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Form **990-PF**

EXTENDED TO NOVEMBER 15 2016 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Department of the rewury Internal Revenue Service For calendar year 2015 or tax year beginning and ending Name of foundation A Employer identification number **HUNT ALTERNATIVES** 04-3397500 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 625 MT AUBURN ST. 205 (617) 995-1900 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CAMBRIDGE, MA 02138 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E. If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: Cash X Accrual If the foundation is in a 60-month termination, Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 1,083,034. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome 13,339,253. Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B 2 Interest on savings and temporary cash investments 178. 178.STATEMENT 178. 4 Dividends and interest from securities 5a Gross rents h Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 RECEIVED b Gross sales price for all assets on line 6a 0. Capital gain net income (from Part IV, line 2) 935 NOV 2 3 2016 0. 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances DGDEN. UT b Less Cost of goods sold c Gross profit or (loss) 12.918.STATEMENT 11 Other income 12.918 Ο. Total Add lines 1 through 11 13 352,349 178 13,096. 12 152,182. 0. 0. <u> 157,446.</u> 13 Compensation of officers, directors, trustees, etc. 3,392,207 0. 3,33<u>0</u>,552. 0 Other employee salaries and wages 14 SCHWED <u>686,315.</u> 0. 0. 686,856. 15 Pension plans, employee benefits 24,042 0. 24,342. STMT 3 0. 16a Legal fees 4 **b** Accounting fees STMT 18,914. 0. 0. 1<u>8,414.</u> 5 STMT 4,790,116. 0. 0. 4,731,762. c Other professional fees nistrative 17 Interest O . STMT 6 -62 0. 0. 18 19 70,88**4**. 0. 0. Depreciation and depletion 518,663 20 Occupancy 0. 0. 522,553. 21 ,497,591 0 0. 1,429,496. Travel, conferences, and meetings 0. 34,347. 0. 43,315. 22 Printing and publications STMT 7 ,219,800 0 0 1,276,548. 23 Other expenses 24 Total operating and administrative 0. 12,404,999 0 12,221,284. expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 998,049 985,182. 26 Total expenses and disbursements. 13,403,048 0 0. 13,206,466. Add lines 24 and 25 27 Subtract line 26 from line 12: -50,699. 2 Excess of revenue over expenses and disbursements 178. b Net investment income (if negative, enter -0-) 13,096. C Adjusted net income (if negative, enter -0-)

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HUNT ALTERNATIVES 04-3397500 Page 2 Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 147,347. 315,070. 315,070. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 112,013. 3 Accounts receivable > 76,997. Less: allowance for doubtful accounts ▶ 112,013. 112,013. 4 Pledges receivable ► Less: allowance for doubtful accounts ▶ 25,000. 141,312. Grants receivable 233,656. 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 159,846. 83,530. 83,530. 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis ▶ 858,305 Less accumulated depreciation STMT 8 > 427,196. 501,995. 431,109. 431,109. 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 1,144,841. 1,083,034. 1,083,034. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 971,497. 1,001,202. 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable STATEMENT 9) 22 Other liabilities (describe 614,043. 573,230 23 Total liabilities (add lines 17 through 22) 1,585,540. 1,574,432 **▶** 🗓 Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Net Assets or Fund Balances** 24 Unrestricted -579,299. -576,708. 25 Temporarily restricted 138,600. 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds -440,699. -491,398 30 Total net assets or fund balances 1,144,841. 31 Total liabilities and net assets/fund balances 1,083,034 Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) <u>-440,699.</u> 2 Enter amount from Part I, line 27a -50,699. 3 Other increases not included in line 2 (itemize) 0. -491,398. 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) -491,398. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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4,973,078.

13,206,466.

7

8

Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

| orm 990-F Part VI | F (2015) HUNT ALTERNATIVES Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4 | <u>04-</u> 1948 | 3397 - see | 500 instru | ction | Page 4 |
|----------------------|---|--------------------|---------------|---------------|-------|------------|
| | of operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | T | | | | |
| Date 6 | f ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | | |
| b Dome | stic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1% | 1 | | | | 2. |
| of Par | t I, line 27b | | | | | |
| c All oth | er domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 🤳 | | | | | |
| 2 Tax u | der section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | <u> </u> | | | 0. |
| | nes 1 and 2 | 3 | | | | <u>2.</u> |
| | e A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | | 0. |
| | ased on investment income Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | | | 2. |
| | s/Payments: | 1 | | | | |
| | estimated tax payments and 2014 overpayment credited to 2015 6a 91. | <u>. </u> | | | | |
| | ot foreign organizations - tax withheld at source | 4 | | | | |
| | ud with application for extension of time to file (Form 8868) | 4 | | | | |
| | p withholding erroneously withheld 6d 6d | 4 | | | | |
| | credits and payments. Add lines 6a through 6d | 7 | | | | <u>91.</u> |
| | any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | ļ— | - | | |
| | e. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | ļ | | | |
| | ayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | <u> </u> | | | <u>89.</u> |
| | the amount of line 10 to be: Credited to 2016 estimated tax | 11 | <u> </u> | | | <u>0.</u> |
| | -A Statements Regarding Activities | | | 1 | V | NI. |
| | the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven | e រោ | | | Yes | |
| | olitical campaign? | ٠. | | 1a | | X |
| | spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition | | | 1b | | <u>X</u> |
| | answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials publish | ed or | | | | |
| | outed by the foundation in connection with the activities | | | | | v |
| | e foundation file Form 1120-POL for this year? | | | 1c | | X |
| | the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | | |
| | n the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 . the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | <u>-</u> | | | | |
| | pers. > \$ 0. | | | | | |
| | e foundation engaged in any activities that have not previously been reported to the IRS? | | | | | x |
| | s," attach a detailed description of the activities | | | 2 | | |
| | e foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, | or | | Ì | | |
| | s, or other similar instruments? If "Yes," attach a conformed copy of the changes | UI | | 3 | | х |
| | e foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | X |
| | "has it filed a tax return on Form 990-T for this year? | N | I/A | 4b | | |
| | nere a liquidation, termination, dissolution, or substantial contraction during the year? | - | •, | 5 | | Х |
| | s," attach the statement required by General Instruction T | | | | | |
| | e requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | 1 | | |
| | anguage in the governing instrument, or | | | | | |
| - | tate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the star | te law | | | | |
| | in the governing instrument? | | | 6 | х | |
| 7 Did th | e foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X | V | | 7 | Х | |
| | , | | | | | |
| 8a Enter | he states to which the foundation reports or with which it is registered (see instructions) | | | | | |
| | DC, CO, MD, VA, NY, FL, OR, UT, WA, PA, IL, CA | | | | | |
| | inswer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | | |
| | n state as required by General Instruction G? If "No," attach explanation SEE STATE | (KEN | 10 | 8b | | x |
| | foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca | | | | | |
| | 015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9 | х | <u> </u> |
| 0 Did an | v persons become substantial contributors during the tax year? If "yes" attach a schedule listing their names and addresses | | | 10 | | x |

