAL,

ENVIRONMENTAL, AND OUTREACH PROGRAMS.