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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

Open to Public Inspection

			lendar year, or tax year beginning 01-01-2015 , and ending 12-31-201. C Name of organization	5	D Emplo	ver ider	ntification number
		applicable change	AVINA AMERICAS INC				
, ⊓Nar		=	Doing business as		26-3: -	525897	
, Nai ☐ Init		-	Doing Dualificas da		<u> </u>		
Fina		.diii	Number and street (or P O box if mail is not delivered to street address) Room/sui	te	E Teleph	one numl	per
		rmınated	1875 I STREET NW NO 5 FL		(240)	476-9	537
☐ Am	ended	d return	City or town, state or province, country, and ZIP or foreign postal code		1		
☐ App	olicatio	on pending	WASHINGTON, DC 20006		G Gross i	eceipts \$	3,499,316
			F Name and address of principal officer	H(a) Ist	■■ his a group	return	for
			GUAYANA I PAEZ-ACOSTA 1875 I STREET NW NO 5 FL	sub	ordinates?		ΓYes Γ Νο
			WASHINGTON,DC 20006		all subord uded?	nates	□Yes □No
						a list	(see instructions)
I Ta:	x-exer	mpt status	▼ 501(c)(3)	H(c) Gro	up exempt	ion nun	nber ►
J W	ebsit	te:► WW	W AVINAAMERICAS ORG				
K Forr	n of o	organization	✓ Corporation Trust Association Other ►	L Year of t	ormation 20	008 M	State of legal domicile DE
Pa	rt I	Sum	mary				
			scribe the organization's mission or most significant activities				
	<u> </u>	SEE PART	TIII, LINE 1				
Governance	=						
≦	-						
§	2	Check th	is box দ if the organization discontinued its operations or disposed of	more than	25% of its	net ass	ets
	3	Number	of voting members of the governing body (Part VI, line 1a)			з	6
20 60 70			of independent voting members of the governing body (Part VI, line 1b)			4	3
Ě			mber of individuals employed in calendar year 2015 (Part V, line 2a) .			5	4
Activities &			mber of volunteers (estimate if necessary)			6	0
	7a	Total uni	related business revenue from Part VIII, column (C), line 12			7a	0
	b N	Net unrela	ated business taxable income from Form 990-T, line 34			7b	0
				Pri	or Year		Current Year
a.	8		butions and grants (Part VIII, line 1h)		3,478,999		3,495,438
Revenue	9		am service revenue (Part VIII, line 2g)			0	0
Š	10		tment income (Part VIII, column (A), lines 3, 4, and 7d)		5,964 39,374		3,878
_	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		39,	3/4	0
	12	12)	revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	!	3,524,	337	3,499,316
	13	Grants	s and similar amounts paid (Part IX, column (A), lines 1–3)		4,264,	806	3,731,545
	14	Benefi	its paid to or for members (Part IX, column (A), line 4)			0	0
ø	15		es, other compensation, employee benefits (Part IX, column (A), lines		559,	455	503,197
Expenses	16a	5-10	•		•	0	
क्	104	i Profes	ssional fundraising fees (Part IX, column (A), line 11e)	· 1		٧I	0
	h		and make a company of the try and the company of th				
ਡੌ	17		expenses (Part IX, column (D), line 25) ►0		1 80	893	1 77 706
ਡੌ	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		189, 5,014,		
ਬੁ		O ther Total	expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		5,014,	154	4,367,948
	17 18	O ther Total	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,014, -1,489,	154 817	4,367,948
	17 18 19	O ther Total Reven	expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12		5,014, -1,489, of Current	154 817 Year	4,367,948 -868,632 End of Year
	17 18 19	O ther Total Reven Total	expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12	Beginning	5,014, -1,489, of Current 4,929,	154 817 Year	4,367,948 -868,632 End of Year 3,924,793
	17 18 19 20 21	Other Total Reven Total	expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12	Beginning	5,014, -1,489, of Current 4,929, 176,	154 817 Year 640 688	4,367,948 -868,632 End of Year 3,924,793 40,473
Not Assets or Fund Balances	17 18 19 20 21 22	Other Total Reven Total Total Net as	expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12	Beginning	5,014, -1,489, of Current 4,929,	154 817 Year 640 688	4,367,948 -868,632 End of Year 3,924,793 40,473
mot Assets or and Balances	17 18 19 20 21 22 11 III r pen nowle	Other Total Reven Total Total Net as Sign nalties of edge and has any ki	expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12	Beginning ying schedu an officer) is	5,014, -1,489, of Current 4,929, 176, 4,752, les and stass based on	154 817 Year 640 688 952	4,367,948 -868,632 End of Year 3,924,793 40,473 3,884,320
Not Assets or Dudy by Bristoces	17 18 19 20 21 22 11 II r pen nowlearer h	Other Total Reven Total Total Net as Sign nalties of edge and has any ki	expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12	Beginning ying schedu an officer) is	5,014, -1,489, of Current 4,929, 176, 4,752, les and sta	154 817 Year 640 688 952	4,367,948 -868,632 End of Year 3,924,793 40,473 3,884,320
Not Assets of Dudy by British of Land British of San Dudy by San Dudy British of San D	17 18 19 20 21 22 11 II r pen nowlearer h	Other Total Reven Total Total Net as Sign altres of edge and has any kn	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	Beginning ying schedu an officer) is	5,014, -1,489, of Current 4,929, 176, 4,752, les and stass based on	154 817 Year 640 688 952	3,924,793 40,473 3,884,320 ss, and to the best of
Not Assets of Dudy by British of Land British of San Dudy by San Dudy British of San D	17 18 19 20 21 22 11 II r pen nowlearer h	Total Reven Total Total Net as Sign nalties of edge and has any ki	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	Beginning ying schedu an officer) is	5,014, -1,489, of Current 4,929, 176, 4,752, les and stass based on	154 817 Year 640 688 952 stement all info	4,367,948 -868,632 End of Year 3,924,793 40,473 3,884,320
Net Assets of Dude Balances Sign Head	17 18 19 20 21 22 11 II r pen nowle arer h	Total Reven Total Total Net as Sign nalties of edge and has any ki	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	Beginning ying schedu an officer) is	5,014, -1,489, of Current 4,929, 176, 4,752, les and stass based on	154 817 Year 640 688 952	4,367,948 -868,632 End of Year 3,924,793 40,473 3,884,320
Met Assets or and Balances	17 18 19 20 21 22 11 III r pen nowle arer h	Total Total Total Total Net as Sign nalties of edge and has any ki	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	Beginning Ving schedu an officer) is	5,014, -1,489, of Current 4,929, 176, 4,752, les and stass based on	154 817 Year 640 688 952 stement all info	4,367,948 -868,632 End of Year 3,924,793 40,473 3,884,320 es, and to the best of rmation of which

BETHESDA, MD 208142930
May the IRS discuss this return with the preparer shown above? (see instructions)

Use Only

. ✓ Yes 厂 No

Form	n 990 (2015) Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	PROMOTE THE COMMON GOOD FOR PRESENT AND FUTURE GENERATIONS IN THE AMERICAS THROUGH REGIONAL AND SS-BORDER COLLABORATION
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
	(Code) (Expenses \$ 366,074 including grants of \$ 357,313) (Revenue \$)
	AMAZON DEFORESTATION OF THE AMAZON BIOME AT THE SERVICE OF INDUSTRIAL AGRICULTURE, LIVESTOCK, HIGHWAYS, INFRASTRUCTURE, AND RURAL SETTLEMENTS DEGRADES THE BIOME AND INCREASES CARBON DIOXIDE EMISSIONS, WHILE AT THE SAME TIME REDUCING THE CAPACITY FOR CARBON DIOXIDE ABSORPTION, WHICH CONTRIBUTES TO THE GREENHOUSE EFFECT AND AFFECTS CLIMATE CHANGE AVINA CONSIDERS THE AMAZON AS A PUBLIC GOOD THAT SHOULD NOT BE TREATED IN PARTS DIVIDED BY ADMINISTRATIVE OR POLITICAL BOUNDARIES, A VISION THAT INFORMS OUR STRATEGY FOR MITIGATING CLIMATE CHANGE AND GUARANTEEING THE SUSTAINABILITY OF THE ECOSYSTEM AND THE QUALITY OF LIFE OF RESIDENTS, THROUGH THE ARTICULATION AND STRENGTHENING OF LOCAL AND REGIONAL ACTORS
	(Code) (Expenses \$ 1,972,997 including grants of \$ 1,972,997) (Revenue \$)
4b	MIGRATION IN 2013, AVINA AMERICAS JOINED FORCES WITH THE OPEN SOCIETY FOUNDATIONS, THE FORD FOUNDATION, AND FUNDACION AVINA TO FORM THE CENTRAL AMERICA AND MEXICO MIGRATION ALLIANCE (CAMMINA) CAMMINA'S MAIN OBJECTIVES ARE TO PROMOTE SUSTAINABLE REGIONAL MIGRATION AND POLICY REFORMS THROUGH COORDINATED NATIONAL AND LOCAL AWARENESS RAISING EFFORTS, ADVANCE AND PROTECT THE HUMAN RIGHTS OF MIGRANTS, AND SUPPORT LOCAL DEVELOPMENT IN MIGRANT SENDING AREAS SO THAT MIGRANTS HAVE A VIABLE OPTION TO STAY IN THEIR COMMUNITIES OF ORIGIN THESE EFFORTS WILL STRENGTHEN INTERNATIONAL MIGRANT NETWORKS IN BECOMING OPERATIONALLY AND FINANCIALLY SUSTAINABLE, IMPROVE THE FRAMEWORK FOR PROTECTING HUMAN RIGHTS AMONG COUNTRIES IN THE REGION, AND CREATE MODELS FOR THE PRODUCTIVE INVESTMENT OF REMITTANCES IN COMMUNITIES OF ORIGIN
4 c	(Code) (Expenses \$ 806,686 including grants of \$ 788,170) (Revenue \$) TECHNOLOGY FOR SOCIAL CHANGE CONSIDERING THAT 78% (445 MILLION) OF LATIN AMERICANS RESIDE IN URBAN AREAS AND 120 MILLION OF THEM LIVE BELOW THE POVERTY LINE, AVINA BELIEVES THAT AN IMPORTANT PART OF THE SOLUTION TO THIS SITUATION IS TO BE FOUND IN IMPROVED LOCAL GOVERNANCE, SPECIFICALLY EFFICIENT AND ACCOUNTABLE URBAN POLICIES AND MANAGEMENT PRACTICES TRANSPARENCY AND ACCOUNTABILITY MECHANISMS ARE FUNDAMENTAL TO ADDRESSING URBAN PROBLEMS, AND THE USE OF INFORMATION AND COMMUNICATION TECHNOLOGIES (ICTS) PLAYS A PIVOTAL ROLE IN THE SUCCESS OF THESE MECHANISMS IN PARTICULAR, THE "CIVIC APPLICATIONS INNOVATION FUND" WILL HARNESS TECHNOLOGY TO PROMOTE ACCOUNTABILITY AND SOCIAL CHANGE IN LATIN AMERICA THE FUND WILL BE DEVELOPED IN ALLIANCE WITH OMIDYAR NETWORK, AS PART OF ITS STRATEGY ON TECHNOLOGY AND INNOVATION FOR URBAN GOVERNANCE AND GOVERNMENT TRANSPARENCY AND ACCOUNTABILITY
	See Additional Data
4d	Other program services (Describe in Schedule O) (Expenses \$ 877,945 including grants of \$ 613,065) (Revenue \$)
4e	Total program service expenses ► 4,023,702