1 2

| Pa | rt VII-A Statements Regarding Activities (continued) | | | |
|----|---|------|------------|---|
| | | | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | İ | |
| | section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| | If "Yes," attach statement (see instructions) | 12 | _ | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | _13_ | X | |
| | Website address HUNTALTERNATIVES.ORG | | | |
| 14 | | 995 | <u>-19</u> | <u>75 </u> |
| | Located at ► 625 MT AUBURN ST., STE 205, CAMBRIDGE, MA ZIP+4 ► 02 | 138 | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | _X_ |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| _ | foreign country | | | |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly): | | | l |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No | | | ļ |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No | | | } |
| | , , , | | | |
| | (6) Agree to pay money or property to a government official? (Exception Check "No" | | | |
| | If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No | | | |
| | | | | 1 |
| D | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 1 | | x |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | |
| _ | Organizations relying on a current notice regarding disaster assistance check here | | | |
| Ü | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | 1c | | Х |
| 2 | before the first day of the tax year beginning in 2015? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | 16 | | |
| 2 | defined in section 4942(j)(3) or 4942(j)(5)): | | ļ | |
| 9 | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | | |
| u | before 2015? | | 1 | 1 |
| | If "Yes," list the years \blacktriangleright ,,,,, | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | ļ | ì | |
| _ | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | | |
| | statement - see instructions.) N/A | 2b | } | |
| c | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| | | } | | i |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? | | Ì | i |
| b | If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after | | | |
| | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose | | | |
| | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, | | | |
| | Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A | 36 | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | | |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | 1 | X |

All other program-related investments. See instructions.

Total. Add lines 1 through 3

| Minimum Investment Return (All dom | estic foundations must complete this part. Forei | gn foundations, | see instructions) |
|---|---|----------------------|--------------------|
| 1 Fair market value of assets not used (or held for use) directly in | carrying out charitable, etc., purposes: | | |
| a Average monthly fair market value of securities | , ,, , | 1a | 0. |
| b Average of monthly cash balances | | 1b | 268,596. |
| c Fair market value of all other assets | | 1c | 767,964. |
| d Total (add lines 1a, b, and c) | | 1d | 1,036,560. |
| e Reduction claimed for blockage or other factors reported on line | es 1a and | | • |
| 1c (attach detailed explanation) | 1e | 0. | |
| 2 Acquisition indebtedness applicable to line 1 assets | | 2 | 0. |
| 3 Subtract line 2 from line 1d | | 3 | 1,036,560. |
| 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 | 3 (for greater amount, see instructions) | 4 | 15,548. |
| 5 Net value of noncharitable-use assets Subtract line 4 from lin | e 3. Enter here and on Part V, line 4 | 5 | 1,021,012. |
| 6 Minimum investment return. Enter 5% of line 5 | | 6 | 51,051. |
| Part XI Distributable Amount (see instructions) foreign organizations check here ▶ X and do n | Section 4942(j)(3) and (j)(5) private operating foundator of complete this part.) | tions and certain | |
| 1 Minimum investment return from Part X, line 6 | | 1 | |
| 2a Tax on investment income for 2015 from Part VI, line 5 | 2a | | |
| b Income tax for 2015. (This does not include the tax from Part V | .) 2b | | |
| c Add lines 2a and 2b | | 2c | |
| 3 Distributable amount before adjustments. Subtract line 2c from | line 1 | 3 | |
| 4 Recoveries of amounts treated as qualifying distributions | | 4 | |
| 5 Add lines 3 and 4 | | 5 | |
| 6 Deduction from distributable amount (see instructions) | | 6 | |
| 7 Distributable amount as adjusted. Subtract line 6 from line 5. E | nter here and on Part XIII, line 1 | 7 | |
| Part XII Qualifying Distributions (see instruction | | | |
| 1 Amounts paid (including administrative expenses) to accomplis | h charitable, etc., purposes: | | |
| a Expenses, contributions, gifts, etc total from Part I, column (d | | 1a | 13,206,466. |
| b Program-related investments - total from Part IX-B | | 1b | 13,206,466. |
| 2 Amounts paid to acquire assets used (or held for use) directly in | n carrying out charitable, etc., purposes | 2 | |
| 3 Amounts set aside for specific charitable projects that satisfy the | | | |
| a Suitability test (prior IRS approval required) | | 3a | |
| b Cash distribution test (attach the required schedule) | | 3b | |
| 4 Qualifying distributions Add lines 1a through 3b. Enter here ar | nd on Part V, line 8, and Part XIII, line 4 | 4 | 13,206,466. |
| 5 Foundations that qualify under section 4940(e) for the reduced of | · · · · · · · · · · · · · · · · · · · | | |
| income. Enter 1% of Part I, line 27b | | 5 | 2. |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4 | | 6 | 13,206,464. |
| Note. The amount on line 6 will be used in Part V, column (b), ii | n subsequent years when calculating whether the four | dation qualifies for | |

4940(e) reduction of tax in those years.

