efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493309011326 **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 Department of the

A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

C Name of organization AVAAZ FOUNDATION

Doing business as

Treasury

Internal Revenue Service

B Check if applicable ✓ Address change

Name change

OMB No 1545-0047

D Employer identification number

20-5050267

Open to Public Inspection

▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u>

l It	nitial returi	า							
F			Number and street (or P O box if ma	all is not delivered to street address) Room/su	ıto	E Teleph	one numb	per	
	/terminate nended re		27 UNION SQUARE WEST	all is not delivered to street address) Room/su	ite	(917)	388-39	988	
	plication p		City or town, state or province, coun	try, and ZIP or foreign postal code		_ (==,)			
1 14	pilodelo i i p	zemanig	NEW YORK, NY 10003			G Gross	eceipts \$	22,808,171	
			F Name and address of princip	al officer	H(a) Is i	this a group	return	for	
			RICKEN PATEL			ordinates?		☐ Yes 🗸	
			27 union squre west 500 NEW YORK, NY 10003		No		natos		
I Ta	x-exempt	status	501(c)(3) √ 501(c)(4) ◄	(insert no) 4947(a)(1) or 527		all subord luded?	nates	⊤Yes 🗸 No	
- VA	obcitou	10/10/	W AVAAZ ORG	()	If"	No," attach	alıst ((see instructions)	
	ensite:	V V V V	WAVAAZORG		H(c) Gr	oup exempt	ion num	nber 🕨	
K For	m of orga	nızatıon	✓ Corporation Trust Associa	tion Other ►	L Year of	formation 20	006 M :	State of legal domicile N	
Pa	rt I	Sumi	marv						
			cribe the organization's mission	or most significant activities					
				e and the world most people everywhe		signing up t	o receiv	ve Avaaz emails,	
œ.	mer	nbers a	are rapidly alerted to urgent glob	al issues and opportunities to achieve	change				
ance ance									
Governance									
Š	2 Ch	eck thi	is box ▶ ┌─ if the organization dis	scontinued its operations or disposed	of more than	n 25% of its	net as	sets	
ত ক	2		6	and hadro (Dank MT, long 4 a)			_	4	
Activities &			-	ng body (Part VI, line 1a)			3	4	
Ĕ				f the governing body (Part VI, line 1b)			5	3	
ict Ct			·	alendar year 2015 (Part V, line 2a)			-	63	
4			,	rt VIII, column (C), line 12			6 7a	100	
				m Form 990-T, line 34			7a 7b	0	
	D Nec	umera	tea basilless taxable illeonie ilo			ior Year	/	Current Year	
	8	Contril	hutions and grants (Part VIII lin	ne 1h)		20,136,	308	23,426,612	
알			- · · · · · · · · · · · · · · · · · · ·	ne 2g)		20,130,	330	23,420,012	
Ravenue		_		(A), lines 3, 4, and 7d)			881	423	
æ				lines 5, 6d, 8c, 9c, 10c, and 11e)		-768,		-618,864	
				(must equal Part VIII, column (A), lin	2	-		·	
		12)		(,		19,368,	355	22,808,171	
	13	Grants	and similar amounts paid (Part	IX, column (A), lines 1-3)		4,140,	255	6,635,893	
			•	X, column (A), line 4)				C	
တ္		Salarıe 5 – 10)		e benefits (Part IX, column (A), lines		4,455,	320	5,223,324	
Expenses	16a	,		column (A), line 11e)					
e d			ndraising expenses (Part IX, column (D)	, ,,	•				
ā			- ' ' ' '	nes 11a-11d, 11f-24e)		10,261,	148	10,501,524	
			, , , , , , , , , , , , , , , , , , , ,	st equal Part IX, column (A), line 25)		18,856,		22,360,741	
			·	18 from line 12	_	511,		447,430	
χ φ					Basining	<u>-</u>		<u></u>	
Net Assets or Fund Balances					Beginning	of Current	теаг	End of Year	
Bal	20	Total a	assets (Part X, line 16)			8,077,	466	9,291,235	
절	21	Totall	iabilities (Part X, line 26)			487,		1,253,596	
			sets or fund balances Subtract	line 21 from line 20		7,590,	209	8,037,639	
	rt II		ature Block	mined this return including accompan	.una cabadi	ulas and sta	tomont	a and to the heat of	
				mined this return, including accompan plete Declaration of preparer (other th					
			iowledge		,				
			**			2016 11 01			
ci		Signa	ture of officer			2016-11-04 Date			
Sigr Her		ם זכע	EN PATEL Executive Dir						
			or print name and title						
			nnt/Type preparer's name		ate	heck if	PTIN	0.70	
Pai	d	LK	enneth J Lederer	Kenneth J Lederer	S	elf-employed	P00396	3/3	
			ırm's name Lederer Levine & Assoc	F	ırm's EIN 🟲				

Use Only

Firm's address ► 1099 Wall St West Suite 280

Lyndhurst, NJ 07071

Phone no (201) 933-3780

Form	990 (2015)			Page 3
Par	t 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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I \supseteq 1, \ldots, 1, \ldots, 1, \ldots, 1, \ldots$	3	Yes	
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		No
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		No
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a			

custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of

its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets

f Did the organization's separate or consolidated financial statements for the tax year include a footnote that

Was the organization included in consolidated, independent audited financial statements for the tax year?