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f 2}$	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	3		No
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	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 negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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 valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^7$ If "Yes," complete Schedule G, Part I (see instructions)	17		Νo
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	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 and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νo
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	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.	38	Yes	

	Chatamanta Banandina Othan IDC Filings and Tan Canadiana			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	· ·		<u>.,</u>
_		_	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a	5		
Ь	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable	0		
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	4		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1 00	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		'''
		36		
48	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		Νo
ь	If "Yes," enter the name of the foreign country			
	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		Νo
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
		30		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
Oa	organization solicit any contributions that were not tax deductible as charitable contributions?	l oa		100
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gif	s		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			N
	file Form 8282?	7c		Νo
a	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
_		7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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	76		
_	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		
0-	Did the analysis are supplied and to supplie distributions and day as then 40002			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	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			
	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)			
	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		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions fo additional information the organization must report on Schedule O	13a		
L		13a		
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		1110
ט	11 165, has it lied a Form 720 to report these payments 11 No, provide an explanation in Schedule U		orm on	<u> </u>
		-	01111 99	# (∠UID)

Part VI	Governance,	Management,	and	Disclosure
---------	-------------	-------------	-----	------------

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 6			
	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 3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	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? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		Νo
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
	List the States with which a copy of this Form 990 is required to be filed▶			
18	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)			

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

State the name, address, and telephone number of the person who possesses the organization's books and records ▶JUAN CARLOS ALCALDE 1875 I STREET NW NO 5 FL WASHINGTON, DC 20006 (301)704-0282

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	check , unle n office ustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) SEAN MCKAUGHAN CHAIR	0 50	х		х				0	250,000	20,000
(2) BRIZIO BIONDI-MORRA TREASURER	0 50	х		х				0	79,080	7,490
(3) CHRISTIAN SAGEL SECRETARY (BEGAN NOV 2015)	0 50	х		х				0	44,011	0
(4) JOHN C ICKIS BOARD MEMBER (SEE SCHED O)	0 50	х						7,500	0	0
(5) LARRY SLESINGER BOARD MEMBER (SEE SCHED 0)	0 50	х						7,500	0	0
(6) KATHERINE MARSHALL BOARD MEMBER (SEE SCHED 0)	0 50	х						7,500	0	0
(7) GUAYANA I PAEZ-ACOSTA EXECUTIVE DIRECTOR	43 21			х				133,366	0	14,938
(8) JORGE ADRIAN NARANJO DIRECTOR OPERATIONS	40 00					х		117,385	0	14,376

t VII	Section A. Officers	Directors,	Trustees,	Kev Emr	olovees	, and Highest	Compensated I	mplovees	(continued
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	(A) Name and Title	(B) A verage hours per week (list any hours	more t	tion (han (n is	ne l both	box, an d	heck unless officer stee)		(C Repor comper from organiza	table nsation the tion (W-	ation compensation le from related in (W- organizations (W-		nated of other nsation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)	organiza rela organiz	ted
1b	Sub-Total			•	•		•						
c d	Total from continuation sheet Total (add lines 1b and 1c) .	=			•	٠.	. •		27:	3,251	373,091		56,804
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	ho receive	d more th	an		
												Yes	No
3	Did the organization list any f oon line 1a? <i>If "Yes," complete 5</i>					key •	emplo	yee, •	or highes	t compen		3	No
4	For any individual listed on line organization and related organ individual										uch	4 Yes	
5	Did any person listed on line 1 services rendered to the organ			•						anızatıon • • •	or individual for	5	No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization from the organizati	ve highest comp											r
	N	(A) lame and business	address							Des	(B) cription of services		C) ensation

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 0

Form 99	90 (20	15)						Page 9
Part V	/1111	Statement of Reven						_
		Check if Schedule O conf		se or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इ इ	1a	Federated campaigns .	. 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
s, G Am	С	Fundraising events	1c					
Gift. Ilar	d	Related organizations .	1d	215,970				
ii š	е	Government grants (contribution	ons) 1e					
tior S r	f	All other contributions, gifts, gi		3,279,468				
ag 美	g	Noncash contributions included						
onti nd (, h	1a-1f \$ Total. Add lines 1a-1f .			3,495,438			
<u>ਹ ਜ਼</u>		Total. Add filles 1a-11 .			0,.50,.00			
une Line	2a		-	Business Code				
ege Se	Ь							
e E	С							
Program Service Revenue	d							
	e							
	f	All other program service	e revenue					
<u>Ť</u>	g	Total. Add lines 2a-2f.						
	3	Investment income (incl and other similar amount			3,878			3,878
	4	Income from investment of ta						
	5	Royalties		🕨				
			Real	(II) Personal				
	oa	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (los						
	7a	Gross amount (1) Sec	curities	(II) Other				
		from sales of assets other than inventory						
	ь	Less cost or other basis and sales expenses						
	C	Gain or (loss)						
άs	d 8a	Net gain or (loss) Gross income from fundra						
Other Revenue		events (not including \$						
er Re		of contributions reported See Part IV, line 18 .						
햠	ь	Less direct expenses	ь[
-		Net income or (loss) from	_	vents 🛌				
	9a	Gross income from gamii See Part IV, line 19 .						
	b	Less direct expenses	ь					
		Net income or (loss) fron	_	ities				
	10a	Gross sales of inventory returns and allowances						
	ь	Less cost of goods sold	ь					
	С	Net income or (loss) from						
	4.	Miscellaneous Revenue		Business Code				
	11a							
	b c		——					
	d	All other revenue	 					
	e	Total. Add lines 11a-11	d	🛌				
	12	Total revenue. See Instr	uctions	🛌	2 400 216			2 979

3,499,316

Part	•									
Section	ction 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)									
	Check if Schedule O contains a response or note to any line in th	ıs Part IX								
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	814,386	814,386							
2	Grants and other assistance to domestic individuals See Part IV, line 22									
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	2,917,159	2,917,159							
4	Benefits paid to or for members	· · ·	, ,							
5	Compensation of current officers, directors, trustees, and key employees	170,804	118,643	52,161						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			·						
7	Other salaries and wages	267,748	98,983	168,765						
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	9,031	3,219	5,812						
9	Other employee benefits	26,092	10,500	15,592						
10	Payroll taxes	29,522	15,138	14,384						
11	Fees for services (non-employees)									
а	Management									
b	Legal	5,780		5,780						
c	Accounting	30,450	16,022	14,428						
d	Lobbying									
e	Professional fundraising services See Part IV, line 17									
f	Investment management fees									
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	18,411	5,273	13,138						
12	Advertising and promotion									
13	Office expenses	12,962	8,062	4,900						
14	Information technology	804		804						
15	Royalties									
16	Occupancy	20,547	10,811	9,736						
17	Travel	20,409		20,409						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	10,429		10,429						
20	Interest	30	16	14						
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	1,137	598	539						
23 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	4,006	2,108	1,898						
	Schedule O)									
a	PAYROLL SERVICES	2,369	1,215	1,154						
Ь	BUSINESS FILINGS	2,021	1,063	958						
C	TRAINING EXPENSE	1,515		1,515						
d	FINANCE EXPENSES	60	32	28						
е ЭЕ	All other expenses	2,276	474	1,802						
25	Total functional expenses. Add lines 1 through 24e	4,367,948	4,023,702	344,246	0					
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)									

Form 990 (2015) Page 11 Part X **Balance Sheet** (A) (B) Beginning of year End of year 333,602 58,084 1 Cash-non-interest-bearing 1 2 4.078.454 2 2.362.033 Savings and temporary cash investments 500.698 1,485,408 3 3 4 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 7 7 8 8 12,553 14,191 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 12,633 Complete Part VI of Schedule D 10a b 10b 7.556 4.333 10c 5,077 Less accumulated depreciation 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . 14 14 15 15 16 **Total assets.**Add lines 1 through 15 (must equal line 34) . 4,929,640 16 3,924,793 24,938 17 17 40,473 Accounts payable and accrued expenses 151,750 18 18 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 . 176.688 26 40,473 26 **Total liabilities.**Add lines 17 through 25 . . . Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete Balance lines 27 through 29, and lines 33 and 34. 40.965 144,954 27 27 4,607,998 3,843,355 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 4,752,952 3,884,320 33 4.929.640 Total liabilities and net assets/fund balances 34 3.924.793

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		•		୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,4	199,316
2	Total expenses (must equal Part IX, column (A), line 25)	2		4,3	367,948
3	Revenue less expenses Subtract line 2 from line 1	3			368,632
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4.7	752,95
5	Net unrealized gains (losses) on investments	5		,	,
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3,8	384,320
Par	t XIII Financial Statements and Reporting			·	
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. ୮</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Additional Data

Software ID:

Software Version:

EIN: 26-3525897

Name: AVINA AMERICAS INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code RECYCLING) (Expenses \$	357,382	including grants of \$	249,155) (Revenue \$)
(Code CITIES) (Expenses \$	156,788	including grants of \$	30,137) (Revenue \$)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

1 01111 330, Fait 111	+ Frogram Scrvic	C Accompi	simicitis (See the Tha	ti actions,	
(Code) (Expenses \$	172,865	including grants of \$	172,865) (Revenue \$)
GENERAL PRO GRAM					
(Code) (Expenses \$	177,765	ıncludıng grants of \$	160,908) (Revenue \$)
ACCESS TO WATER					

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 13,145 including grants of \$) (Revenue \$)
INCLUSIVE MARKETS

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493132040936

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

	2015
	Open to Public Inspection
ntifi	cation number

Employer idea Name of the organization AVINA AMERICAS INC 26-3525897 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement. (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other organization listed in your governing monetary support support (see (described on lines document? (see instructions) instructions) 1-9 above (see instructions)) Yes

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) 🟲 1 Gifts, grants, contributions, and 5,250,077 6,745,535 6,609,822 3,478,999 3,495,438 25,579,871 membership fees received (Do not include any unusual grants) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 5,250,077 6,745,535 6,609,822 3,478,999 25,579,871 3,495,438 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included 18,810,520 on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 6,769,351 from line 4 Section B. Total Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) 🟲 5,250,077 6,745,535 6,609,822 3,478,999 3,495,438 25,579,871 Amounts from line 4 Gross income from interest. dividends, payments received on 40,899 5,366 6,949 5,964 3,878 63,056 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 9,559 42,907 39,374 91,840 capital assets (Explain in Part VI) Total support. Add lines 7 25,734,767 through 10 12 Gross receipts from related activities, etc (see instructions) 12 232,530 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization. Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 14 26 300 % Public support percentage for 2014 Schedule A, Part II, line 14 15 15 22 850 % 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported **▶**▽ organization b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2015 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar vear (a)2011 (d)2014 **(b)**2012 (c)2013 (e)2015 (f)Total (or fiscal year beginning in) 🕨 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt nurnose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support. (Subtract line 7c from line 6) Section B. Total Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2014 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))