| Part XIII Undistributed Income (se | ee instructions) | N/A | | |
|--|------------------|--|--------------|--|
| , | (a) | (b) | (c) | (d) |
| 1 | Corpus | Years prior to 2014 | 2014 | 2015 |
| 1 Distributable amount for 2015 from Part XI, | | | | |
| line 7 | | | | |
| 2 Undistributed income, if any, as of the end of 2015 | | | | |
| a Enter amount for 2014 only | | | | |
| b Total for prior years: | | | | |
| | | | | |
| 3 Excess distributions carryover, if any, to 2015: | | | | |
| a From 2010 | | | | |
| b From 2011 | | | | |
| ¢ From 2012 | | | | |
| d From 2013 | | | | |
| e From 2014 | | | | |
| f Total of lines 3a through e 4 Qualifying distributions for 2015 from | _ | | | |
| Part XII, line 4: > \$ | | | | |
| a Applied to 2014, but not more than line 2a | | | | 1 |
| b Applied to 2014, but not more than line 2a | | | | |
| years (Election required - see instructions) | | | | |
| c Treated as distributions out of corpus | | | | - |
| (Election required - see instructions) | | | | |
| d Applied to 2015 distributable amount | | | | |
| e Remaining amount distributed out of corpus | | | | |
| 5 Excess distributions carryover applied to 2015 | | | | |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | 1 | | |
| 6 Enter the net total of each column as | | | | |
| indicated below: | | | | |
| 8 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | | | |
| c Enter the amount of prior years' undistributed income for which a notice of | | | | |
| deficiency has been issued, or on which | | | | |
| the section 4942(a) tax has been previously | | | | |
| assessed | | | | |
| d Subtract line 6c from line 6b. Taxable amount - see instructions | | 1 | | |
| e Undistributed income for 2014. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | | |
| f Undistributed income for 2015. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2016 | | | | |
| 7 Amounts treated as distributions out of | | · · · · · · · · · · · · · · · · · · · | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | | | | |
| 8 Excess distributions carryover from 2010 | | | | |
| not applied on line 5 or line 7 | | | | |
| 9 Excess distributions carryover to 2016. | | | | |
| Subtract lines 7 and 8 from line 6a | | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2011 | | | | |
| b Excess from 2012 | | | | |
| c Excess from 2013 | | | | |
| d Excess from 2014 | | | | |
| e Excess from 2015 | | <u>L</u> | | |

| Form 990-PF (2015) HUNT A J | LTERNATIVES | | | 04-33 | 97500 Page 10 |
|---|---|--|--|--|-----------------------------|
| Part XIV Private Operating I | | structions and Part VII- | A, question 9) | <u> </u> | |
| 1 a If the foundation has received a ruling foundation, and the ruling is effective for the boundation. b Check box to indicate whether the four | or 2015, enter the date of t | he ruling | n section X | 05/98 4942(j)(3) or 49 |)42(_J)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | 13,096. | 1,155. | 5,426. | 5,683. | |
| b 85% of line 2a | 11,132. | 982. | 4,612. | 4,831. | 21,556. |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | 13,206,466. | 9,980,494. | 8,110,225. | <u>9,655,646.</u> | <u>40,952,831.</u> |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | 985,182. | 1,271,316. | 90,200. | <u>164,452.</u> | 2,511,150. |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c Complete 3a, b, or c for the | 12,221,284. | 8,709,178. | 8,020,025. | 9,491,194. | 38,441,681 . |
| alternative test relied upon: a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | 1,083,034. | 1,144,841. | 2,074,578. | 5,673,257. | 9,975,710. |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | 1,083,034. | 1,144,841. | 2.074.578. | 5,673,257. | 9.975.710. |
| b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | 0. |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | 0. |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | 0. |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | 0. |
| (4) Gross investment income | | | | | 0. |
| Part XV Supplementary Info | | - | if the foundation | had \$5,000 or m | ore in assets |
| 1 Information Regarding Foundati | on Managers: | | • | | |
| a List any managers of the foundation w year (but only if they have contributed | ho have contributed more t | | ributions received by the f | oundation before the clo | se of any tax |
| SWANEE HUNT | | | | | |
| b List any managers of the foundation w other entity) of which the foundation has | ho own 10% or more of the | e stock of a corporation (| or an equally large portion | n of the ownership of a p | artnership or |
| NONE | | | | | |
| 2 Information Regarding Contribu | | | | | |
| Check here X if the foundation the foundation makes gifts, grants, etc | only makes contributions t . (see instructions) to indiv | to preselected charitable of iduals or organizations u | organizations and does no nder other conditions, co | ot accept unsolicited requ mplete items 2a, b, c, and | uests for funds. If d d. |
| a The name, address, and telephone num | ······································ | | | | |
| | | | | | |

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form **990-PF** (2015)

Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor a Paid during the year PUBLIC CHARITY DEMAND ABOLITION GRANT NONE AREKAM FOUNDATION 45 ELMORE ST. 78,667. ROXBURY MA 02119 ALAMEDA COUNTY DISTRICT ATTORNEY'S DEMAND ABOLITION GRANT NONE GOVERNMENT OFFICE ENTITY 1225 FALLON ST. OAKLAND, CA 94612 45,000. APB CONSULTING, LLC NONE EXPENDITURE DEMAND ABOLITION GRANT 14631 SOUTH THIRD AVE. RESPONSIBILITY 18,700. PHOENIX AZ 85045 ASU FOUNDATION NONE PUBLIC CHARITY DEMAND ABOLITION GRANT 411 N CENTRAL AVE. PHOENIX AZ 85004 23,125. BILATERAL SAFETY CORRIDOR COALITION NONE PUBLIC CHARITY DEMAND ABOLITION GRANT 121 EAST 31ST ST. NATIONAL CITY CA 91950 35,000. SEE CONTINUATION SHEET(S) ➤ 3a 985 182. Total b Approved for future payment CENTER FOR AMERICAN WOMEN & POLITICS NONE PUBLIC CHARITY POLITICAL PARITY GRANT RUTGERS UNIV., 191 RYDERS LANE NEW BRUNSWICK NJ 08901 200,000. THORN NONE PUBLIC CHARITY DEMAND ABOLITION GRANT 200 PARK AVE. 51,000. NEW YORK, NY 10003 PUBLIC CHARITY DEMAND ABOLITION GRANT BILATERAL SAFETY CORRIDOR COALITION NONE 121 EAST 31ST ST. NATIONAL CITY CA 91950 15,000. <u>3b</u> Total 266 000

523611 11-24-15 Form **990-PF** (2015)

| Part XVI-A | 、Analysis of | Income-Producing | Activities |
|------------|--------------|------------------|-------------------|
|------------|--------------|------------------|-------------------|

| inter gross amounts unless otherwise indicated. | Unrelated b | usiness income | | y section 512, 513, or 514 | (e) |
|--|--|----------------|-------------------------------|----------------------------|-----------------------------------|
| | (a) Business | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| 1 Program service revenue: | code | | Code | - | |
| a | | | | - | |
| b | | | | | |
| · ———————————————————————————————————— | | | | | |
| d | | | - - - | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | 4.50 | |
| investments | | | 14 | 178. | |
| 4 Dividends and interest from securities | <u> </u> | | | | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | - | | | | |
| than inventory | | | | | |
| 9 Net income or (loss) from special events | | | + | | |
| Gross profit or (loss) from sales of inventory | | | · | | |
| 1 Other revenue: | | | | | |
| a CURRICULUM AND BOOK | | | | | |
| b SALES | | | | | 1,086 |
| c CREDIT CARD PTS REDEEMED | | | | | 11,832 |
| d | | | | | |
| e | | | | | |
| 2 Subtotal. Add columns (b), (d), and (e) | | | 0. | 178. | 12,918 |
| 3 Total Add line 12, columns (b), (d), and (e) | | - | • | 13 | 13,096 |
| See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities to | the Accom | nplishment of | Exempt P | urposes | |