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

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

14a Did the organization maintain an office, employees, or agents outside of the United States? . .

for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 🔀

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

assistance to or for foreign individuals? If "Yes," complete Schedule F, Paits III and IV 🔀

IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

VIII, IX, or X as applicable

If "Yes," complete Schedule D, Part X 🕏

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Form 990 (2015)

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20a

Yes

Yes

Yes

Yes

Yes

Yes

Yes

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 😏

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

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

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Pait I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

Yes 23 24a

24b

24c

24d

25a

25b

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28a

28b

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Yes

Form 990 (2015)

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orm	990 (2015)			Page !
Pai	Statements Regarding Other IRS Filings and Tax Compliance Check of Schedule O contains a recognise or note to any line in this Part V			_
	Check if Schedule O contains a response or note to any line in this Part V	· · ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 49			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
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		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
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 organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities] 		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			

Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O **13**a Νo Enter the amount of reserves the organization is required to maintain by the states 13b in which the organization is licensed to issue qualified health plans \dots . . . ${f c}$ Enter the amount of reserves on hand **13**c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a Νo ${f b}$ If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule ${f O}$. 14b

year by the following

Section C. Disclosure

0 (2015)	
Governance, Management, and Disclosure	

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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							
Se	ection A. Governing Body and Management							
						Y	es	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a			4			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee							

1a	Enter the number of voting members of the governing body at the end of the tax year	1a	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	

Did the organization become aware during the year of a significant diversion of the organization's assets?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

Did the organization contemporaneously document the meetings held or written actions undertaken during the

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

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

Did the organization have a written document retention and destruction policy?

a The organization's CEO, Executive Director, or top management official

f b Other officers or key employees of the organization $\ldots \ldots \ldots \ldots$

List the States with which a copy of this Form 990 is required to be filed▶

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

interest policy, and financial statements available to the public during the tax year

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?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

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 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply ▼ Own website ▼ Another's website ▼ Upon request □ Other (explain in Schedule O)

State the name, address, and telephone number of the person who possesses the organization's books and records

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

▶HEATHER REDDICK 27 UNION SQUARE WEST NEW YORK, NY 10003 (917) 388-3988

affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Did the organization have members or stockholders?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

10a Did the organization have local chapters, branches, or affiliates?

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

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Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?

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7a

10b

11a

12a

12h

12c

13

14

15a

15b

16a

16b

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Nο

Νo

Form 990 (2015)

Did the organization make any significant changes to its governing documents since the prior Form 990 was

Part VII

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

(A) Name and Title	(B) A verage hours per week (list	more pers	e than son is	n one s bot	o not e box oth ar	t check ox, unle in office trustee	less cer	from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	any hours for related organizations below dotted line)	0 =		Q.			Former	organization (W- 2/1099- MISC)	(W- 2/1099- MISC)	compensation from the organization and related organizations
(1) RICKEN PATEL	40 00	l x		×			'	171,931	٥	6,58
Executive Dir	0 00	'			_	1	_'		17	
(2) ELI PARISER	1 00							· ·		
Chairman	0 00	×		Х	_		'	0	0	
(3) BEN BRANDZEL	1 00						<u> </u>		[]	
Secretary	0 00	X		Х			'	0	0	
(4) thomas pravada	1 00						Τ,			
Treasurer	0 00	X		Х			'	0	0	
(5) Emma Ruby-SACHS	40 00						Γ,	127.70(12.1
DEPUTY DIRECTOR	0 00					X	'	167,784	0	13,12
(6) HEAther reddick	40 00					x		158,208	3 0	7,16
(7) alway massall	0 00		+	₩	+	—	 			
(7) oliver maccoll Campaign Director						×	'	130,250	o	1,5
	0 00	+	+	+	+	+	+-'	+		+
(8) DALIA HASHAD Campaign Director						×	'	111,949	o	3,4
(9) daniel auron	40 00		+	+	\vdash		\vdash	102.072		6.5
campaign director	0 00				L	X	<u></u> _'	102,973	0	6,5
	4	+	₩	₩	₩	+	+'	 '		

Form 990 (2015)					Page 8
Part VII Section A. Officer	s, Directors, Tru	stees, Key Employees, and F	lighest Compens	ated Employees (continued)
(A)	(B)	(c)	(D)	(E)	(F)
Name and Title	A verage hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)	Reportable compensation from the organization (W-	Reportable compensation from related organizations (W-	Estimated amount of other compensation from the
	for related organizations	For Standard For S	2/1099-MISC)	2/1099-MISC)	organization and related

week (list any hours for related	perso and a	n is l	both	and	officer		from the organization (W-2/1099-MISC)	from related organizations (W-	compensation from the
organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		2/1099-MISC)	organization and related organizations

c	Total from continuation sheets to Part VII, Section A		
d	Total (add lines 1b and 1c)	843,095	
2	Total number of individuals (including but not limited to those listed abov \$100,000 of reportable compensation from the organization ► 7	e) who received more	than

,			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	

5

services rendered to the organization? If "Yes," complete Schedule J for such person

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

5	ection B. Independent Contractors		
1	Complete this table for your five highest compensated independent contractor compensation from the organization Report compensation for the calendar year.	• •	
	(A)	(B)	(C)
	Name and business address	Description of services	Compensation
outfr	ront media llc	advertising	100,000
	us highway 46 ield, NJ 07004		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \blacktriangleright 0

Form 990 (2015)