Investment income percentage from 2014 Schedule A, Part III, line 17

18

►ſ

17

18

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked

Section A. All Supporting Organizations			
I, complete Sections A and D, and complete	te Part V)		
11b of Part I, complete Sections A and C	If you checked 11c of Part I, com	iplete Sections A , D , and E If y	ou checked 11d of Par

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		ı
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		ı
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised	4b		
c	by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		ı
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
C	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		l
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		

Pai	Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b	The organization is the parent of each of its supported organizations Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
Ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ŀ	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			uct ions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
!	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
,	Other expenses (see instructions)	7		
1	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
i	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting o	rganızatıon (see

Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (c	· · · · · · · · · · · · · · · · · · ·						
Section D - Distributions			Current Year						
1 Amounts paid to supported organizations to accom	plish exempt purposes								
2 A mounts paid to perform activity that directly furth excess of income from activity	ers exempt purposes of supp	oorted organizations, in							
3 Administrative expenses paid to accomplish exemp									
4 Amounts paid to acquire exempt-use assets									
5 Qualified set-aside amounts (prior IRS approval re	quired)								
6 Other distributions (describe in Part VI) See instru	uctions								
7 Total annual distributions. Add lines 1 through 6									
Distributions to attentive supported organizations to details in Part VI) See instructions	to which the organization is r	esponsive (provide							
9 Distributable amount for 2015 from Section C, line	6								
10 Line 8 amount divided by Line 9 amount									
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015						
1 Distributable amount for 2015 from Section C, line 6									
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)									
3 Excess distributions carryover, if any, to 2015									
d From 2013									
e From 2014									
f Total of lines 3a through e									
g Applied to underdistributions of prior years									
h Applied to 2015 distributable amount									
 Carryover from 2010 not applied (see instructions) 									
j Remainder Subtract lines 3g, 3h, and 3i from 3f									
4 Distributions for 2015 from Section D, line 7									
\$									
a Applied to underdistributions of prior years									
b Applied to 2015 distributable amount									
c Remainder Subtract lines 4a and 4b from 4									
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)									
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (If amount greater than zero, see instructions)									
7 Excess distributions carryover to 2016. Add lines 31 and 4c									
8 Breakdown of line 7									
c Excess from 2013									
d From 2014									
e From 2015									

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

AVINA AMERICAS QUALIFIES AS A "PUBLICLY SUPPORTED ORGANIZATION UNDER IRC 170(B)(1)(A)(VI) BECAUSE IT SATISFIES THE "FACTS AND CIRCUMSTANCES" TEST SET FORTH IN TREAS REG 1 170A-9(F)(3) AVINA AMERICAS NORMALLY RECEIVES AT LEAST 10% OF ITS SUPPORT FROM THE GENERAL PUBLIC AND IT CARRIES ON A CONTINUOUS AND BONA FIDE PROGRAM OF SOLICITATION OF PUBLIC SUPPORT MOREOVER, AVINA AMERICAS MEETS THE FOLLOWING FACTORS ENUMERATED IN THE TREASURY REGULATIONS AS BEING INDICATIVE OF PUBLIC SUPPORT 1 PERCENTAGE OF FINANCIAL SUPPORT TREAS REG 1 170A-9(F)(3)(III)(A) DURING THE SIX-YEAR PERIOD ENDING ON DECEMBER 31, 2015, THE PORTION OF AVINA AMERICAS' SUPPORT THAT QUALIFIES AS ELIGIBLE PUBLIC SUPPORT IS 26 30% (SEE SCHEDULE A), IN EXCESS OF THE 10% THRESHOLD IN ADDITION, THIS PERCENTAGE HAS INCREASED SINCE THE PERIOD ENDING ON DECEMBER 31, 2014 (WHICH WAS 22 85%) 2 SOURCES OF SUPPORT TREAS REG 1 170A-9(F)(3)(III)(B) AVINA AMERICAS RECEIVES CONTRIBUTIONS FROM A WIDE RANGE OF DONORS DURING THE PAST FIVE TAX YEARS, AVINA AMERICAS HAS RECEIVED GENEROUS SUPPORT FROM ORGANIZATIONS INCLUDING - THE BILL & MELINDA GATES FOUNDATION - OMIDY AR NETWORK- SKOLL FOUNDATION - OPEN SOCIETY FOUNDATIONS - THE COCA-COLA FOUNDATION - ROCKEFELLER FOUNDATION - FORD FOUNDATION -XYLEM WATERMARK- HALLORAN PHILANTHROPIES- THE MILLION CHILDREN FOUNDATION. THE MOSAIC COMPANY FOUNDATION- DALIO FAMILY FOUNDATION- FUNDACION AVINA- GORDON AND BETTY MOORE FOUNDATION- PORTICUS LATIN AMERICA- PEPSICO, INC -NATIONAL PHILANTHROPIC TRUSTTHE ORGANIZATION ALSO COLLABORATES WIDELY WITH ACADEMIC, CIVIL SOCIETY, GOVERNMENT AND DEVELOPMENT ORGANIZATIONS IN THE US FOCUSED ON SUSTAINABLE DEVELOPMENT IN THE AMERICAS, INCLUDING THE INTER-AMERICAN DIALOGUE, INTER-AMERICAN DEVELOPMENT BANK, INTER-AMERICAN FOUNDATION, AND AMERICAS SOCIETY, AMONG OTHERS FUNDRAISING IS LED BY THE EXECUTIVE DIRECTOR AND GENERALLY TAKES THE FORM OF WRITTEN GRANT REQUESTS FOLLOWING PERSONAL CONTACTS WITH POTENTIAL FUNDERS (C) REPRESENTATIVE GOVERNING BODY TREAS REG 1 170A-9(F)(3)(III) (C) AVINA AMERICAS' GOVERNING BODY REPRESENTS BROAD PUBLIC INTERESTS, RATHER THAN THE PERSONAL OR PRIVATE INTERESTS OF A LIMITED NUMBER OF DONORS THE BOARD OF DIRECTORS INCLUDES REPRESENTATIVES FROM SEVERAL DIFFERENT ORGANIZATIONS AND INCLUDES SEAN MCKAUGHAN, CHAIR OF THE BOARDMR MCKAUGHAN HAS BEEN WITH AVINA SINCE 1998, AND LED AVINA'S EXECUTIVE TEAM FOR SEVEN YEARS HE BECAME CHIEF OPERATING OFFICER IN 2006, AND WAS TAPPED AS CHIEF EXECUTIVE OFFICER AND BOARD MEMBER IN 2007 DURING HIS TIME AT AVINA, MR MCKAUGHAN HAS BEEN A CHAMPION AND GLOBAL ADVOCATE FOR INCLUSIVE BUSINESS, EFFORTS TO COMBAT DEFORESTATION, SOCIAL INNOVATION NETWORKS, AND THE PROMOTION OF SUSTAINABILITY IN LATIN AMERICA AND THROUGHOUT THE WORLD HE WAS ONE OF THE MAIN ARCHITECTS OF THE STRATEGY AND IMPLEMENTATION OF AVINA PROGRAMS IN BRAZIL MR. MCKAUGHAN HOLDS MASTER'S DEGREES IN URBAN PLANNING AND IN LATIN AMERICAN STUDIES FROM THE UNIVERSITY OF TEXAS AT AUSTIN BEFORE BEGINNING HIS WORK WITH AVINA, HE COLLABORATED WITH INSTITUTIONS SUCH AS BRAZIL'S INSTITUTE OF APPLIED ECONOMIC RESEARCH (IPEA), THE LYNDON B JOHNSON SCHOOL OF PUBLIC AFFAIRS, THE HOUSTON ADVANCED RESEARCH CENTER (HARC), MEXICO'S MONTERREY INSTITUTE OF TECHNOLOGY AND HIGHER EDUCATION, THE TEXAS WORKFORCE COMMISSION, AND THE CENTER FOR THE STUDY OF WESTERN HEMISPHERIC TRADE BRIZIO BIONDI-MORRA, TREASURERDR BIONDI-MORRA IS THE FORMER PRESIDENT OF FUNDACION AVINA HE IS ALSO THE FORMER CHAIR OF FUNDES, WHICH PROMOTES SMALL AND MEDIUM ENTERPRISE (SME) DEVELOPMENT IN TEN LATIN AMERICAN COUNTRIES, AS WELL AS THE CHAIR OF INCAE, THE LEADING LATIN AMERICAN BUSINESS SCHOOL WITH CAMPUSES IN COSTA RICA AND NICARAGUA DR BIONDI-MORRA GRADUATED WITH A DOCTORAL DEGREE IN BUSINESS ADMINISTRATION FROM HARVARD UNIVERSITY AND ALSO EARNED A PH D IN ECONOMICS FROM BOCCONI UNIVERSITY IN ITALY IN HIS PROFESSIONAL CAREER, HE HAS BEEN A MANAGEMENT CONSULTANT AT ARTHUR D LITTLE IN CAMBRIDGE, MASSACHUSETTS, FOUNDED A CHEMICAL COMPANY IN NEW YORK AND WORKED IN MARKETING FOR E. I DU PONT DE NEMOURS & CO IN EUROPE DR JOHN C ICKIS, DIRECTORDR ICKIS IS A FORMER DEAN AND PROFESSOR OF BUSINESS ADMINISTRATION AT INCAE, THE TOP-RANKED BUSINESS SCHOOL IN LATIN AMERICA HE HOLDS A DOCTORATE OF BUSINESS ADMINISTRATION AND AN MBA FROM HARVARD UNIVERSITY HE HAS PUBLISHED NUMEROUS ARTICLES AND CASES ON SOCIAL MANAGEMENT TOPICS IN JOURNALS, SUCH AS THE HARVARD BUSINESS REVIEW AND WORLD DEVELOPMENT, AND IS CO-AUTHOR OF BEY OND BUREAUCRACY STRATEGIC MANAGEMENT OF SOCIAL DEVELOPMENT DRICKIS HAS HELD THE POSITIONS OF PRESIDENT OF JE AUSTIN ASSOCIATES, INC, AN INTERNATIONAL CONSULTING FIRM SPECIALIZING IN ECONOMIC AND SOCIAL DEVELOPMENT, AND CHIEF-OF-PARTY OF THE CROATIAN COMPETITIVENESS INITIATIVE. HIS RECENT ACTIVITIES HAVE FOCUSED UPON THE PROMOTION OF COMPETITIVENESS IN EMERGING ECONOMIES THROUGH ENTREPRENEURIAL ACTIVITY HE IS A FORMER PEACE CORPS VOLUNTEER, A SOWETO, SOUTH AFRICA HONORARY CITIZEN AND APPEARS IN THE INTERNATIONAL WHO'S WHO OF PROFESSIONALS, WHO'S WHO IN THE WORLD AND WHO'S WHO IN FINANCE AND INDUSTRY KATHERINE MARSHALL, DIRECTORKATHERINE MARSHALL HAS WORKED FOR OVER FOUR DECADES ON INTERNATIONAL DEVELOPMENT, FOCUSING ON THE WORLD'S POOREST COUNTRIES A SENIOR FELLOW AT GEORGETOWN UNIVERSITY'S BERKLEY CENTER FOR RELIGION, PEACE AND WORLD AFFAIRS AND PROFESSOR OF THE PRACTICE OF DEVELOPMENT, RELIGION, AND CONFLICT IN THE SCHOOL OF FOREIGN SERVICE, SHE IS THE EXECUTIVE DIRECTOR OF THE WORLD FAITHS DEVELOPMENT DIALOGUE (WFDD), A NON-GOVERNMENTAL ORGANIZATION BORN IN THE WORLD BANK WFDD'S MISSION (AND CENTER OF MARSHALL'S CURRENT WORK) IS TO BRIDGE GULFS SEPARATING THE WORLDS OF DEVELOPMENT AND RELIGION DURING HER CAREER AT THE WORLD BANK SHE HELD LEADERSHIP ASSIGNMENTS FOR AFRICA, LATIN AMERICA, AND EAST ASIA AND WAS COUNSELOR TO THE BANK'S PRESIDENT ON ETHICS, VALUES, AND FAITH IN DEVELOPMENT BOARD POSITIONS INCLUDE AVINA AMERICAS, THE OPUS PRIZE FOUNDATION, THE INTERNATIONAL SHINTO FOUNDATION, AND THE INTERNATIONAL ANTI-CORRUPTION CONFERENCE ADVISORY BOARD, SHE SERVED AS A TRUSTEE OF PRINCETON UNIVERSITY AND OF THE WASHINGTON NATIONAL CATHEDRAL FOUNDATION A MEMBER OF THE COUNCIL ON FOREIGN RELATIONS SHE IS VISITING PROFESSOR AT THE UNIVERSITY OF CAMBODIA SHE IS THE AUTHOR OF SEVERAL BOOKS AND MANY ARTICLES, MOST RECENTLY GLOBAL INSTITUTIONS OF RELIGION ANCIENT MOVERS, MODERN SHAKERS, PUBLISHED BY ROUTLEDGE IN 2013 AND (COEDITED WITH SUSAN HAYWARD) WOMEN, RELIGION, AND PEACEBUILDING ILLUMINATING THE UNSEEN LARRY H SLESINGER, DIRECTORMR SLESINGER IS AN EXECUTIVE SEARCH CONSULTANT WITH SLESINGER MANAGEMENT SERVICES, RECRUITING KEY LEADERSHIP AND MANAGEMENT POSITIONS FOR NONPROFIT ORGANIZATIONS IN THE WASHINGTON, DC AREA HE GRADUATED WITH AN MBA FROM STANFORD UNIVERSITY AND A BACHELOR'S DEGREE FROM CARLETON COLLEGE. HE HAS EXTENSIVE EXPERIENCE WITH NONPROFIT MANAGEMENT, CURRENTLY SERVING AS AN ADMINISTRATOR FOR THE FOUNDATION FOR MANAGEMENT EDUCATION IN CENTRAL AMERICA, WHICH ASSISTS THE HIGHLY-REGARDED BUSINESS GRADUATE SCHOOL, INCAE. MR. SLESINGER FORMERLY SERVED AS THE VP OF THE CARNEGIE ENDOWMENT FOR INTERNATIONAL PEACE, SPECIAL ASSISTANT TO THE PRESIDENT OF THE INTER-AMERICAN FOUNDATION, PROGRAM OFFICER OF THE JOHN AND MARY R MARKLE FOUNDATION AND VP OF BOARDSOURCE. HE IS THE AUTHOR OF THE SEARCH. WINNING STRATEGIES TO GET YOUR NEXT JOB IN THE NONPROFIT WORLD, SELF-ASSESSMENT FOR NONPROFIT GOVERNING BOARDS AND CO-AUTHOR OF THE FIRST EDITION OF A SNAPSHOT OF AMERICA'S NONPROFIT BOARDS RESULTS OF A NATIONAL SURVEY CHRISTIAN SAGEL, SECRETARY MR SAGEL HAS BEEN WITH AVINA SINCE 2014 HE IS RESPONSIBLE FOR THE LEGAL AREA, WITH HEADQUARTERS IN PANAMA, AND