| Line No. | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). | _ |
|----------|---|---|
| 11A | CURRICULUM & BOOK SALES RELATE TO INSTITUTE FOR INCLUSIVE SECURITY, A | |
| 11A | PROGRAM TO ADVANCE SOCIAL CHANGE RELATING TO WOMEN, PEACE AND SECURIT | Ÿ |
| 11C | TRAVEL TO ADVANCE SOCIAL CHANGE RELATING TO WOMEN, PEACE AND SECURITY | _ |
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523621 11-24-15

| Pa | rt XVII | | | rs To an | d Transactions a | ınd Relationsl | nips With Noncha | ritable | • | |
|-----------|------------|--|-----------------------------|-------------------------------------|---|-------------------------|---------------------------------|---|------------------------|----------|
| 1 | Did the or | Exempt Organi ganization directly or indir | | no following | with any other organization | on described in section | on 501(c) of | T | Yes | No |
| ' | | (other than section 501(c) | | | | | JII 30 I(C) 01 | | | -110 |
| а | | from the reporting founda | | | | | | | | |
| _ | (1) Cash | | | р. о. 9 а | | | | 1a(1) | | <u> </u> |
| | (2) Other | | | | | | | 1a(2) | | X |
| b | Other tran | | | | | | | | | |
| | (1) Sales | s of assets to a noncharital | ble exempt organization | | | | | 1b(1) | | X |
| | (2) Purci | hases of assets from a nor | ncharitable exempt organ | nızatıon | | | | 1b(2) | | _X_ |
| | (3) Renta | al of facilities, equipment, (| or other assets | | | | | 1b(3) | | X X |
| | (4) Reim | bursement arrangements | | | | | | 1b(4) | | X |
| | | s or loan guarantees | | | | | | 1b(5) | | <u>X</u> |
| | | ormance of services or me | | | | | | 1b(6) | | X |
| | | of facilities, equipment, mai | | | | | | 1c | | X |
| a | or service | wer to any of the above is as given by the reporting for | oundation. If the foundati | tion received | | | | | eis, | |
| (2) | ine no | d) the value of the goods, (b) Amount involved | | | xempt organization | (d) Description | of transfers, transactions, and | charina ar | rangeme | nte. |
| (a) L | ine no | (b) Amount involved | | N/A | Actific organization | (u) Description | of transfers, transactions, and | Snaring ar | rangeme | |
| | | | | N/A | | | | | | |
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| | ın section | ndation directly or indirect i 501(c) of the Code (other omplete the following schi | than section 501(c)(3)) | • | | izations described | | Yes | X | □ No |
| | | (a) Name of org | | | (b) Type of organization | | (c) Description of relations | hip | | |
| | - | N/A | | | | | | | | |
| | | | | | | | | | | |
| | | | | | · | | | | | |
| | | | | | | | | | | |
| Sig He | gn and b | r penalties of perjury, I declare elies it find con the control of | noted Decimation of prepare | turn, including er (other than t | accompanying schedules and laxpayer) is based on all inform | mation of which prepare | has any knowledge ret | ay the IRS urn with the own below | ne prepa v (see ins | rer |
| | 1 2.9 | Print/Type preparer's na | | eparer's sig | | Date | Check If PTIN | | _ | |
| | | . JF - F - F - F - F - F - F - F - F - F | | | ИШN- ~ | West | self- employed | | | |
| Pa | id | DEBORAH A. | HOPKINS // | OKKAL | MITTELLAND | 11/10/16 | P0 | 0167 | 843 | } |
| | eparer | Firm's name ► KAH | N, LITWIN, | RENZA | & COL, LTI |). | Firm's EIN ► 05-0 | | | |
| Us | e Only | | | | | | | | | |
| | | Firm's address ► 80 | 0 SOUTH ST. | ., SUI | TE 300 | | | | | |
| | | WA | LTHAM, MA 0 | 02 <u>453</u> | | | Phone no. (781) | | | |
| | | | | | | | | orm 99 | n-PF | (2015) |

523622 11-24-15

HUNT ALTERNATIVES

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor BUSINESSES ENDING SLAVERY & NONE PUBLIC CHARITY DEMAND ABOLITION GRANT TRAFFICKING PO BOX 14512 SEATTLE WA 98114 20,000. PUBLIC CHARITY POLITICAL PARITY GRANT CENTER FOR AMERICAN WOMEN & POLITICS NONE RUTGERS UNIV., 191 RYDERS LANE NEW BRUNSWICK, NJ 08901 200,000. CHICAGO ALLIANCE AGAINST SEXUAL NONE PUBLIC CHARITY DEMAND ABOLITION GRANT EXPLOITATION 307 N. MICHIGAN AVE. CHICAGO, IL 60601 10,000. CHILDREN AT RISK NONE PUBLIC CHARITY DEMAND ABOLITION GRANT 3625 N. HALL ST. DALLAS, TX 75219 97,856. COOK COUNTY SHERIFF'S OFFICE NONE GOVERNMENT DEMAND ABOLITION GRANT 69 W. WASHINGTON ST. ENTITY CHICAGO IL 60602 45,000. DENVER VALE BOARD NONE GOVERNMENT DEMAND ABOLITION GRANT 201 W. COLFAX AVE. ENTITY 80 667. DENVER, CO 80202 END HUMAN TRAFFICKING NOW, INC. NONE PUBLIC CHARITY DEMAND ABOLITION GRANT 650 PINE GROVE RD. ROSWELL GA 30075 17,500. HISPANAS ORGANIZED FOR POLITICAL NONE PUBLIC CHARITY POLITICAL PARITY GRANT EQUALITY 634 S. SPRING ST. LOS ANGELES, CA 90014 20,000. INT'L CIVIL SOCIETY ACTION NETWORK NONE PUBLIC CHARITY INCLUSIVE SECURITY 355 LEXINGTON AVE. GRANT 5,000. NEW YORK, NY 10017 DEMAND ABOLITION GRANT KING COUNTY PROSECUTING ATTORNEY'S NONE GOVERNMENT OFFICE ENTITY 516 3RD AVE. SEATTLE, WA 98104 41,667. Total from continuation sheets 784 690<u>.</u>