38,421

Νo

Form 99			6 Daniel 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					Page
Part V		Statement o	f Revenue ule O contains a respo	nse or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
र इ	1 a	Federated camp	paigns 1a					
rant	ь	Membership du	es 1 b	•				
Am G	c	Fundraising eve	ents 1 0	:				
Sifts lar	d	Related organiz	ations 1 d					
ıs, (e	Government grants	s (contributions) 1e					
tior er S	f	All other contribution	ons, gifts, grants, and 1f ot included above	23,426,612				j
Contributions, Giffs, Grants and Other Similar Amounts	g	Noncash contribution	ons included in lines					
Cont and	h	1a-1f \$ Total. Add lines	s 1a-1f		23,426,612			
				Business Code				
Program Service Revenue	2a			Business code				
P. S.	ь							
ac e	c							
Ser.	d							
ram	e f	All other progra	am service revenue					
₽og								
	g 3		ome (including divider		0			
		and other simila	aramounts)	•	423			42
	4 5		tment of tax-exempt bond	proceeds	0			
		,	(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental inco	me or (loss)	· · · · •	0			
		Gross amount	(ı) Securities	(II) Other				
	7a	from sales of assets other than inventory						
	ь	Less cost or other basis and						
	c	sales expenses Gain or (loss)						
	d		s)		0			
enne/	8a	Gross income fi	luding					
Other Revenue	<u> </u>	See Part IV, lin	a					
ŏ	c		penses b [loss] from fundraising		0			
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19 a					
	b c		penses b loss) from gaming act		0			
	10a	Gross sales of returns and allo						
	ь	Less cost of go						
	С		loss) from sales of inv		0			
	11a	Miscellaneous		Business Code 900099	-618,864			-618,86
	ь	LUSS ON FURI	EIGN CURRENCY		- 22/23 !			,,,,,,
	c							†
	d	All other revenu	ue					
	e	Total. Add lines	s 11a-11d	•	-618,864			
	12	Total revenue.	See Instructions .		22,808,171			-618,44

Form 990 (2015) Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organiz	ations must com	plete column (A)	
	Check if Schedule O contains a response or note to any line in t	 :his Part IX		.	
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and	+	expenses	general expenses	expenses
-	domestic governments See Part IV, line 21	3,722,362	3,722,362		
2	Grants and other assistance to domestic	5,,,-	5,,,		
_	individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign				
	governments, and foreign individuals See Part IV, lines 15	2 04 2 524	2 012 521		
4	and 16	2,913,531	2,913,531		
4 5	Benefits paid to or for members	0			
5	key employees	178,513	124,960	40,165	13,388
6	Compensation not included above, to disqualified persons				
	(as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	3,956,568	2,488,611	1,276,645	191,312
8	Pension plan accruals and contributions (include section 401(k)	3,750,550	2,700,011	1,2,0,0.0	171,512
-	and 403(b) employer contributions)	0			
9	Other employee benefits	476,452	301,937	151,114	23,401
10	Payroll taxes	514 704	124 574	165.066	22.454
	Food for converse (non-employees)	611,791	424,574	165,066	22,151
11	Fees for services (non-employees)	0			
a b	Management	-		106 512	32
b	Legal	125,041	18,497	106,512 81,242	32
c d	Accounting	84,398	3,156	01,474	
u e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0	 		
g	Other (If line 11g amount exceeds 10% of line 25, column (A)				
9	amount, list line 11g expenses on Schedule O)	239,743	154,289	66,070	19,384
12	Advertising and promotion	660,856	652,387	8,434	35
13	Office expenses	151,184	77,913	61,331	11,940
14	Information technology	1,552,236	1,274,482	239,444	38,310
15	Royalties	0			
16	Occupancy	571,464		133,690	23,356
17	Travel	1,049,661	916,215	120,997	12,449
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	83,079	64,780	15,025	3,274
23	Insurance	37,951		37,951	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	CAMPAIGNER FEES AND CONSULTING	5,058,202	4,224,365	628,614	205,223
b	PROGRAM EXPENSES	368,919	368,919		
c	TELEPHONE AND COMMUNICATIONS	254,981	199,849	44,889	10,243
d	COMPUTER AND EQUIPMENT MAINTEN	179,324	112,805	58,161	8,358
e	All other expenses	84,485	9,843	74,504	138
25	Total functional expenses. Add lines 1 through 24e	22,360,741	18,467,893	3,309,854	582,994
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 following SOP 98-2 (ASC 958-720)				

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22 23

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33

487,257

6,196,525

1.393.684

7.590,209

8.077,466

868,559

350,000

35,037

1,253,596

8,037,639

8.037.639

9.291,235

Form 990 (2015)

Form 990 (2015) Page **11** 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 8,735,597 7,554,433 1 Cash-non-interest-bearing 1 2 877 2 802 Savings and temporary cash investments 166,678 80,188 3 Pledges and grants receivable, net . 3 107,497 4 29,905 4 Accounts receivable, net . 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net . . C 7 7 С 8 Inventories for sale or use 8 120,891 128,143 9 Prepaid expenses and deferred charges . 9 10a Land, buildings, and equipment cost or other basis 357,075 Complete Part VI of Schedule D 10a 177,179 144,167 179,896 10b 100 b Less accumulated depreciation . 11 Investments—publicly traded securities . . 11 С 12 С 12 Investments—other securities See Part IV, line 11 С ients—program-related See Part IV, line 11 13 le assets 14 С 60,515 59,112 15 ssets See Part IV, line 11 . 8,077,466 9,291,235 16 sets.Add lines 1 through 15 (must equal line 34) 487,257

13	Investments—program-related See Part
14	Intangible assets
15	Other assets See Part IV, line 11
16	Total assets.Add lines 1 through 15 (mus
17	Accounts payable and accrued expenses
18	Grants payable
19	Deferred revenue

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Net Assets or Fund Balances

Tax-exempt bond liabilities .

Complete Part X of Schedule D

Escrow or custodial account liability Complete Part IV of Schedule D .

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L

Unsecured notes and loans payable to unrelated third parties

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

lines 27 through 29, and lines 33 and 34.

Unrestricted net assets . . .