COLLABORATES WITH THE CFO OF THE ORGANIZATION IN POTENTIAL CRISIS MANAGEMENT AND ELABORATION OF POLICIES HIS

EXPERTISE INCLUDES CORPORATE LAW, CONFLICTS CONCILIATION, AND LAW ECONOMICS MANAGEMENT MR SAGEL HOLDS A MASTER'S DEGREE IN LAW ECONOMICS FROM THE UNIVERSITY OF BUENOS AIRES IN ARGENTINA HE ALSO HOLDS A DEGREE IN LAW IN POLITICAL SCIENCES FROM THE CATHOLIC UNIVERSITY SANTA MAR A LA ANTIGUA IN PANAMA MR SAGEL HAS PARTICIPATED AS A VOLUNTEER IN

FACTS AND CIRCUMSTANCES TEST (

PART II, SECTION C, LINE 17A,

Return Reference

SEVERAL SOCIAL SERVICE ACTIVITIES IN RURAL AREAS OF PANAMA

GUAYANA PAEZ ACOSTA, EXECUTIVE DIRECTOR MS PAEZ ACOSTA CURRENTLY SERVES AS THE EXECUTIVE DIRECTOR AT AVINA AMERICAS SHE HOLDS A MASTER OF SCIENCE IN ENVIRONMENT AND SUSTAINABLE DEVELOPMENT FROM UNIVERSITY COLLEGE LONDON, GRADUATED IN SOCIOLOGY - FIRST IN CLASS - FROM ANDRES BELLO CATHOLIC UNIVERSITY IN VENEZUELA, AND WAS AWARDED THE BRITISH CHEVENING SCHOLARSHIP BY THE FOREIGN AND COMMONWEALTH OFFICE UK AND THE BRITISH COUNCIL SHE HAS DEVOTED HER PROFESSIONAL CAREER TO PROBLEM SOLVING AT THE INTERSECTION OF DEVELOPMENT AND THE ENVIRONMENT FOCUSING ON DESIGNING INTERVENTIONS THAT SEEK TO CONTRIBUTE TO BALANCE CONSERVATION AND SUSTAINABLE DEVELOPMENT GOALS IN LATIN AMERICA MS PAEZ ACOSTA HAS HELD POSITIONS WITH INTERNATIONAL ENVIRONMENTAL NON-GOVERNMENTAL ORGANIZATIONS, AND PHILANTHROPIC AND SCIENTIFIC INSTITUTIONS INCLUDING CONSERVATION INTERNATIONAL, THE CARNEGIE INSTITUTION FOR SCIENCE'S GLOBAL ECOLOGY DEPARTMENT AT STANFORD UNIVERSITY FUNDACION TIERRA VIVA AND CENTER FOR DEVELOPMENT STUDIES UCV-VENEZUELA SHE HAS ALSO CONSULTED FOR ECOLOGY & ENVIRONMENT S A , THE GORDON AND BETTY MOORE FOUNDATION AND UNESCO'S SOUTH-SOUTH COOPERATION AND SUSTAINABLE DEVELOPMENT PROGRAM SHE BEGAN WORKING AT FUNDACION AVINA IN 2011 WHERE SHE LED PROGRAMMATIC EFFORTS FOR THE AMAZON REGION AND ENGAGED WITH SEVERAL AVINA PROGRAMS AND TEAMS FOR THE DEVELOPMENT OF INSTITUTIONAL ALLIANCES WITH PRIVATE AND PUBLIC ORGANIZATIONS IN ADDITION TO HER ROLE IN AVINA AMERICAS SHE IS A DIRECTOR LEVEL MEMBER OF THE FUNDACION AVINA STRATEGIC ALLIANCES DIRECTION (D) PUBLIC PARTICIPATION IN PROGRAMS OR POLICIES TREAS REG 1 170A-9(F)(3)(III)(D) FINALLY, AVINA AMERICAS' CHARITABLE MISSION AND PROGRAMS ARE DIRECTLY FOR THE BENEFIT OF THE GENERAL PUBLIC ON A CONTINUING BASIS ITS CHARITABLE MISSION IS FOCUSED ON CONTRIBUTING TO THE SUSTAINABLE DEVELOPMENT OF LATIN AMERICA AVINA AMERICAS HAS AN ACTIVE GRANTMAKING PROGRAM THROUGH WHICH IT SUPPORTS AND PARTNERS WITH CHARITABLE ORGANIZATIONS BOTH IN AND OUTSIDE THE UNITED STATES SINCE 2008, AVINA AMERICAS HAS DONATED \$16 MILLION IN GRANTS TO SUPPORT THE WORK OF OVER 100 ALLIES BASED IN 17 COUNTRIES THROUGHOUT THE HEMISPHERE AND BEYOND THESE ALLIES ARE FOCUSED ON THE FOLLOWING ISSUES OF PUBLIC INTEREST ACROSS THE AMERICAS MIGRATION EVEN THOUGH MIGRATION HAS MADE CONTRIBUTIONS TO DEVELOPMENT IN LATIN AMERICA, THE FOCUS ON SECURITY BY RECEIVING COUNTRIES AND THE LACK OF ECONOMIC OPPORTUNITIES IN COUNTRIES OF ORIGIN HAVE CREATED ONE OF THE WORST HUMANITARIAN CRISES ON THE CONTINENT, PARTICULARLY FOR MIGRANTS IN MEXICO AND CENTRAL AMERICA AVINA IS WORKING TO CREATE COLLABORATIVE LINKAGES BETWEEN DIFFERENT SECTORS OF SOCIETY AT BOTH THE LOCAL AND GLOBAL LEVELS AND TO CHANNEL EFFORTS TOWARD A REGULATORY, INSTITUTIONAL, AND ETHICAL FRAMEWORK FOR HUMAN MOBILITY THAT IS DIGNIFIED, FORMAL, DEMOCRATIC, SUPPORTIVE, AND SUSTAINABLE AMAZON BIOME DEFORESTATION OF THE AMAZON BIOME AT THE SERVICE OF INDUSTRIAL AGRICULTURE, LIVESTOCK, HIGHWAYS, INFRASTRUCTURE, AND RURAL SETTLEMENTS DEGRADES THE BIOME AND INCREASES CARBON DIOXIDE EMISSIONS, WHILE AT THE SAME TIME REDUCING THE CAPACITY FOR CARBON DIOXIDE ABSORPTION, WHICH CONTRIBUTES TO THE GREENHOUSE EFFECT AND AFFECTS CLIMATE CHANGE AVINA CONSIDERS THE AMAZON AS A PUBLIC GOOD THAT SHOULD NOT BE TREATED IN PARTS DIVIDED BY ADMINISTRATIVE OR POLITICAL BOUNDARIES, A VISION THAT INFORMS OUR STRATEGY FOR MITIGATING CLIMATE CHANGE AND GUARANTEEING THE SUSTAINABILITY OF THE ECOSYSTEM AND THE QUALITY OF LIFE OF RESIDENTS, THROUGH THE ARTICULATION AND STRENGTHENING OF LOCAL AND REGIONAL ACTORS TECHNOLOGY FOR SOCIAL CHANGE A NUMBER OF COUNTRIES IN LATIN AMERICA HAVE RECENTLY PASSED LAWS TO ENSURE ACCESS TO PUBLIC INFORMATION, AND MOVEMENTS TO PUT GOVERNMENT SERVICES AND RECORDS ONLINE ARE INCREASING, WHILE GROWING INTERNET ACCESS, USE OF MOBILE DEVICES, AND AVAILABILITY OF APPLICATIONS HELP DRIVE SUCH INITIATIVES CIVIC GROUPS AND CITIZEN MOVEMENTS ARE TURNING TO INFORMATION AND COMMUNICATION TECHNOLOGIES AS TOOLS FOR TRANSPARENCY AND ACCOUNTABILITY SO ARE COMMUNITIES AND ORGANIZATIONS THAT DEVELOP AND DELIVER PUBLIC SERVICES AVINA IS EXPLORING THE USE OF THESE TECHNOLOGIES TO DEVELOP, ACCELERATE, AND SCALE UP CIVIC PROCESSES, AS WELL AS EMPOWER CITIZENS BY RAMPING UP PUBLIC PARTICIPATION TO FOSTER STRONG RELATIONSHIPS AND GREATER IMPACT, AVINA AMERICAS PERIODICALLY VISITS ALLIES IN THE FIELD AND WORKS WITH THEM TO SUPPORT THEIR EFFORTS AND OUTREACH IN THE US CURRENT SUB-GRANTEES INCLUDE THE FOLLOWING PUBLIC CHARITIES IN THE UNITED STATES, IN ADDITION TO DOZENS OF PUBLIC CHARITY EQUIVALENTS WORKING ACROSS LATIN AMERICA - ACLU FOUNDATION OF SAN DIEGO AND IMPERIAL COUNTIES - WOMEN MAKE MOVIES, INC - THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, UNIVERSITY OF CALIFORNIA, SAN DIEGO (CENTER FOR COMPARATIVE IMMIGRATION STUDIES) - GLOBAL WORKERS JUSTICE ALLIANCE - MIGRATION POLICY INSTITUTE - TRANSFAIR USA (FAIR TRADE USA) -NATIONAL ALLIANCE OF LATIN AMERICAN AND CARIBBEAN COMMUNITIES (NALACC) -INTER-AMERICAN DIALOGUE (IAD) - WASHINGTON OFFICE ON LATIN AMERICA (WOLA) THE TREASURY REGULATIONS PROVIDE THAT "[T]HE MAINTENANCE OF A DEFINITIVE PROGRAM BY AN ORGANIZATION TO ACCOMPLISH ITS CHARITABLE WORK IN THE COMMUNITY, SUCH AS COMBATING COMMUNITY DETERIORATION IN AN ECONOMICALLY DEPRESSED AREA" IS A FACTOR THAT IS CONSIDERED EVIDENCE THAT AN ORGANIZATION IS "PUBLICLY