HUNT ALTERNATIVES

| 10,00 NT 60,0 | Purpose of grant or contribution | Foundation status of recipient | If recipient is an individual, show any relationship to | 3 Grants and Contributions Paid During the Y Recipient |
|------------------|--------------------------------------|--------------------------------------|---|--|
| NT 10,0 | Purpose of grant or contribution | status of | show any relationship to | 1 15 |
| 10,00 NT 60,0 | | | any foundation manager or substantial contributor | Name and address (home or business) |
| 60,0 | POLITICAL PARITY GRANT | PUBLIC CHARITY | NONE | NEW VENTURE FUND 1201 CONNECTICUT AVE. NW NASHINGTON, DC 20036 |
| NT | DEMAND ABOLITION GRANT | PUBLIC CHARITY | NONE | PHE EPIK PROJECT P.O. BOX 545 VANCOUVER, WA 98666 |
| 47.0 | DEMAND ABOLITION GRANT | PUBLIC CHARITY | NONE | THE ORGANIZATION FOR PROSTITUTION SURVIVORS P, O. BOX 22635 SEATTLE, WA 98122 |
| | THE INSTITUTE FOR INCLUSIVE SECURITY | 1 | NONE | THE TIDES CENTER DEPOSITORY ACCOUNT |
| 5,0 | GRANT | | | SAN FRANCISCO, CA 94129 |
| 36,6 | DEMAND ABOLITION GRANT | PUBLIC CHARITY | NONE | UNIV OF COLORADO COLORADO SPRINGS 1420 AUSTIN BLUFFS PKWY. COLORADO SPRINGS, CO 80918 |
| 8,4 | HUNT ALTERNATIVES GRANT | PUBLIC CHARITY | NONE | WOMEN DONORS NETWORK 565 COMMERCIAL ST. SAN FRANCISCO, CA 94111 |
| 7E 30,0 | INSTIT, FOR INCLUSIVE SECURITY | PUBLIC CHARITY | NONE | WORLD LEARNING 1 KIPLING RD. BRATTLEBORO, VT 05302 |
| | DEMAND ABOLITION GRANT | PUBLIC CHARITY | NONE | YOUTHSPARK INC. 395 PRYOR ST. SW |
| | DEMAND ABOLITION GRANT | PUBLIC CHARITY | NONE | STREET GRACE INC 5995 FINANCIAL DRIVE |
| | | | | YOUTHSPARK INC. 395 PRYOR ST. SW ATLANTA, GA 30312 STREET GRACE INC 5995 FINANCIAL DRIVE NORCROSS, GA 30071 |

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Name of the organization

Employer identification number

04-3397500 HUNT ALTERNATIVES Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Employer identification number

HUNT ALTERNATIVES

| HUNT . | ALTERNATIVES | | <u>-3397500</u> |
|-------------|---|----------------------------|---|
| Part I | Contributors (see instructions) Use duplicate copies of Part I if additional | space is needed | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | THE BOSTON FOUNDATION 75 ARLINGTON ST BOSTON, MA 02116 | \$30,000. | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | SWANEE HUNT FAMILY FOUNDATION 625 MT AUBURN STREET CAMBRIDGE, MA 02138 | \$ <u>10,487,074.</u> | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | DAVID & LURA LOVELL FOUNDATION 4729 E SUNRISE DRIVE #307 TUSCON, AZ 85718 | \$10,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | PATRICIA HEOFLER 7831 ABERDEEN ROAD BETHESDA, MD 20814 | \$10,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| <u>5</u> | RUETTGERS FAMILY CHARITABLE FOUNDATION 453 BEDFORD ROAD CARLISLE, MA 01741 | \$15,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 6 | DEPT OF STATE, USSESSS 1701 N FT MEYER DRIVE, BERKELEY BLDG ARLINGTON, VA 22209 | \$300,377. | Person X Payroll |
| 523452 10-2 | | Schedule B (Form | 990, 990-EZ, or 990-PF) (2015) |

Employer identification number

| HUNT | ALTER | ITAN | VES |
|------|-------|------|-----|
|------|-------|------|-----|

| HUNT . | ALTERNATIVES | 04 | <u>-3397500</u> |
|------------|--|----------------------------|--|
| Part I | Contributors (see instructions) Use duplicate copies of Part I if additional | al space is needed. | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 7 | DEPT OF STATE US EMBASSY OF ISLAMABAD PUBLIC AFFAIRS SECTION, AMERICAN EMBASSY ISLAMABAD, PAKISTAN | \$ 124,978. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 8 | SWANEE HUNT 625 MT AUBURN STREET CAMBRIDGE, MA 02138 | \$ 2,193,718. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 9 | DIANA ROWAN ROCKEFELLER 24 CRAIGIE ST. CAMBRIDGE, MA 02138 | \$5,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 10 | CENTER FOR CIVIL SOCIETY KAVAKLIK MAH.ORDU CAD NO. 2, SAHINEBEY, GAZIANTEP, TURKEY | \$9,523. | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 11 | LORNA AUERBACH 1101 NO. AMALFI DR. PACIFIC PALISADES, CA 90272 | \$ <u>10,105</u> . | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 12 | FORD FOUNDATION 320 EAST 43RD ST NEW YORK, NY 10017 | \$ 100,000. | Person X Payroll Noncash (Complete Part II for noncash contributions) |

Employer identification number

| | ERNATIVES |
|--|-----------|
|--|-----------|

| Part I | Contributors (see instructions) Use duplicate copies of Part I if additiona | I space is needed | |
|-------------|---|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 13 | INTERNATIONAL ACADEMY OF TRIAL LAWYERS 5841 CEDAR LAKE ROAD MINNEAPOLIS, MN 55416 | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 523450 10.2 | | \$Schadula B /Form | Person Payroll Noncash (Complete Part II for noncash contributions) |