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🕡 and complete

Check if Schedule O contains a response or note to	any	line i	ın thi:	s Pa	rt X	Ι.		
Total revenue (must equal Part VIII, column (A), line 12)								

Revenue less expenses Subtract line 2 from line 1 . . .

Other changes in net assets or fund balances (explain in Schedule O) .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

1 Accounting method used to prepare the Form 990 ☐ Cash ☐ Accrual ☐ Other

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

If the organization changed its method of accounting from a prior year or checked "Other," explain in

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

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?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

If the organization changed either its oversight process or selection process during the tax year, explain in

Net unrealized gains (losses) on investments .

Part XIII Financial Statements and Reporting

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Donated services and use of facilities .

Investment expenses

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Prior period adjustments .

Total expenses (must equal Part IX, column (A), line 25)

Both consolidated and separate basis

Both consolidated and separate basis

- 2 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4 5
 - 6
 - 7 8 9

10

1

Page **12**

22,808,171

22,360,741

447,430

7,590,209

8,037,639

No

Νo

Nο

Νo

Form 990 (2015)

Yes

Yes

2a

2b

2c

3a

3b

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493309011326 Political Campaign and Lobbying Activities OMB No 1545-0041 **SCHEDULE C** (Form 990 or For Organizations Exempt From Income Tax Under section 501(c) and section 527 990-EZ) ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at Open to Public Department of the Inspection www.irs.gov/form990. Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization Employer identification number AVAAZ FOUNDATIÓN 20-5050267 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 17,639 Volunteer hours Complete if the organization is exempt under section 501(c)(3). Part I-B Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No Was a correction made? ☐ Yes ☐ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 2 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization fileForm 1120-POL for this year? Yes ✓ No Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) A mount paid from (e) A mount of political filing organization's contributions received funds If none, enter -0and promptly and directly delivered to a separate political organization If none, enter -0-

group totals

Check ightharpoonup [if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures) Check ▶ ☐ If the filing organization checked box A and "limited control" provisions apply (b) Affiliated

(a) Filing Limits on Lobbying Expenditures organization's (The term "expenditures" means amounts paid or incurred.) totals Total lobbying expenditures to influence public opinion (grass roots 1a lobbvina) Total lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b)

Other exempt purpose expenditures

under section 501(h)).

Total exempt purpose expenditures (add lines 1c and 1d)

Lobbying nontaxable amount Enter the amount from the following table in both columns

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

Calendar year (or fiscal year

beginning in)

If the amount on line 1e, column (a) or (b) is:

Not over \$500,000

Over \$17,000,000

g

2a

Over \$500,000 but not over \$1,000,000

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

reporting section 4911 tax for this year?

Lobbying nontaxable amount

Lobbying ceiling amount (150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

\$1,000,000

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

\$100,000 plus 15% of the excess over \$500,000

\$175,000 plus 10% of the excess over \$1,000,000

\$225,000 plus 5% of the excess over \$1,500,000

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period**

(b)2013

(a)2012

The lobbying nontaxable amount is: 20% of the amount on line 1e

Yes

(c)2014

☐ No

(d)2015

Schedule C (Form 990 or 990-EZ) 2015

(e) Total

filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

(b)

A mount

(a)

No

1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess					

Taxable amount of lobbying and political expenditures (see instructions)

political expenditure next year?

Part IV Supplemental Information

does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and

2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference Explanation Part I-A, Line 1 - Direct and Indirect In the 2015 Canadian federal election, Avaaz campaigned against Conservative Party of Canada Political Campaign Activities candidates in a number of ridings, and against the party and Prime Minister Stephen Harper at a

nationwide level. Campaign tactics used included phone banks, radio and newspapers ads, lawn signs,

4

5

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(Form 990)

DLN: 93493309011326 OMB No 1545-0047

2015

Supplemental Financial Statements

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

reas	rtment of the ury nal Revenue Service	Information about Schedule D (Attach to Form 99 ► Form 990) and its instruction		gov/f	<u>orm990</u> .	Open to Inspec	
	me of the organi	zation			Empl	oyer identif	ication numb	er
AVA	AZ FOUNDATION				20 5	050267		
Pa		zations Maintaining Donor					nts.	
			(a) Donor advised fund	ds	(b)	Funds and c	other account	S
1	Total numbe	r at end of year						
2	Aggregate va year)	alue of contributions to (during						
3	Aggregate va	alue of grants from (during year)						
4	Aggregate va	alue at end of year						
5	_	ation inform all donors and donor a rganization's property, subject to t			r advis	sed	☐ Yes	┌ No
6	used only for ch	ation inform all grantees, donors, a naritable purposes and not for the rmissible private benefit?		2 2		· purpose	┌ Yes	∏ No
Pa	rt III Consei	r vation Easements. Comple	te if the organization	answered "Yes" or	n Form	າ 990, Par	t IV, lıne 7.	
1	Purpose(s) of c	onservation easements held by th	e organızatıon (check al	l that apply)				
	Preservation education)	on of land for public use (e g , recre	eation or F	 Preservation of an	histor	ically impor	tant land area	<u>.</u>
	·	of natural habitat	Г	Preservation of a c				4
	<u>-</u>	on of open space	'					
2	Complete lines	2a through 2d if the organization l le last day of the tax year	held a qualified conserva	ation contribution in th	ie form	of a conser	rvation	
						Held at	the End of th	e Year
а		f conservation easements			2a			
b	_	estricted by conservation easeme			2b			
с		servation easements on a certified		` ′	2 c			
d	historic structu	servation easements included in (c ire listed in the National Register			2d			
3		servation easements modified, trar	nsferred, released, extin	guished, or terminated	by the	e organizati	on during the	
	tax year ▶							
4	Number of state	es where property subject to conse	ervation easement is loc	ated ▶	_			
5		ization have a written policy regard enforcement of the conservation e		ring, inspection, hand	ling of	Γ	Yes N	lo
6	Staff and volunt year	teer hours devoted to monitoring, i	inspecting, handling of v	iolations, and enforcir	ig cons	ervation ea	isements duri	ng the
7	A mount of expe	enses incurred in monitoring, inspe	ecting, handling of violat	ions, and enforcing co	nserva	tion easem	ents during th	ne year
8	Does each con	servation easement reported on lir on 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the	e requirements of sect	ion 17	` ' ' _	_ Yes	lo
9	balance sheet,	escribe how the organization report and include, if applicable, the text n's accounting for conservation ea	of the footnote to the or				•	
Par	t IIII Organi	zations Maintaining Collected if the organization answere	tions of Art, Histor		r Oth	er Simila	r Assets.	
1a	If the organizat works of art, his	ion elected, as permitted under SF storical treasures, or other similar e, in Part XIII, the text of the footr	AS 116 (ASC 958), not assets held for public e	t to report in its reven xhibition, education, o	r resea	arch in furth		
b	works of art, his	ion elected, as permitted under SF storical treasures, or other similar e the following amounts relating to	assets held for public e	•				dic
((i) Revenue inclu	ded on Form 990, Part VIII, line 1	L		> \$			
(i	ii) Assets include	ed in Form 990, Part X		•	\$			
2		ion received or held works of art, h nts required to be reported under S			financ	ial gain, pro	ovide the	