SUPPORTED " AVINA AMERICAS' SUPPORTED PROJECTS, WHICH HAVE BROAD SOCIAL IMPACT, FIT PRECISELY INTO THIS KIND OF COMMUNITY DEVELOPMENT, AND FURTHER

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493132040936

OMB No 1545-0047

SCHEDULE D (Form 990)

Inte

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.
► Attach to Form 990.

nal Revenue Ser	•	Information about Schedule D	(Form 990) and its instructions is at <u>www.ir</u>	s.gov/form990	Inspection
ame of the		zation		Employer ide	entification number
				26-352589	
			Advised Funds or Other Similar F		
	Comple	ete if the organization answere	ed "Yes" on Form 990, Part IV, line 6.	(h)Funda a	
Tota	ıl numbe	rat end of year	(a) Donor advised funds	(D) Funds a	nd other accounts
		alue of contributions to (during			
year Aggı	•	alue of grants from (during year)			
Aggı	regate v	alue at end of year			
			idvisors in writing that the assets held in doi the organization's exclusive legal control?	nor advised	┌ Yes ┌ No
used or	nly for cl		and donor advisors in writing that grant funds benefit of the donor or donor advisor, or for a		e ┌ Yes ┌ No
		<u>'</u>	ete if the organization answered "Yes"	on Form 990,	Part IV, line 7.
┌ Pro ┌ Pre Comple	tection o servatio ete lines	n of land for public use (e g , recre of natural habitat n of open space 2a through 2d if the organization l le last day of the tax year	ation or education) Preservation of ai Preservation of a held a qualified conservation contribution in	certified histori	c structure
cuscino	erre orr err	ic fast day of the tax year		Held	at the End of the Year
Total n	umber o	f conservation easements		2a	
Total a	creage r	estricted by conservation easeme	ents	2b	
Numbe	rofcons	servation easements on a certified	historic structure included in (a)	2c	
		servation easements included in (c ire listed in the National Register	e) acquired after 8/17/06, and not on a	2d	
		servation easements modified, trai	nsferred, released, extinguished, or terminat	ed by the organı	zation during the
tax yea	ar ►				
		es where property subject to cons			
		ization have a written policy regar enforcement of the conservation e	ding the periodic monitoring, inspection, han asements it holds?	idling of	┌ Yes ┌ No
Staff ar year •	nd volunt	teer hours devoted to monitoring,	inspecting, handling of violations, and enforc	ing conservatio	n easements during the
A moun ► \$	t of expe	enses incurred in monitoring, inspe	ecting, handling of violations, and enforcing c	conservation eas	sements during the year
Does e		servation easement reported on lir on 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se	ction 170(h)(4)	┌ Yes ┌ No
balance	e sheet,		ts conservation easements in its revenue an of the footnote to the organization's financia sements		
rt III	Organi Comple	zations Maintaining Collect	tions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Other Sin	nilar Assets.
If the o	rganızat of art, hıs	ion elected, as permitted under SF storical treasures, or other similar	FAS 116 (ASC 958), not to report in its reve assets held for public exhibition, education, note to its financial statements that describe	, or research ın f	
works o	of art, his		FAS 116 (ASC 958), to report in its revenue assets held for public exhibition, education, these items		
(i) _{Reven}	nue inclu	ded on Form 990, Part VIII, line 1	L	► \$	
ii) _{Assets}	s include	ed in Form 990, Part X			
If the o	rganızat	ion received or held works of art, h	nistorical treasures, or other similar assets f FAS 116 (ASC 958) relating to these items	for financial gain	
Revenu	ıe ınclud	ed on Form 990, Part VIII, line 1		▶ \$	

b Assets included in Form 990, Part X

Par	3111	Organizations Maintaining (continued)	Collections of A	rt, His	stori	cal '	Treas	ures, or	Oth	er Similar A	ssets	
3		the organization's acquisition, accetion items (check all that apply)	ession, and other reco	ords, c	heck a						e of its	
а	┌ P	ublic exhibition		d	Г	Loa	norex	change pro	gram	s		
b	┌ s	cholarly research		e	Γ	Oth	er					
С	ΓP	reservation for future generations										
4	Provid Part X	de a description of the organization's IIII	s collections and expl	laın ho	w they	/ furt	her the	organızatı	on's e	exempt purpose	ı ın	
5		g the year, did the organization solic									_	
Do.		s to be sold to raise funds rather the		s part	of the	orga	nızatıor	n's collect	ion?	Yes	□ No	
Par	t IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990,	Part	t IV, lır	ne 9, or r	epor	ted an amour	nt on For	m 990,
1a		organization an agent, trustee, cus ed on Form 990, Part X?	todian or other interm	nediary	y for c	ontrıl	butions	or other a	ssets	not Yes	⊼ No	
b	If"	Yes," explain the arrangement in Pa	art XIII and complete	the fo	llowin	g tab	le			Am	ount	
С	Beg	ıınnıng balance						<u>_:</u>	1c			
d	Add	ditions during the year						<u></u> :	Ld			
е	Dıs	tributions during the year						<u></u> :	Le			
f	End	ling balance						<u> </u>	1f			
2a	Dıd th	e organization include an amount oi	n Form 990, Part X, lı	ne 21,	for es	crow	orcus	todial acc	ount l	ıabılıty? 厂 Yes	⊢ No	
b		s," explain the arrangement in Part										
Pa	rt V	Endowment Funds. Comple	te if the organization (a)Current year		rior yea					Three years back		oars back
	Begin	ning of year balance	(a)Current year	(D)P	пог уег	11	D (C)IV	o years bac	K (d)	Tillee years back	(e)roury	ears back
ь	_	ibutions										
c	losse											
d	Grant	s or scholarships										
е		r expenditures for facilities rograms										
f	A dmı	nistrative expenses										
g		fyear balance										
2	Provid	de the estimated percentage of the o	current year end balaı	nce (lır	ne 1g,	colu	ımn (a))	held as			•	
а	Board	designated or quasi-endowment 🕨										
b	Perma	anent endowment ►										
c		orarily restricted endowment Feercentages on lines 2a, 2b, and 2c :	should equal 100%									
За	A re th	ere endowment funds not in the pos ization by		zatıon	that a	re he	eld and	admınıste	red fo	r the	Yes	No
	(i) un	related organizations		•		•		•			n(i)	<u> </u>
L		lated organizations s s" on 3a(ii), are the related organiza									(ii)	
ь 4		tibe in Part XIII the intended uses of					•			• • • •	3b	<u> </u>
	t VI	Land, Buildings, and Equip										
		Complete if the organization a Description of property				or oth	er basıs	(b) Cost or other	r basıs	m 990, Part > Accumulated (c)depreciation	(d) Bo	ook value
1 2	Land			+			+	(other)			+	
				. ⊢			+				+	
		old improvements		. ⁺⊢			+				+	
		nent		<u> </u>				1	2,633	7	556	5,077
				· . -			+	1	_, 555			3,377
		ines 1a through 1e (Column (d) mus			ımn (E), line	e 10(c).)			 	5,077
										Schedule	D (Form 9	990) 2015

Part VII Investments—Other Securities. See Form 990, Part X, line 12.	Complete if the organ	ization answered 'Ye	s' on Form 990, Part IV, line 11b.
(a) Description of security or categ (including name of security)	ory	(b)Book value	(c)Method of valuation Cost or 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)		
Complete if the organization answe	red 'Yes' on Form 990), Part IV, line 11c. _{Se}	
(a) Description of investment		(b) Book value	(c) Method of valuation Cost or 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 organiz		Form 990. Part IV. line	11d See Form 990. Part X. line 15
	escription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) In	ne 15.)		
Part X Other Liabilities. Complete if the o		l 'Yes' on Form 990,	Part IV, line 11e or 11f.
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Book value		
Faderal income toyee			
Federal Income taxes			
		\dashv	
		_	

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per Retu	rn
1	Total revenue, gains, and other support per audited financial statements	1	3,499,316
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	3,499,316
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	3,499,316
	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	4,367,948
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)	2-	0
e 2		2e 3	4,367,948
3 4	Subtract line 2e from line 1	3	4,367,948
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a b	Other (Describe in Part XIII) 4b	-	
_		40	0
C E	Add lines 4a and 4b	4c 5	4,367,948
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part 1, line 10)	<u> </u>	4,367,946
	Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2	 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 t		ny additional

Return Reference	Explanation
PART X, LINE 2	A TAX POSITION IS RECOGNIZED AS A BENEFIT ONLY IF IT IS "MORE LIKELY THAN NOT" THAT THE TAX POSITION WOULD BE SUSTAINED IN A TAX EXAMINATION, WITH A TAX EXAMINATION BEING PRESUMED TO OCCUR THE AMOUNT RECOGNIZED IS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED ON EXAMINATION FOR TAX POSITIONS NOT MEETING THE "MORE LIKELY THAN NOT" TEST, NO TAX BENEFIT WILL BE RECORDED AVINA IS NO LONGER SUBJECT TO EXAMINATION BY TAXING AUTHORITIES FOR YEARS BEFORE 2011 AVINA DOES NOT EXPECT THE TOTAL AMOUNT OF UNRECORDED TAX BENEFITS TO SIGNIFICANTLY CHANGE IN THE NEXT 12 MONTHS AVINA RECOGNIZES INTEREST AND/OR PENALTIES RELATED TO INCOME TAX MATTERS IN INCOME TAX EXPENSE AVINA DID NOT HAVE ANY AMOUNTS ACCRUED FOR INTEREST AND PENALTIES AT DECEMBER 31, 2015 AND 2014

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE F Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 14b, 15, or 16.