Employer identification number

HUNT ALTERNATIVES

| art II | Noncash Property (see instructions) Use duplicate copies of P | art II if additional space is needed | |
|-------------|---|--|----------------------|
| | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| No. from | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| No. from | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| No. from | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |

| Name of orga | unization • | | Employer identification number |
|-----------------|--|--|--|
| HUNT · A | LTERNATIVES | | 04-3397500 |
| Part III | Exclusively religious, charitable, etc., contri the year from any one contributor Complete co | butions to organizations described in s | section 501(c)(7), (8), or (10) that total more than \$1,000 for |
| | completing Part III, enter the total of exclusively religious, | charitable, etc., contributions of \$1,000 or less | s for the year (Enter this info once) \$ |
| (a) No. | Use duplicate copies of Part III if additiona | space is needed | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | _ |
| | | | _ |
| F | | (e) Transfer of gift | |
| | | | |
| - | Transferee's name, address, an | d ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| (a) No. | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| _ | | | |
| } | | (e) Transfer of gift | |
| | Transferee's name, address, an | d ZI P + 4 | Relationship of transferor to transferee |
| | | | |
| ţ | | | |
| | | | |
| (a) No. from | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| Part I | (, | (0, 500 0.5 | |
| | | | |
| | | | |
| - | | (e) Transfer of gift | |
| | | (c) transier or girt | |
| - | Transferee's name, address, an | d ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| (a) No. | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | | |
| | | (e) Transfer of gift | |
| | Transferrate manage address | .47ID + 4 | Polationship of transferor to transferor |
| } | Transferee's name, address, an | 0 LIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |

| FORM 990-PF' INTEREST ON SAVI | NGS AND TI | EMPORARY | CASH | INVESTMENTS | STATEMENT 1 | |
|---|-----------------------------|------------------------|------------------------|-----------------------------------|-------------------------------|--|
| SOURCE | RE | (A) JENUE BOOKS | NET | (B) INVESTMENT INCOME | (C) ADJUSTED NET INCOME | |
| BOSTON PRIVATE BANK & TRUST | | 178. | | 178. | 178. | |
| TOTAL TO PART I, LINE 3 | | 178. | | 178. | 178. | |
| FORM 990-PF | OTHER | INCOME | | | STATEMENT 2 | |
| DESCRIPTION | | (A) REVEN PER BO | - | (B) NET INVEST- MENT INCOME | | |
| CURRICULUM AND BOOK SALES CREDIT CARD PTS REDEEMED | - | | 1,086. | | 1,086. 11,832. | |
| TOTAL TO FORM 990-PF, PART I, | LINE 11 | 1 | 2,918. | . 0 | 12,918. | |
| FORM 990-PF | LEG | AL FEES | | | STATEMENT 3 | |
| DESCRIPTION | (A) EXPENSES PER BOOK | NET I | B) NVEST- INCOMI | | | |
| LEGAL FEES | 24,04 | 2. | (|). | 0. 24,342. | |
| TO FM 990-PF, PG 1, LN 16A | 24,04 | 2. | (|). | 0. 24,342. | |
| FORM 990-PF | ACCOUN | TING FEE | S | | STATEMENT 4 | |
| DESCRIPTION | (A) EXPENSES PER BOOK | NET I | B) NVEST- INCOMI | | | |
| ACCOUNTING/TAX SERVICES | 18,91 | 4. | (| 0. | 0. 18,414. | |
| TO FORM 990-PF, PG 1, LN 16B | 18,91 | 4. | (| 0. | 0. 18,414. | |
| = | | | | | | |

| FORM 990-PF | OTHER PROFES | SIONAL FEES | ST | АТЕМЕНТ 5 |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| OTHER CONSULTANTS | 962,650. | 0. | 0. | 932,742. |
| RESEARCH CONSULTING | 146,301. | 0. | 0. | 166,061. |
| BRAND STRATEGY | 91,400. | 0. | 0. | 95,450. |
| CURRICULUM DEVELOPMENT | 51,250. | 0. | 0. | 51,650. |
| VIDEOGRAPHER | 90,624. | 0. | 0. | 90,624. |
| EDITORIAL | 81,600. | | 0. | 74,822. |
| PROGRAM DEVELOPMENT | 393,280. | | 0. | 374,978. |
| PROGRAM EVENTS | 112,371. | | 0. | 110,000. |
| TRAINING | 46,268. | | 0. | 81,268. |
| ADMINISTRATIVE SERVICES | 2,814,372. | 0. | 0. | 2,754,167. |
| TO FORM 990-PF, PG 1, LN 160 | C 4,790,116. | 0. | 0. | 4,731,762. |
| FORM 990-PF | TAX | ES | Su | PATEMENT 6 |
| | | | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| FEDERAL EXCISE TAX | -62. | 0. | 0. | 0. |
| TO FORM 990-PF, PG 1, LN 18 | -62. | 0. | 0. | 0. |
| FORM 990-PF | OTHER E | XPENSES | Si | PATEMENT 7 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| PROFESSIONAL DEVELOPMENT | 20,133. | 0. | 0. | 21,440. |
| PAYROLL ADMINISTRATION FEES | 21,889. | | 0. | 21,889. |
| AUDIO/VISUAL | 43,057. | | 0. | 42,043. |
| BANK SERVICE CHARGES | 860. | | 0. | 860. |
| INFORMATION TECHNOLOGY | 148,175. | | 0. | 155,175. |
| INSURANCE | 20,114. | | 0. | 27,002. |
| MISCELLANEOUS | 15,014. | | 0. | 13,961. |
| OFFICE EXPENSES & SUPPLIES | 31,635. | | 0. | 28,661. |
| POSTAGE & SHIPPING | 8,668. | | 0. | 8,695. |
| REFERENCE MATERIALS | 106,361. | | 0. | 112,529. |
| STATE FILING FEES | 2,904. | | 0. | 2,904. |
| | | | | |