Revenue included on Form 990, Part VIII, line 1

	aule D	O (Form 990) 2015 Organizations Maintaining	Collections of	Art, His	toric	cal T	reasu	ires. o	r Ot	her Similar A	SSE	ts	Page
		(continued)											
3		g the organization's acquisition, accection items (check all that apply)	ession, and other re	cords,ch	neck a	ıny of	the foll	owing th	at ar	re a significant u	se of	ıts	
а		Public exhibition		d		Loa	n or exc	hange p	rogr	ams			
b	Г	Scholarly research		е		Oth	ier						
c		Preservation for future generations											
4	Provi Part	ide a description of the organization's XIII	s collections and ex	plain ho	w they	furth	ner the c	organizat	ion's	s exempt purpos	e in		
5		ng the year, did the organization solid									• 6	┌ No	
Par	t IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		n Form	990,	Part	IV, line	e 9, or	repo	<u>'</u>			
1a		e organization an agent, trustee, cus ded on Form 990, Part X?	todian or other inte	rmediary	forco	ontrib	utions o	or other	asse	ets not	es	┌ No)
b	If	"Yes," explain the arrangement in Pa	art XIII and comple	te the fol	lowing	g tabl	e			An	noun	t	
c	Ве	eginning balance							1 c				
d	A d	dditions during the year							1 d				
e	Dis	stributions during the year							1e				
f	En	nding balance							1 f				
2a	Dıd t	he organization include an amount oi	n Form 990, Part X,	line 21,	for es	crow	orcusto	odial acc	oun	t liability? 🗀 Y e	25	□ No)
												•	
b		es," explain the arrangement in Part											Ш
Pa	rt V	Endowment Funds. Comple	te if the organiza (a)Current year		were or year				-	Part IV, line 10 d)Three years back	_	Faurus	ars back
1a	Beau	nning of year balance	(a)Current year	(6)81	ю уеа		D (C) IWC	years ba	CK (d)Tillee years back	(e)	irour ye	ars Daci
ь	-	tributions											
C	Net i	investment earnings, gains, and es											
d	Gran	nts or scholarships											
e		er expenditures for facilities programs											
f		unistrative expenses											
q		of year balance				+			-				
9		· · · · ·											
2	Provi	ide the estimated percentage of the o	current year end bal	lance (lır	e 1g,	colur	mn (a)) l	held as					
а	Board	d designated or quasi-endowment 🕨											
b	Perm	nanent endowment 🕨											
c		porarily restricted endowment ▶ percentages on lines 2a, 2b, and 2c :	should equal 100%										
3a		there endowment funds not in the pos			that a	re he	ld and a	idministe	ered	for the			
	organ	nization by										Yes	No
		nrelated organizations				•		•		<u> </u>	a(i)		
	(ii) re	elated organizations	tions listed as road							3	a(ii)		

If "Yes" on 3a(II), are the related organizations listed as required on Schedule R?

Describe in Part XIII the intended uses of the organization's endowment funds

٠	3D	

Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

(b) Cost or other basis Description of property (a) Cost or other basis Accumulated (d)Book value (c)depreciation (investment) (other) 1a Land . **b** Buildings . c Leasehold improvements d Equipment . 357,075 177,179 179,896

179,896

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

Schedule D (Form 990) 2015 Part VIII Investments—Other Securities. Com	nlete if the or	nanization answered	L'Yes' on Fo	Page rm 990 Part IV line 11h
See Form 990, Part X, line 12.	1			
(a) Description of security or category (including name of security)		(b) Book value		c)Method of valuation r end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests				
(3)Other				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII Investments—Program Related.		000 Bank IV June 44	_	
Complete if the organization answered (a) Description of investment	'Yes' on Form !	(b) Book value	C.See Form	990, Part X, line 13. D) Method of valuation
(a) Description of investment		(b) Book Value		r end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•			
Part IX Other Assets. Complete if the organization		on Form 990, Part IV,	lıne 11d See F	
(a) Descrip	otion			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organ		rod 'Vas' on Form 0		lino 110 or 11f
See Form 990, Part X, line 25.		red fes on Form 9	90, Part IV,	interite of III.
1. (a) Description of liability	(b) Book va	lue		
Federal income taxes				
DEFERRED RENT	2	5,037		
DEFERRED REINT	,	3,037		
	1			
	<u>L</u>			

35,037

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.