► Attach to Form 990.

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

OMB No 1545-0047 2015

DLN: 93493132040936

Open to Public **Inspection**

(f) Total expenditures

Name o	fthe	organız	atıon
AVINA	AME	RICAS	INC

(a) Region

(Form 990)

Department of the Treasury

Internal Revenue Service

General Information on Activities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other

Employer identification number

26-3525897

No

- assistance outside the United States.
- Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a

	offices in the region	employees, agents, and independent contractors in region	region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program service, describe specific type of service(s) in region	for and investments in region
(1) CENTRAL AMERICA AND THE CARIBBEAN	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION		976,777
(2) EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		110,000
(3) NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION		608,412
(4) SOUTH AMERICA	0		GRANTS TO RECIPIENTS LOCATED IN THE REGION		1,221,970
(5)					
3a Sub-total	0	0			2,917,159
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			2,917,159

Part II	Grants and Other Assistance to Organizations or Entities Outside the United St	ates.
---------	--	-------

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)								

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, i	recognized a	15
	tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.		

56

3 Enter total number of other organizations or entities

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	<u>duplicated if addit</u>	cional space is no	eded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)					,		
(2)		+			1		1
(3)		1	·		'		
(4)		+			+		1
(5)		+ +			†		
(6)		+			†		1
(7)		+			†		1
(8)		+ +			<u> </u>		
(9)		+ + +					1
(10)		+ +	·		<u> </u>		
(11)		+ + +			1		
(12)		+ + +					
(13)		+ +	·		<u>'</u>		'
(14)		†			1		
(15)		+ + +			1		
(16)		1			1		
(17)					1		
(18)					1		

Part 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)	▽	Yes	Γ	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)	Γ	Yes	~	No
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)	Γ	Yes	্ন	Νo
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)	Γ	Yes	দ	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	<u>~</u>	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 5713; do not file with Form 990)	Г	Yes	<u>ত</u>	Νo

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 Page **5**

Part V

Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	AVINA AMERICAS MONITORS THE USE OF GRANT FUNDS OUTSIDE THE UNITED STATES BY REQUESTING THA T WRITTEN REPORTS BE PRODUCED ON A QUARTERLY/YEARLY BASIS EACH REPORT CONTAINS A NARRATIVE REPORT, INCLUDING A SPECIFIC LISTING OF ANY SUB-GRANTEES TO WHOM THE GRANTED FUNDS HAVE BEEN DISBURSED AND THE AMOUNTS DISBURSED TO EACH, ACHIEVEMENTS, A BALANCE OF DISBURSEMENTS, AND RISK ANALYSIS (IF NEEDED) THE GRANTEE MUST MAINTAIN A RECORD OF EXPENDITURES OF THE MONEY GRANTED AND REPORT THIS TO AVINA AMERICAS BASED ON THE FOLLOWING RULES A) KEEP AN INDEPENDENT ACCOUNTING OF THE FUNDS RECEIVED UNDER THIS AGREEMENT, B) IDENTIFY THE PURPOSE AND THE MANNER IN WHICH THE FINANCING FUNDS HAVE BEEN SPENT, AND C) SUBSTANTIATE ITS EXPENDITURES OF ALL GRANT FUNDS AVINA AMERICAS AND ANY SUB-GRANTEE AGREE TO USE THE AWARD FUNDS IN COMPLIANCE WITH ALL APPLICABLE ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, REGULATIONS, AND EXECUTIVE ORDERS, AND IT AGREES TO TAKE ALL REASONABLE PRECAUTIONS TO BISSURE THAT IT AND ANY OTHER PERSON OR GROUP EXPECTED TO RECEIVE MONEY FROM THE GRANTEE WILL NETTHER MAKE ANY PAYMENT NOR PROVIDE ANY MATERIAL SUPPORT TO ANY PERSON ON ANY UNITED STATES GOVERNMENT LIST OF SUSPECTED TERRORISTS (SUCH AS THE LIST OF SPECIALLY DESIGNATED NATIONALS MAINTAINED BY THE U.S. TREASURY DEPARTMENTS OFFICE OF FOREIGN ASSETS CONTROL) OR TO ANY PERSON HAVING ONE OR MORE DIRECTORS OR KEY PERSONNEL INCLUDED ON ANY SUCH LIST. AVINA AMER CAS AND ANY SUB-GRANTEE ALSO AGREE TO USE THE AWARD FUNDS IN COMPLIANCE WITH IRS REGULATIONS AND NOT TO USE ANY PORTION OF FUNDS TO A) ATTEMPT TO INFLUENCE LEGISLATION OR INTERVE NEIN ANY POLITICAL AFFAIRS OR CAMPAIGNS, B) INFLUENCE THE OUTCOME OF ANY SPECIFIC ELECTION FOR CANDIDATES FOR PUBLIC OFFICE, OR TO CARRY ON, DIRECTLY OR INDIRECTLY, A VOTER REGIST RATION DRIVE WITHIN THE MEANING OF IRC SECTION 4945(D)(2), AS INTERPRETED BY ITS ACCOMPANY ING REGULATIONS, C) UNDERTAKE AN ACTIVITY FOR ANY PURPOSE OTHER THAN RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY, EDUCATIONAL, OR OTHER PURPOSE SPECIFIED IN I

Additional Data

Software ID: Software Version:

EIN: 26-3525897

Name: AVINA AMERICAS INC

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

(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)
		CENTRAL AMERICA AND THE CARIBBEAN	AMAZON	21,000	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	AMAZON	36,000	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	150,149	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	91,481	WIRE			

, Form 990 Schedu	ile F Part II	- Grants or Entities Outside The United States							
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)	
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	95,666	WIRE				
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	147,000	WIRE				
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	38,760	WIRE				
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	115,100	WIRE				

, Form 990 Schedv	ile F Part II	- Grants or Entitie	s Outside The Un	ited States	_	_		· _
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	35,140	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	8,080	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	13,853	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	36,400	WIRE			

, Form 990 Schedv	ile F Part II	- Grants or Entitie	s Outside The Un	ited States	_	_		_
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	15,000	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	35,648	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	25,000	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	MIGRATION	112,500	WIRE			

Form 990 Schedi	ıle F Part II	- Grants or Entiti	ies Outside The Uni	ited States				
(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	(ı) Method of valuation (book, FMV, appraisal, other)
		EUROPE	TECHNOLOGY FOR SOCIAL CHANGE	110,000	WIRE			
		NORTH AMERICA	TECHNOLOGY FOR SOCIAL CHANGE	94,400	WIRE			
		NORTH AMERICA	INCLUSIVE RECYCLING	94,050	WIRE			
		NORTH AMERICA	MIGRATION	147,462	WIRE			

Form 990 Schedu	le F Part II	- Grants or Entitic	es Outside The Uni	ited States	_			
(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	(ı) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	MIGRATION	100,000	WIRE			
		NORTH AMERICA	MIGRATION	35,000	WIRE			
		NORTH AMERICA	MIGRATION	50,000	WIRE			
	1	NORTH AMERICA	MIGRATION	25,000	WIRE			

Form 990 Schedu	ıle F Part II	- Grants or Entitie	es Outside The Uni	ited States				
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)
		NORTH AMERICA	MIGRATION	25,000	WIRE			
		NORTH AMERICA	MIGRATION	37,500	WIRE			
		SOUTH AMERICA	MIGRATION	40,799	WIRE			
			TECHNOLOGY FOR SOCIAL CHANGE	49,000	WIRE			

Form 990 Scheav	-orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)			
		SOUTH AMERICA	TECHNOLOGY FOR SOCIAL CHANGE	31,000	WIRE						
			TECHNOLOGY FOR SOCIAL CHANGE	22,470	WIRE						
			TECHNOLOGY FOR SOCIAL CHANGE	53,000	WIRE						
			STRATEGY FOR THE AMAZON BIOME	10,000	WIRE						

, Form 990 Schedu	ile F Part II	- Grants or Entiti	ies Outside The Uni	ited States	_		_	· .
(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)
		SOUTH AMERICA	TECHNOLOGY FOR SOCIAL CHANGE	13,167	WIRE			
		SOUTH AMERICA	STRATEGY FOR THE AMAZON BIOME	18,360	WIRE			
		SOUTH AMERICA	STRATEGY FOR THE AMAZON BIOME	49,177	WIRE			
		SOUTH AMERICA	ACCESS TO WATER	10,889	WIRE			

, Form 990 Schedu	le F Part II	- Grants or Entiti	ies Outside The Un	ited States	_			· .
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)
		SOUTH AMERICA	TECHNOLOGY FOR SOCIAL CHANGE	88,000	WIRE			
		SOUTH AMERICA	TECHNOLOGY FOR SOCIAL CHANGE	37,500	WIRE			
		SOUTH AMERICA	STRATEGY FOR THE AMAZON BIOME	35,002	WIRE			
		SOUTH AMERICA	STRATEGY FOR THE AMAZON BIOME	25,945	WIRE			