| | | - | | | _ | | | |
|--------------------------------|---------|----------------|---------------|----------|-------------------|-----|-----------|-----|
| HUNT ALTERNATIVES | | | | | | | 04-33975 | 500 |
| TELECOMMUNICATIONS | 07 | 041. | | 0 | | 0. | 82,10 | |
| TEMPORARY HELP | | 359. | | 0. 0. | | 0. | 22,48 | |
| SHARED OFFICE COSTS | | 240. | | 0. | | 0. | 730,2 | |
| TRAINING (NON-PERSONNEL) | | 350. | | 0. | | 0. | 6,5 | |
| TO FORM 990-PF, PG 1, LN 23 = | 1,219, | 800. | | 0. | <u>-</u> | 0. | 1,276,5 | 18. |
| | | | | | | | | |
| FORM 990-PF DEPRECIATION OF | ASSETS | NOT | HELD FOR | INVEST | PMENT | ST | ATEMENT | 8 |
| DESCRIPTION | c | | r or Basis | | JLATED CIATION | В | OOK VALUI | 3 |
| EUDNIMIDE C BINMIDEG | | | 100 054 | | 100 254 | | | _ |
| FURNITURE & FIXTURES | | | 100,254. | - | 100,254. | | | 0. |
| FURNITURE & FIXTURES | | | 46,950. | | 46,950. | | 40 7 | 0. |
| LEASEHOLD IMPROVEMENTS | | | 52,427. | | 11,704. | | 40,7 | |
| EQUIPMENT | | | 32,483. | | 32,483. | | | 0. |
| FURNITURE & FIXTURES | | | 4,631. | | 4,631. | | 44 5 | 0. |
| FURNITURE & FIXTURES | | | 26,151. | | 14,633. | | 11,5 | |
| FURNITURE & FIXTURES | | | 95,730. | | 46,727. | | 49,00 | |
| FURNITURE & FIXTURES | | | 7,500. | | 3,570. | | 3,93 | |
| LEASEHOLD IMPROVEMENTS | | • | 460,395. | | 155,882. | | 304,5 | |
| LEASEHOLD IMPROVEMENTS | | | 15,850. | | 4,170. | | 11,6 | 80. |
| COMPUTER EQUIPMENT-PC LEASE | | | | | | | | |
| BUY-OUT | | | 8,429. | | 4,566. | | 3,8 | 63. |
| COMPUTER EQUIPMENT | | | 7,505. | | 1,626. | | 5,8 | |
| TOTAL TO FM 990-PF, PART II, I | LN 14 | ; | 858,305. | | 427,196. | | 431,1 | 09. |
| FORM 990-PF | OTHER | LIA | BILITIES | | | ST | 'ATEMENT | 9 |
| DESCRIPTION | | | | воч | AMOUNT | EO | Y AMOUNT | |
| DEFERRED LIABILITY - RENT | - | 614,043. 573,2 | | | | 30. | | |
| TOTAL TO FORM 990-PF, PART II, | , LINE | 22 | - | (| 614,043. | | 573,2 | 30. |
| FORM 990-PF EXPLANATION CON | NCERNIN | IG PA | RT VII-A, | LINE | | ST | 'ATEMENT | 10 |

EXPLANATION

THERE IS NO REQUIREMENT TO FILE THIS RETURN WITH THE ATTORNEY GENERAL OFFICES IN CO, DC AND WA.

| | | LIST OF OFFICERS AND FOUNDATION M | | STATI | EMENT 11 |
|---|--------|--------------------------------------|---------------------|---------------------------------|----------|
| NAME AND ADDRESS | | | COMPEN- K SATION | EMPLOYEE BEN PLAN CONTRIB | |
| SWANEE HUNT | | DIRECTOR, C | HAIR, PRESIDENT | 1 | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 MT | 10.00 | 0. | 0. | 0. |
| MARVA HAMMONS | | SECRETARY, | DIRECTOR | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 MT | 2.00 | 0. | 0. | 0. |
| LILLIAN SHUFF | | DIRECTOR, V | ICE PRESIDENT | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 MT | 2.00 | 0. | 0. | 0. |
| FERN PORTNOY | | DIRECTOR | | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 MT | 2.00 | 0. | 0. | 0. |
| ALICE F. EMERSON | | DIRECTOR | | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 MT | 2.00 | 0. | 0. | 0. |
| LORETTA FEEHAN | | TREASURER, | DIRECTOR | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 MT | 2.00 | 0. | 0. | 0. |
| EVELYN THORNTON | | CHIEF EXECU | TIVE OFFICER | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 MT | 40.00 | 152,182. | 38,046. | 0. |
| RODNEY SHUFF | | DIRECTOR | | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 MT | 2.00 | 0. | 0. | 0. |
| WILLIAM SNYDER | | DIRECTOR | | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 MT | 2.00 | 0. | 0. | 0. |
| | | | | | |

| HUNT ALTERNATIVES | | | | | | 0 4 | 1-3397500 |
|---|-------------|---------|-----------|---------|----------|---------|-----------|
| JANE LUTE | 60 F | | DIRECTOR | | | _ | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 | W.I. | 2.00 | | 0. | 0. | 0. |
| DAVID FLINK | 60 F | | DIRECTOR | | | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 | M.T. | 2.00 | | 0. | 0. | |
| RAY HAMMOND | 605 | | DIRECTOR | | | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 625 | W.T. | 2.00 | | 0. | 0. | 0. |
| KERRY HEALEY | 60 F | 200 | DIRECTOR | | | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 645 | W.T. | 2.00 | | 0. | 0. | 0. |
| ELIZABETH BENHAM | 62 - | Nem | ASSISTANT | SECRETA | ARY | | |
| C/O HUNT ALTERNATIVES, AUBURN ST. CAMBRIDGE, MA 02138 | 045 | W.1. | 2.00 | | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990- | PF, | PAGE 6, | PART VIII | | 152,182. | 38,046. | 0. |

FORM 990-PF' EXPENDITURE RESPONSIBILITY STATEMENT PART VII-B, LINE 5C

STATEMENT

12

GRANTEE'S NAME

MARY ROBINSON FOUNDATION

GRANTEE'S ADDRESS

6 SOUTH LEINSTER ST DUBLIN, IRELAND

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

80,000. 12/23/13

80,000.

PURPOSE OF GRANT

LEVERAGING THE LEADERSHIP OF WOMEN ON CLIMATE JUSTICE SPECIFICALLY TO CONVENE A MEETING OF HIGH LEVEL WOMEN LEADERS ON WOMEN'S EMPOWERMENT RELATED TO CLIMATE JUSTICE, TO CONDUCT RESEARCH ON INTERGENERATIONAL EQUITY WITH A UNIFYING THEME OF CLIMATE JUSTICE AND TO PERFORM SITE VISTS WITH GRASSROOTS WOMEN'S ORGANIZATIONS IN REGIONS COPING WITH CLIMATE CHANGE.

DATES OF REPORTS BY GRANTEE

JUN 27 & DEC 29, 2014, & JUN 30, 2015

BILLIONS INSTITUTE

GRANTEE'S ADDRESS

10 ROGERS ST

CAMBRIDGE, MA 02142

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

59,000.

12/30/14

59,000.

PURPOSE OF GRANT

SUPPORT THE ASSISTANCE IN THE DESIGN OF A NATIONAL PROTOTYPING EFFORT TO REDUCE DEMAND FOR PURCHASED SEX

DATES OF REPORTS BY GRANTEE

JUL 28, 2015

APB CONSULTING INC

GRANTEE'S ADDRESS

14631 SOUTH THIRD AVE

PHOENIX, AZ 85045

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

5,000. 12/10/15

4,848.