1 2

> d е

Part XII

1 2

d

b

Part XIII

information

Part X FIN48 Footnote

3

Schedule D (Form 990) 2015

2e

3

Net unrealized gains (losses) on investments 12,541 2b 2c

Other (Describe in Part XIII) 2d

Add lines 2a through 2d . . .

Subtract line **2e** from line **1** Amounts included on Form 990, Part VIII, line 12, but not on line 1

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Other (Describe in Part XIII)

Investment expenses not included on Form 990, Part VIII, line 7b . Add lines 4a and 4b . .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Other (Describe in Part XIII)

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

Prior year adjustments

Supplemental Information

Add lines 2a through 2d

Subtract line **2e** from line **1** . . .

Add lines 4a and 4b . .

Return Reference

Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)

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

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

Explanation

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses and losses per audited financial statements

4h

2a

2b

2c

2d

The Organizations accounting policy is to record liabilities for uncertain tax positions when a liability

is probable and estimable. Management is not aware of any violation of its tax status as an organization exempt from income taxes, nor of any exposure to unrelated business income tax

12,541

4c

2e 3

4c

22,808,171 22,373,282

Page 4

12,541

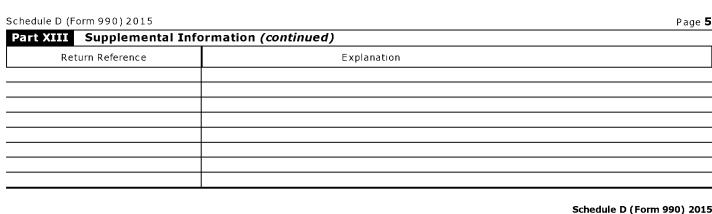
12,541

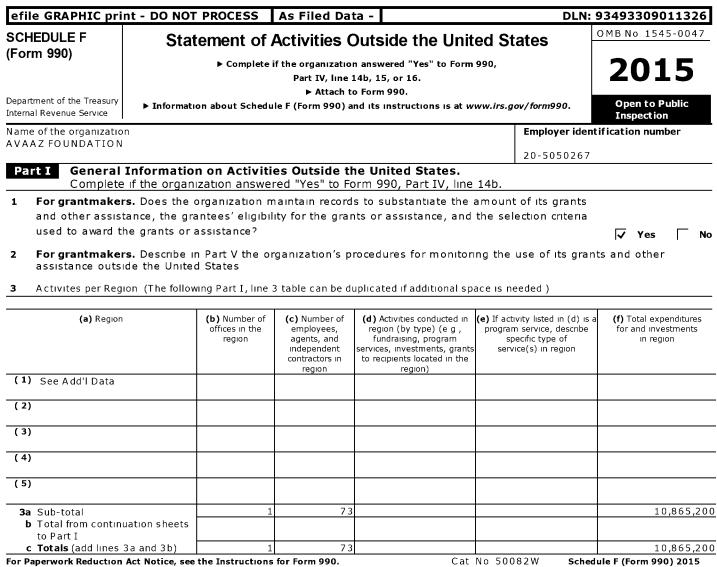
22,360,741

22,360,741

Schedule D (Form 990) 2015

22,808,171





	Part II	Grants and Other Assistance to Organ	nizations or Entities Outside the United States.
--	---------	--------------------------------------	--------------------------------------------------

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter \blacktriangleright

16

appraisal, other)

Schedule F (Form 990) 2015

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (b) Region (c) Number of (d) A mount of (e) Manner of cash (f) A mount of (g) Description (h) Method of recipients cash grant disbursement of non-cash valuation non-cash assistance assistance (book, FMV,

Part III can b	יש
(a) Type of grant or assistance	

(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Sche	edule F (Form 990) 2015			Рa	ge 4
Pa	rt IV Foreign Forms				
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	Ī✓	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Г	Yes	Ī✓	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Г	Yes	√	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Г	Yes	✓	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Г	Yes	Ī✓	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form	_		_	

┌ Yes

Schedule F (Form 990) 2015

✓ No

5713, do not file with Form 990)

90 Schedule F, Supplemental Information					
Return Reference	Explanation				
Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US	AVAAZ REQUESTS PERIODIC NARRATIVE AND FINANCIAL REPORTING OF GRANT-FUNDED ACTIVITIES FROM GRANTEES GRANTS ARE ACCOUNTED FOR UNDER THE ACCRUAL BASIS METHOD OF ACCOUNTING				

Additional Data

europe

m e & n africa

Software ID: 15000324
Software Version: 2015v2.0

EIN: 20-5050267

Name: AVAAZ FOUNDATION

campaign, advrtsg,

camp & consult, advrtsg

consult

7,062,148

943,464

Form 990 Schedule F Part I - Activities Outside The United States

0

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
e asıa & the pacıfic	0	7	1	campaign, advrtsg, consult	569,237

services

services

grants & program

grants & program

4.5

(a) Region (b) Number of (c) Number of (e) If activity listed in (d) Activities (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i e , fundraising, service, describe agents in region specific type of service region program services. grants to recipients (s) in region located in the region) Itransl & consult 55,800 russia program services Grants & Program Camp, Consult, Transl. 387,700 south america Services ladvrtsd

Grants & Program

Services

Camp, Consult, advrtsa

1,330,625

Form 990 Schedule F Part I - Activities Outside The United States

south asia.