Form 990 Schedu	ıle F Part II	- Grants or Entiti	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)					
			STRATEGY FOR THE AMAZON BIOME	25,000	WIRE								
			STRATEGY FOR THE AMAZON BIOME	20,000	WIRE								
			TECHNOLOGY FOR SOCIAL CHANGE	32,000	WIRE								
			TECHNOLOGY FOR SOCIAL CHANGE	105,133	WIRE								

ie F Part II	- Grants or Entiti	es Outside The Un	ited States				·
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)
	SOUTH AMERICA	ACCESS TO WATER	5,000	WIRE			
		TECHNOLOGY FOR SOCIAL CHANGE	106,000	WIRE			
		TECHNOLOGY FOR SOCIAL CHANGE	40,000	WIRE			
		STRATEGY FOR THE AMAZON BIOME	26,829	WIRE			
	(b) IRS code section and EIN(if applicable)	(b) IRS code section and EIN(if applicable) SOUTH AMERICA SOUTH AMERICA SOUTH AMERICA SOUTH AMERICA	(b) IRS code section and EIN(if applicable) SOUTH AMERICA ACCESS TO WATER SOUTH AMERICA TECHNOLOGY FOR SOCIAL CHANGE SOUTH AMERICA TECHNOLOGY FOR SOCIAL CHANGE SOUTH AMERICA STRATEGY FOR THE	section and EIN(if applicable) SOUTH AMERICA ACCESS TO WATER 5,000 SOUTH AMERICA TECHNOLOGY FOR SOCIAL CHANGE SOUTH AMERICA TECHNOLOGY FOR SOCIAL CHANGE SOUTH AMERICA TECHNOLOGY FOR SOCIAL CHANGE SOUTH AMERICA STRATEGY FOR THE 26,829	(b) IRS code section and EIN(if applicable) SOUTH AMERICA COREGION (d) Purpose of grant (e) Amount of cash disbursement SOUTH AMERICA ACCESS TO WATER SOUTH AMERICA TECHNOLOGY FOR SOCIAL CHANGE SOUTH AMERICA TECHNOLOGY FOR 40,000 WIRE SOUTH AMERICA SOUTH AMERICA SOUTH AMERICA SOUTH AMERICA SOUTH AMERICA SOUTH AMERICA STRATEGY FOR THE 26,829 WIRE	(b) IRS code section and EIN(if applicable) SOUTH AMERICA SOUTH AMERICA COREGION (c) Region (d) Purpose of grant (e) Amount of cash disbursement SOUTH AMERICA ACCESS TO WATER SOUTH AMERICA TECHNOLOGY FOR SOCIAL CHANGE SOUTH AMERICA TECHNOLOGY FOR SOCIAL CHANGE SOUTH AMERICA SOUTH AMERICA TECHNOLOGY FOR SOCIAL CHANGE SOUTH AMERICA SOUTH AMERICA STRATEGY FOR THE 26,829 WIRE	(b) IRS code section and EIN (if applicable) SOUTH AMERICA STRATEGY FOR THE 26,829 WIRE

Form 990 Schedu	ıle F Part II	- Grants or Entiti	es Outside The Uni	ited States				
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)
			STRATEGY FOR THE AMAZON BIOME	20,000	WIRE			
			STRATEGY FOR THE AMAZON BIOME	25,000	WIRE			
		SOUTH AMERICA	ACCESS TO WATER	30,000	WIRE			
		SOUTH AMERICA	RECYCLING	120,105	WIRE			

Form 990 Schedu	ıle F Part II	- Grants or Entiti	ies Outside The Uni	ited States		_		
(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	(ı) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	ACCESS TO WATER	115,019	WIRE			
		SOUTH AMERICA	TECHNOLOGY FOR SOCIAL CHANGE	6,500	WIRE			
		SOUTH AMERICA	MIGRATION	26,075	WIRE			
		SOUTH AMERICA	RECYCLING	35,000	WIRE			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |
Schedule I

DLN: 93493132040936OMB No 1545-0047

2015

Open to Public Inspection

Employer identification number

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

► Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

(Form 990)

Internal Revenue Service Name of the organization

VINA AMERICAS INC		26-3525897					
Part I General Information	on Grants and	l Assistance				•	
Does the organization maintain returned the selection criteria used to awa Describe in Part IV the organization.	ard the grants or as non's procedures fo	sistance? r monitoring the use	of grant funds in the Un	ited States		·	√ Yes
Part III Grants and Other Assistar that received more than \$				ipiete if the organization	answered "Yes" on Fo	orm 990, Part IV, line 21	, for any recipient
(a) Name and address of 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 Table							
2 Enter total number of section 50:	1 (c)(3) and govern	ment organizations lis	sted in the line 1 table .				12

Enter total number of other organizations listed in the line 1 table

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Inform	nation. Provide the inf	formation required in	Part I. line 2. Part III.	column (b), and any other	additional information.

Explanation

Return Reference PART I, LINE 2 AVINA AMERICAS MONITORS THE USE OF GRANT FUNDS IN THE UNITED STATES BY REQUESTING THAT WRITTEN REPORTS BE PRODUCED ON A QUARTERLY/YEARLY BASIS EACH REPORT CONTAINS A NARRATIVE REPORT, INCLUDING A SPECIFIC LISTING OF ANY SUB GRANTEES TO WHOM THE GRANTED FUNDS HAVE BEEN DISBURSED AND THE AMOUNTS DISBURSED TO EACH, ACHIEVEMENTS, A $|\mathsf{BALANCE}|$ OF DISBURSEMENTS, AND RISK ANALYSIS (IF NEEDED) THE GRANTEE MUST MAINTAIN A RECORD OF EXPENDITURES OF THE MONEY GRANTED AND REPORT THIS TO AVINA AMERICAS BASED ON THE FOLLOWING RULES A) KEEP AN INDEPENDENT ACCOUNTING OF THE FUNDS RECEIVED UNDER THIS AGREEMENT, B) IDENTIFY THE PURPOSE AND THE MANNER IN WHICH THE FINANCING FUNDS HAVE BEEN SPENT, AND C) SUBSTANTIATE ITS EXPENDITURES OF ALL GRANT FUNDS AVINA AMERICAS AND ANY SUB-GRANTEE AGREE TO USE THE AWARD FUNDS IN COMPLIANCE WITH ALL APPLICABLE ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, REGULATIONS, AND EXECUTIVE ORDERS, AND IT AGREES TO TAKE ALL REASONABLE PRECAUTIONS TO ENSURE THAT IT AND ANY OTHER PERSON OR GROUP EXPECTED TO RECEIVE MONEY FROM THE GRANTEE WILL NEITHER MAKE ANY PAYMENT NOR PROVIDE ANY MATERIAL SUPPORT TO ANY PERSON ON ANY UNITED STATES GOVERNMENT LIST OF SUSPECTED TERRORISTS (SUCH AS THE LIST OF SPECIALLY DESIGNATED NATIONALS MAINTAINED BY THE U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL) OR TO ANY PERSON HAVING ONE OR MORE DIRECTORS OR KEY PERSONNEL INCLUDED ON ANY SUCH LIST AVINA AMERICAS AND ANY SUB-GRANTEE ALSO AGREE TO USE THE AWARD FUNDS IN COMPLIANCE WITH IRS REGULATIONS AND NOT TO USE ANY PORTION OF FUNDS ITO A) ATTEMPT TO INFLUENCE LEGISLATION OR INTERVENE IN ANY POLITICAL AFFAIRS OR CAMPAIGNS. B) INFLUENCE THE OUTCOME OF ANY SPECIFIC ELECTION FOR CANDIDATES FOR PUBLIC OFFICE, OR TO CARRY ON, DIRECTLY OR INDIRECTLY, A VOTER REGISTRATION DRIVE WITHIN THE MEANING OF IRC SECTION 4945(D)(2), AS INTERPRETED BY ITS ACCOMPANYING REGULATIONS, C) UNDERTAKE AN ACTIVITY FOR ANY PURPOSE OTHER THAN RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY, EDUCATIONAL, OR OTHER PURPOSE SPECIFIED IN IRC SECTION 170(C)(2)(B), D) CONDUCT ANY ACTIVITY IN, OR TRAVEL TO OR FROM, THE UNITED STATES OF AMERICA, EXCEPT WITH WRITTEN APPROVAL, E) INDUCE OR ENCOURAGE VIOLATIONS OF LAW OR PUBLIC POLICY, TO CAUSE ANY PRIVATE INUREMENT OR IMPROPER PRIVATE BENEFIT TO OCCUR, OR TO TAKE ANY OTHER ACTION INCONSISTENT WITH IRC SECTION 501(C)(3), OR F) FUND TERRORISM

Additional Data

Software ID:

Software Version:

EIN: 26-3525897

Name: AVINA AMERICAS INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIGRATION POLICY INSTITUTE 1400 16TH STREET NW STE 300 WASHINGTON, DC 20036	52-2279789	501(C)(3)	129,567				MIGRATION
TRANSFAIR USA 1500 BROADWAY SUITE 400 OAKLAND,CA 94612	41-1848081	501(C)(3)	68,101				MIGRATION
NATIONAL ALLIANCE OF LATIN AMERICAN AND CARIBBEAN COMMUNITIES 2845 W SEVENTH STREET LOS ANGELES,CA 90005	34-2066826	501(C)(3)	46,480				MIGRATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of 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)		(h) Purpose of grant or assistance
INTER-AMERICAN DIALOGUE 1211 CONNECTICUT AVE STE 510 WASHINGTON, DC 20036	52-1830369	501(C)(3)	15,000				MIGRATION
WASHINGTON OFFICE ON LATIN AMERICA 1630 CONNECTICUT AVE STE 200 WASHINGTON, DC 20009	52-1249353	501(C)(3)	121,890				MIGRATION
CENTRO DE LOS DERECHOS DEL MIGRANTE INC 519 NORTH CHARLES STREET SUITE 260 BALTIMORE, MD 21201	20-2588279	501(C)(3)	87,826				MIGRATION

Form 990,Schedule I, Part	t II, Grants and	1 Other Assistance	e to Domestic Org	anizations and D	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of 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 grant or assistance					
ACLU FOUNDATION OF SAN DIEGO AND IMPERIAL COUNTIES 1202 KETTNER BLVD STE 6200 SAN DIEGO CA 92101 SAN DIEGO,CA 92101	33-2588279	501(C)(3)	25,000				MIGRATION					
ACLU FOUNDATION OF SAN DIEGO AND IMPERIAL COUNTIES 1202 KETTNER BLVD STE 6200 SAN DIEGO CA 92101 SAN DIEGO,CA 92101	33-2588279	501(C)(3)	60,000				MIGRATION					
NATIONAL ALLIANCE OF LATIN AMERICAN AND CARIBBEAN COMMUNITIES 2845 W SEVENTH STREET LOS ANGELES, CA 90005	34-2066826	501(C)(3)	35,000				MIGRATION					

Form 990,Schedule I, Part	t II, Grants and	1 Other Assistance	e to Domestic Org	anizations and D	omestic Governme	nts.	
(a) Name and address of 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 grant or assistance
GLOBAL WORKERS JUSTICE ALLIANCE 131 AVENUE A-21 NY,NY 10009	72-1597864	501(C)(3)	30,000				MIGRATION
NATIONAL ALLIANCE OF LATIN AMERICAN AND CARIBBEAN COMMUNITIES 2845 W SEVENTH STREET LOS ANGELES, CA 90005	34-2066826	501(C)(3)	50,000				MIGRATION
WOMEN'S REFUGEE COMMISSION 122 EAST 42ND STREET NEW YORK, NY 10168	46-3668128	501(C)(3)	49,000				MIGRATION