PURPOSE OF GRANT

DEMAND ABOLITION PROGRAM - CEASE INTERVENTIONS. FUNDING COVERS INCIDENTAL EXPENSES FOR DEMAND REDUCTION ACTIVITIES.

DATES OF REPORTS BY GRANTEE

MAY 23 & OCT 26, 2016

APB CONSULTING LLC

GRANTEE'S ADDRESS

14631 SOUTH THIRD AVE PHOENIX, AZ 85045

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

3,700.

12/22/15

3,199.

PURPOSE OF GRANT

DEMAND ABOLITION PROGRAM, CEASE NETWORK - DEMAND REDUCTION TACTIC TESTING. EXPERIMENTAL ACTIVITIES INCLUDE "NOT WORTH IT CAMPAIGN" ANNOUNCEMENTS & PUBLICITY, CITIZEN MASSAGE PARLOR PATROLS.

DATES OF REPORTS BY GRANTEE

OCT 26, 2016

APB CONSULTING INC

GRANTEE'S ADDRESS

14631 SOUTH THIRD AVE

PHOENIX, AZ 85045

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

10,000.

12/10/15

1,144.

PURPOSE OF GRANT

DEMAND ABOLITION PROGRAM, CEASE NETWORK - INITIAL PURPOSE TO ENGAGE MALE ALLIES TO DISRUPT SEX-BUYING AMONG PEERS. FUNDS REPURPOSED TO DEMAND REDUCTION TACTIC TESTING.

DATES OF REPORTS BY GRANTEE

OCT 26, 2016

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 13 ACTIVITY ONE INCLUSIVE SECURITY IS TRANSFORMING DECISION MAKING ABOUT WAR AND PEACE BY EQUIPPING DECISION MAKERS WITH KNOWLEDGE TOOLS AND CONNECTIONS THAT STRENGTHEN THEIR ABILITY TO DEVELOP INCLUSIVE POLICIES. BRINGING ALL STAKEHOLDERS TOGETHER, ESPECIALLY WOMEN, IN PEACE PROCESSES IMPROVES THE LIKELIHOOD OF ITS SUCCESS. IN 2015, WE DEVELOPED 41 SETS OF RECOMMENDATIONS AND 25 KNOWLEDGE PRODUCTS, RESPONDED TO 299 REQUESTS FOR INPUT, ORGANIZED 11 CONVENINGS WITH 353 PARTICIPANTS, AND HOSTED 25 WORKSHOPS FOR 445 PARTICIPANTS; ALL TO BOLSTER THE SKILLS AND INFLUENCE OF WOMEN LEADERS AROUND THE WORLD. EXPENSES TO FORM 990-PF, PART IX-A, LINE 1 6,208,471. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 14 ACTIVITY THREE POLITICAL PARITY'S GOAL IS TO INCREASE THE NUMBER OF WOMEN IN HIGH-LEVEL POLITICAL OFFICES VIA NONPARTISAN ACTIVITIES WHICH EDUCATE ALL STAKEHOLDERS FOR THE NEED FOR MORE WOMEN IN HIGH ELECTED OFFICES IN THE U.S. **EXPENSES** TO FORM 990-PF, PART IX-A, LINE 3 1,458,200.

| | | | | | | | | | | | | | | | _ |
|--------------------|--|----------------------|----------------------|------------------------|-----------|----------------------|----------------------|----------------------|----------------------|------------------------|-----------|-------------------------------------|--------------------|--------------------------|---|
| | Ending Accumulated Depréciation | 100,254. | 46,950. | 11,704. | 32,483. | 4,631. | 14,633. | 46,727. | 3,570. | 155,882. | 4,170. | 4,566. | 1,626. | 427,196. | tion, GO Zone |
| | Current Year Deduction | 0 | • | 1,344. | • | 172. | 3,736. | 13,676. | 1,071. | 43,502. | 1,668. | 4,214. | 1,501. | 70,884. | * ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone |
| | Current Sec 179 Expense | | | | | | | | | _ | | | | | nercial Revita |
| | Beginning Accumulated Depreciation | 100,254. | 46,950. | 10,360. | 32,483. | 4,459. | 10,897. | 33,051. | 2,499. | 112,380. | 2,502. | 352. | 125. | 356,312. | Bonus, Comm |
| | Basis For Depreciation | 100,254. | 46,950. | 52,427. | 32,483. | 4,631. | 26,151. | 95,730. | 7,500. | 460,395. | 15,850. | 8,429. | 7,505. | 858,305. | ITC, Salvage, |
| | Reduction In Basis | | _ | | | | - | | | | | | | | * |
| Ēr. | Section 179 Expense | | | | | | | | | | | | | | |
| 990-PF | Bus % Excl | · | - | | - | | | | _ | | | | | | peso |
| | Unadjusted Cost Or Basis | 100,254. | 46,950. | 52,427. | 32,483. | 4,631. | 26,151. | 95,730. | 7,500. | 460,395. | 15,850. | 8,429. | 7,505. | 858,305. | (D) - Asset disposed |
| ļ | No E > | HY17 | HY1 7 | MM 1 7 | HY17 | HY17 | 16 | 16 | 16 | 16 | 16 | 16 | 16 | | |
| Ì | Life | 7.00 | 7.00 | 39.00 | 2.00 | 7.00 | 7.00 | 7.00 | 7.00 | 10.58 | 9.50 | 2.00 | 5.00 | | |
| | Method | 200DB | 200DB | SI | 200DB | 200DB | IS | TS. | - Is | SL | TS. | ıs | TS | | |
| - | Date Acquired N | 05/31/02 | 05/30/07 | 04/13/07 | 04/13/07 | 80/08/90 | 01/26/12 | 08/14/12 | 09/19/12 | 06/01/12 | 07/01/13 | 11/30/14 8 | 11/30/14 8 | | |
| FORM 990-PF PAGE 1 | Description | FURNITURE & FIXTURES | FURNITURE & FIXTURES | LEASEHOLD IMPROVEMENTS | EQUIPMENT | FURNITURE & FIXTURES | FURNITURE & FIXTURES | FURNITURE & FIXTURES | FURNITURE & FIXTURES | LEASEHOLD IMPROVEMENTS | LEASEHOLD | COMPUTER EQUIPMENT-PC LEASE BUY-OUT | COMPUTER EQUIPMENT | * TOTAL 990-PF PG 1 DEPR | |
| FORM 9 | Asset No | 14 | 20 | 21 | 22 | 23 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | | 528111 04-01-15 |
| | | | | | | | | | | | | | | _ | |