(c) Number of (e) If activity listed in (a) Region (b) Number of (d) Activities (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i e , fundraising, service, describe agents in region specific type of service region program services, (s) in region grants to recipients located in the region) sub-saharan africa Camp, Consult, advrtsa 85,247 grants & program services C.A. & the Carribean Program Services Camp & Consul, advrtsa 4,750

Grants & Program

Services

Camp, Consult, Transl

426,229

Form 990 Schedule F Part I - Activities Outside The United States

North America

(b) IRS code (ı) Method of (g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant non-cash cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) E Asia & Pac lEnvironment 10,000 wire trans

78,025 Wire Trans

32,847 wire trans

	E Asia & Pac	Great Barr Reef	5,107	Wire Trans		

Form 990 Schedule F Part II - Grants or Entities Outside The United States

IF Asia & Pac

Europe

Great Barr Reef

Climate

(b) IRS code (ı) Method of (g) A mount of non-(h) Description of (a) Name of (f) Manner of section (e) A mount of valuation (c) Region (d) Purpose of grant non-cash cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) Europe Climate 49.816 Wire trans

5,639 Wire Transf

7,895 wire trans

Climate 5.174 Wire Transf Europe

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Climate

Edu for refugees

Europe

Europe

(b) IRS code (I) Method of (g) A mount of non-(h) Description of (a) Name of (f) Manner of section (e) A mount of valuation (c) Region (d) Purpose of grant cash non-cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) General support 74,636 WIRE TRANSF **IEurope**

449,975 wire trans

	_					
	Europe	Refugee children	16,607	wire trans		

Refugee trans 350,000 lwire trans Europe

Research on Bees

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Europe

(b) IRS code (I) Method of (q) A mount of non-(h) Description of (a) Name of (f) Manner of section (e) A mount of valuation (c) Region (d) Purpose of grant cash non-cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) Workers Rights 10.000 Wire trans **IEurope**

500,000 wire trans

M E & N africa Palestinian legal 50,000 Wire trans

M E & N africa Refugee support 14,500 Wire trans

Refugees & Migrants

Form 990 Schedule F Part II - Grants or Entities Outside The United States

M E & N africa

(b) IRS code (ı) Method of (q) A mount of non-(h) Description of (a) Name of (f) Manner of section (e) A mount of valuation (c) Region (d) Purpose of grant non-cash cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) North America Ban Fracking 10.000 Wire trans

7,300 Wire trans

	North America	plant protect	10,000	wire trans		
	South America	Climate	10,000	wire trans		

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America

lEnvironment

(b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of (f) Manner of section (e) A mount of valuation (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) South America IProtect Amazon 26.406 Wire trans South America Women's rights 5.104 wire trans

South Asia Humanitarian aid 100 000 Wire trans

Form 990 Schedule F Part II - Grants or Entities Outside The United States

	South Asia	Humanıtarıan aıd	150 000	wire trans		
	South 71314	Tramameanan ara	100,000	Mile craiis		

(b) IRS code (i) Method of (g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant non-cash cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) South Asia Humanitarian aid 200.000 Wire transf

25,000 Wire trans

554,500 wire trans

	South Asia	Humanitarian aid	25,000	wire trans		

Humanitarian aid

Humanitarian aid

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South Asia

South Asia

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region ' (d) Purpose of grant | cash non-cash and EIN(if cash disbursement (book, FMV, organization cash grant assistance assistance applicable) appraisal, other) South Asia lHumanitarian aid 80.000 Wire trans

50.000 Wire trans

lgovern in Sierra I

Sub-S Africa

efile GRAPHIC print	- DO NOT	PROCESS A	s Filed Data -				DLN: 9	93493309011326
Schedule I (Form 990) Department of the Treasury Internal Revenue Service		Gov Comple	vernments and the organization	d Individuals in answered "Yes," on Fo Attach to Form 990.	o Organizations the United Stat rm 990, Part IV, line 21 o	es or 22.	2	No 1545-0047 O 15 pen to Public Inspection
Name of the organization AVAAZ FOUNDATION							Employer identificati	on number
		n on Grants an					20-5050267	
 Does the organization the selection criterion Describe in Part IV Part II Grants and O 	on maintain r a used to awa the organiza ther Assista i	records to substant ard the grants or a tion's procedures f nce to Domestic Oi	tiate the amount of the ssistance? for monitoring the use rganizations and Dome	of grant funds in the Ur			,	▼ Yes No.
(a) Name and address organization or government	•	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Ta	able							
2 Enter total number of	of section 50	1(c)(3) and goverr	nment organizations li	sted in the line 1 table .				20
3 Enter total number of	of other organ	nizations listed in t	he line 1 table				.	0

ARE ACCOUNTED FOR UNDER THE ACCRUAL METHOD

Grants are Used

Additional Data

107 New Market Rd Immokalee, FL 34142

Center for Food Safety

660 Pennsylvania Ave SE Washington, DC 20003

235 Montgomery St Ste 1300 San Francisco, CA 94104 **Software ID:** 15000324 **Software Version:** 2015v2.0 **EIN:** 20-5050267

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

501(c)3

Name: AVAAZ FOUNDATION

52-2165893

26-2303250

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	, <i>,</i>	(f) Method of valuation (book, FMV, appraisal, other)	(h) Purpose of grant or assistance
Alliance for Fair Food	31-1681190	501(c)3	10,000	0	FMV	Campaign for fair wages

1,300,000

50,000

0 fmv

0 FMV

Seed exchange network

Climate

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) 80-0336490 501(c)3 40,000 OFMV Coalition for Open Democracy A nti-corruption