<u>Form 990,Schedule I, Par</u>	t II, Grants and	l Other Assistance	to Domestic Orga	anizations and D	<u>omestic Governme</u>	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	* *	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAINFOREST CONNECTION 77 VAN NESS AVE STE 101- 1717 SAN FRANCISCO, CA 94102	46-2022575	501(C)(3)	30,000				STRATEGY FOR THE AMAZON BIOME
ORGANIZATION OF AMERICAN STATES 1889 F STREET NW WASHINGTON, DC 20006	52-1336464	GOVERNMENT	26,522				MIGRATION
AMERICAS SOCIETY 680 PARK AVENUE NY,NY 10021	13-2569185	501(C)(3)	15,000				STRATEGY FOR THE AMAZON BIOME

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	, ,	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
LATIN AMERICA WORKING GROUP EDUCATION FUND 2029 P STREET NW STE 301 WASHINGTON, DC 20036	11-3657128	501(C)(4)	25,000				MIGRATION	

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DLN: 93493132040936

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

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

2015

Open to Public Inspection

Internal Revenue Service Name of the organization AVINA AMERICAS INC

Employer identification number

26-3525897

Pai	t I Questions Regarding Compensation	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	\sqcap	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d			1b		
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe		- · · · · · · · · · · · · · · · · · · ·			
	directors, trustees, officers, metading the eloyexe	.cutive D	meetor, regarding the reams effected in fine 14.	2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all tused by a related organization to establish compen	hat apply				
	Compensation committee	Γ	Written employment contract			
	☐ Independent compensation consultant	⊽	Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990 or a related organization	, Part VI	I, Section A, line $f 1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control	l paymen	ıt?	4a		No
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	pased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines $4a-c$, list the persons and p	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	ations m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a	a, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a	a, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section Apayments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported on Form 990, Part VII, subject to the initial contract exception described in Part III			8		No
9		he rebutt	able presumption procedure described in Regulations	-		No

Part II 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 instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) 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 o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	· •	(E) Total of columns	(F) Compensation in	
		Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990	
1 SEAN MCKAUGHANCHAIR	(i)	0	0	0	0	0	0	0	
	(ii)	250,000	0	0	20,000	0	270,000	0	

Schedule J (Form 990) 2015

Part III 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

Schedule J (Form 990) 2015

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DLN: 93493132040936

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public Inspection

Name of the organization	Employer identification number	
AVINA AMERICAS INC	26-3525897	

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	MR BIONDI-MORRA AND MR MCKAUGHAN HAVE A BUSINESS RELATIONSHIP, AS DESCRIBED BELOW CONTROL OVER THE CHARITY'S OPERATIONS IS VESTED IN A SELF-PERPETUATING BOARD OF SIX VOTING DIRECTORS THE EXECUTIVE DIRECTOR IS A SEVENTH NON-VOTING MEMBER THE CHARITY'S ABILITY TO ATTRACT THIS LEVEL OF TALENT IS DUE IN LARGE PART TO ITS CLOSE RELATIONSHIP WITH FUNDACION AVINA THREE OF THE CHARITY'S SIX VOTING DIRECTORS HAVE SOME CONNECTION TO FUNDACION AVINA MR MCKAUGHAN, IS THE PRESIDENT OF THE BOARD FOR FUNDACION AVINA DR BIONDI-MORRA, CHAIR OF AVINA, SERVES ON THE BOARD OF FUNDACION AVINA, AMONG MANY OTHER INSTITUTIONAL AFFILIATIONS MR SAGEL IS AN EMPLOYEE OF FUNDACION AVINA IN ADDITION, UNDER THE CHARITY'S CONFLICT OF INTEREST POLICY, ANY DIRECT TRANSACTIONS BETWEEN THE CHARITY AND FUNDACION AVINA HAVE TO BE APPROVED BY AT LEAST ONE OF THE THREE INDEPENDENT DIRECTORS WHO DO NOT HOLD ANY POSITIONS AT FUNDACION AVINA
FORM 990, PART VI, SECTION B, LINE 11	THE OUTSIDE ACCOUNTANTS PREPARED THE FORM 990 AND FORWARDED IT TO AVINA FOR REVIEW ONCE T HE COMMENTS AND REVIEWS WERE UPDATED, AVINA AMERICAS EMAILED THE COMPLETED FORM 990 TO THE ENTIRE BOARD ALONG WITH A REQUEST FOR THEIR COMMENTS TO BE COMPLETED WITHIN A 10-DAY PERI OD AFTER ANY COMMENTS FROM THE BOARD WERE RESOLVED, THE FORM 990 WAS SUBMITTED TO THE IRS
FORM 990, PART VI, SECTION B, LINE 12C	PURSUANT TO THE ORGANIZATION'S POLICY, THE RESPONSIBILITY FOR DISCLOSURE RESTS WITH BOARD MEMBERS. THE BOARD OF DIRECTORS HOLDS AT LEAST ONE ANNUAL MEETING, SUBJECT TO NOTICE REQUIREMENT, THUS ALLOWING FOR A LEVEL REFLECTION ON THIS TOPIC ONCE PER YEAR. THIS REFLECTION WAS HELD IN MAY 2015 AND NO CONFLICTS WERE NOTED. IF THE BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT A PERSON HAS FAILED TO DISCLOSE AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST, IT INFORMS THE PERSON OF THE BASIS FOR SUCH BELIEF AND AFFORDS THE PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF AFTER HEARING THE RESPONSE OF THE MEMBER AND MAKING SUCH FURTHER INVESTIGATION AS IS WARRANTED IN THE CIRCUMSTANCES, THE BOARD OR COMMITTEE DETERMINES THAT THE MEMBER HAS, IN FACT, FAILED TO DISCLOSE AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST, IT TAKES APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION
FORM 990, PART VI, SECTION B, LINE 15A	SALARY STUDIES WERE CONDUCTED TO DETERMINE COMPENSATION FOR THE EXECUTIVE DIRECTOR THREE REFERENCES WERE USED FOR THIS PURPOSE. THE BOARD MADE RECOMMENDATIONS TO APPOINT THE CURRE NT EXECUTIVE DIRECTOR A BOARD RESOLUTION WAS ADOPTED AND DOCUMENTED IN BOARD MINUTES TO T HIS EFFECT THIS REVIEW PROCESS WAS LAST COMPLETED IN FEBRUARY 2015
FORM 990, PART VI, SECTION C, LINE 19	AVINA AMERICAS MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST
FORM 990, PART VII, SECTION A	BOARD MEMBERS KATHERINE MARSHALL, LARRY H SLESINGER, AND JOHN C ICKIS WERE COMPENSATED FOR THEIR ROLES ON THE BOARD

DLN: 93493132040936

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047 2015

> Open to Public Inspection

					ation number		
ete if the organization a	inswered "Yes" on	Form 990, Part		397			
(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income E	(e) nd-of-year assets	Di	(f) Irect controlling entity		
	e organization ans	wered "Yes" or	Form 990, Pa	art IV, lı	ine 34 because it	had on	ie
(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section			(f) Direct controlling entity	Section (13) o	(g) n 512(t ontrolle ntity?
TO CONTRIBUTE TO SUSTAINABLE DEVELOPMENT IN LATIN AMERICA	PM 501(C)(3)		PF		N/A	Yes	No No
	zations Complete If the he tax year. (b) Primary activity To CONTRIBUTE TO SUSTAINABLE DEVELOPMENT	(b) Primary activity Legal domicile (state or foreign country) zations Complete if the organization and the tax year. (b) Primary activity Contribute To Sustainable Development In Latin America To Contribute To Sustainable Development In Latin America	(b) Romary activity Legal domicile (state or foreign country) Zations Complete if the organization answered "Yes" on the tax year. (b) Romary activity Legal domicile (state or foreign country) TO CONTRIBUTE TO SUSTAINABLE DEVELOPMENT IN LATIN AMERICA (c) (d) Exempt Code sector or foreign country) FM 501(C)(3)	ete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) C Legal domicile (state or foreign country) Total income End-of-year assets	ete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) Primary activity Legal domicile (state or foreign country) Total income End-of-year assets D Zations Complete if the organization answered "Yes" on Form 990, Part IV, line tax year. (b) Primary activity Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) TO CONTRIBUTE TO SUSTAINABLE DEVELOPMENT IN LATIN AMERICA PF	ete if the organization answered "Yes" on Form 990, Part IV, line 33. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it the tax year. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it the tax year. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it for foreign country) Legal domicile (state of foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Direct controlling entity	ete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) Primary activity Legal domicle (state or foreign country) Total income End-of-year assets Direct controlling entity Exations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had on he tax year. (b) Primary activity Legal domicle (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Direct controlling entity TO CONTRIBUTE TO SUSTAINABLE DEVELOPMENT IN LATIN AMERICA PM SO1(C)(3) PF N/A

Selleddie IX (1 0	MIII 330/ 2013										raye
	dentification of Related Organizations Taxable as ecause it had one or more related organizations treated			•		ation answ	ered "Yes	" on Form 9	990, Part IV	/, line 34	
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(F
	Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disproprtionate	Code V-UBI	General or	Percei
	related organization		domicile	controlling	ıncome(related,	total income	end-of-year	allocations?	amount in box	managing	owne
			(state or	entity	unrelated,		assets		20 of	partner?	

Name, add related (rèss, and EIN of organization		Legal domicile (state or foreign country)	entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate ations?	e Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener mana partr	ral or aging ner?	Percentage ownership
					511,			Yes	No		Yes	No	
		_	_						·				_

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?		_
								Yes	No	_

Part V Transactions With Related Organizations Complete if the organization and	swered "Yes" on Form	990, Part IV, line	e 34, 35b, or 36.						
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				,	Yes	No			
1 During the tax year, did the orgranization engage in any of the following transactions with one or mor	re related organizations li	sted in Parts II-IV	>						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No			
b Gift, grant, or capital contribution to related organization(s)									
c Gift, grant, or capital contribution from related organization(s)				1c '	Yes				
d Loans or loan guarantees to or for related organization(s)				1d		No			
e Loans or loan guarantees by related organization(s)				1e		No			
f Dividends from related organization(s)				1f		No			
g Sale of assets to related organization(s)				1g		No			
h Purchase of assets from related organization(s)				1h		No			
i Exchange of assets with related organization(s)				1i		No			
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No			
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No			
I Performance of services or membership or fundraising solicitations for related organization(s) .				11		No			
m Performance of services or membership or fundraising solicitations by related organization(s)									
${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No			
o Sharing of paid employees with related organization(s)				10		No			
p Reimbursement paid to related organization(s) for expenses				1 p		No			
q Reimbursement paid by related organization(s) for expenses				1q		No			
r Other transfer of cash or property to related organization(s)				1r		No			
s Other transfer of cash or property from related organization(s)				1s		No			
2 If the answer to any of the above is "Yes," see the instructions for information on who must comp	lete this line, including co	vered relationships	and transaction thresholds						
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount inv	olved				
L)FUNDACION AVINA - PANAMA	В	564,990	GRANT AGREEMENTS						
2)FUNDACION AVINA - PANAMA	С	215,970	CONTRIBUTION						

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

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

revenue) that was not a related organization. See instructions																					
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations? (f) Share of total income		total ei	total	total	total	total e	total end-of-year	total end-of-year	(h) Disproprtiona allocations'	ı	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No									
												1	Ī								

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2015