Concord, NH 03301						
dZı Foundatıon	84-1595852	501(c)3	250,000	0	fmv	Humanitarian aid Nepal

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Earth Day Network

1616 P St NW Washington, DC 20036 13-3798288

aid in Ridaway, CO 81432

75,000

OFMV

Climate rally in DC

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Embolden Alliances 46-5038231 501(c)3 26,750 0 fmv Humanitarian aid in

910 Jackson Street Suite 150 Golden,CO 80401						Nepal
Global Purpose Group 3524 Dutch Way	27-1840593	501(c)3	82,400	0	fmv	Humanitarian aid in Nepal

10,000

0 FMV

Climate education

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Carmichael, CA 95608

101 South Third Ave 12 Highland Park, NJ 08904 22-3452273

GreenFaith

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) International Medical Corps 95-3949646 501(c)3 95,000 OFMV Ebola survivor care

12400 Wilshire BlvdSTE 1500 Los Angeles, CA 90025		, ,	·			
Islands First	32-0214126	501(c)3	40,628	0	FMV	COP21

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Lake Forest, IL 60004

Small Island

V	27 15 40 244	E01/->3	10.000	c	C
300H New York, NY 10017					
800 Second Avenue Suite					Nations

Syrian refugee aid 3/-1548241 501(c)3 10,000 0 ltmv

Karam Foundation 230 Northgate 742

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıfapplıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) Nyaya Health 20-3055055 501(c)3 100,000 OFMV Humanitarian aid in

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

30 Broad Street Floor 9 New York, NY 10004						Nepal
Partners for Relief & Develop 1532 Galena Street 380	22-3786806	501(c)3	50,000	0	fmv	Aıd to Rohingya

336,000

0 fmv

Humanitarian aid in

Nepal

Aurora, CO 80010

03-0360505

Phul Mava

PO BOX 1169

Montpelier, VT 05601

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) Res Publica 13-4286728 501(c)3 6.000 0 FMV COP21 climate

	27 Union Square West STE 500	13 4200720	301(0)3	0,000			outreach
-	NEW YORK, NY 10003 Samaanta Foundation 221 Mount Auburn St Ste	46-1378068	501(c)3	535,000	0	fmv	Humanitarian aid in Nepal

135,546

0 FMV

COP21 Marshall

Islands

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

301

Foundatio

Cambridge, MA 02138
Sustainable Markets

45 West 36th St 6th Floor New York, NY 10018 13-4188834

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance arant or government assistance other)

0 FMV

Anti-sex trafficking

•	University of California 9500 Gilman Drive La Jolla.CA 92093	95-6006144	501(c)3	311,060	0	FMV	Research on Bees

250,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

World Education

44 Farnsworth Street Boston, MA 02210 13-1804349

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493309011326 **Compensation Information** OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 2015 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990. Open to Public Department of the ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** AVAAZ FOUNDATION 20-5050267 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee

During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any

For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any

For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was

4a

4b

4c

5a

5b

6a 6b

7

8

Schedule J (Form 990) 2015

Cat No 50053T

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Nο

or a related organization

The organization?

The organization?

ın Part III

Any related organization?

Any related organization?

section 53 4958-6(c)?

Receive a severance payment or change-of-control payment?

compensation contingent on the revenues of

If "Yes," on line 5a or 5b, describe in Part III

compensation contingent on the net earnings of

If "Yes," on line 6a or 6b, describe in Part III

Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement?

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

payments not described in lines 5 and 6? If "Yes," describe in Part III

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

3 RICKEN PATEL

Executive Dir

(ii)

|(ii)|

171,931

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

6,583

178,514

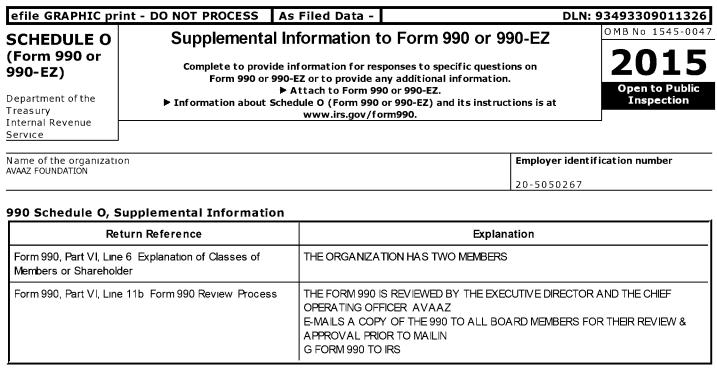
Schedule J (Form 990) 2015

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (D) Nontaxable (E) Total of columns (C) Retirement and (F) Compensation in other deferred benefits (B)(I)-(D)column(B) reported (11) (111) Base as deferred on prior compensation Bonus & incentive Other reportable (I) compensation compensation Form 990 compensation

1 Emma Ruby-SACHS 167,784 13,124 180,908 DEPUTY DIRECTOR (ii) 2 HEAther reddickCOO 158,208 7,166 165,374 Schedule J (Form 990) 2015 Page 3 Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

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Return Reference Explanation Form 990, Part VI, Line 15a Compensation COMPENSATION FOR THE EXECUTIVE DIRECTOR WAS DETERMINED BY THE independent Dayway O Ammayal Drassas CEO Tan

Management	COMPARABLE ORGANIZATION
Form 990, Part VI, Line 19 Other Organization	FORM 990 AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST FORM

LABLE ON GUIDESTAR ORG AND ON THE ORGANIZATION'S WEBSITE AVAAZ ORG

Documents Publicly Available 990 IS ALSO AVAI

990 Schedule O. Supplemental Information