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Extended to November 15, 2016

$_{\text{Form}}\,990$

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

Department of the Treasury Internal Revenue Service

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

► Information about Form 990 and its instructions is at www.lrs.gov/form990.

2015 Open to Public Inspection

OMB No 1545-0047

| А | For the | 2015 calendar year, or tax year beginning and | enung | | | | | | |
|----------------|-----------------------------|--|---------------------|----------------------------------|---------------------------------------|--|--|--|--|
| В | Check if applicable | C Name of organization | | D Employer identific | cation number | | | | |
| | Addres | The Kindling Group | The Kindling Group | | | | | | |
| F | Name | | | 36-4 | 478085 | | | | |
| _ | Initial | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | | | | | | |
| F | Final | 4021 N. Broadway | | - ' | 728-8489 | | | | |
| L | Ireturn/ termin- ated | | G Gross receipts \$ | 1,293,088. | | | | | |
| _ | Ameno | | | H(a) Is this a group re | | | | | |
| F | Application | | | for subordinates | | | | | |
| L | pendin | same as C above | | H(b) Are all subordinates in | | | | | |
| $\overline{}$ | Tayloye | empt status: X 501(c)(3) 501(c) () | or 527 | 7 ' <i>'</i> | list. (see instructions) | | | | |
| | | e: > www.thekindlinggroup.org | <u> </u> | H(c) Group exemption | · · · · · · · · · · · · · · · · · · · | | | | |
| | | organization: X Corporation | I Year | | State of legal domicile: IL | | | | |
| | art I | Summary | <u> </u> | or formation. 2002, is | i ciato or logal dominia. 111 | | | | |
| _ | 14 | Briefly describe the organization's mission or most significant activities: The | Kindli | ng Groups p | rimary | | | | |
| Governance | ' | exempt purpose is to foster documentary, | | | | | | | |
| nar | 2 | Check this box I if the organization discontinued its operations or dispo | | | | | | | |
| Ver | 3 | Number of voting members of the governing body (Part VI, line 1a) | 000 01 11101 | 3 | 9 | | | | |
| တ္တ | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | | 4 | 9 | | | | |
| න් ග | | Total number of individuals employed in calendar year 2015 (Part V, line 2a) | | 5 | 4 | | | | |
| tie | | Total number of volunteers (estimate if necessary) | - 10 17 - 20 | | 0 | | | | |
| Activities & | I - | Total unrelated business revenue from Part VIII, column (C), line 12 | | | 0. | | | | |
| Ac | 1 | Net unrelated business taxable income from Form 990-T, line 34 | | | 0. | | | | |
| _ | <u>D</u> | Net difference business taxable income from Form 9501, line 547 | 7 2016 | Prior Year | Current Year | | | | |
| | | | 7 / 11 | 586,995. | 1,182,873. | | | | |
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | , n o | 167,948. | 109,301. | | | | |
| Ven | 9 | Program service revenue (Part VIII, line 2g) | · " • " | 0. | 706. | | | | |
| æ | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | , , , | 0. | 208. | | | | |
| | | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 754,943. | 1,293,088. | | | | |
| . — | | Total revenue · add imes 8 through 11 (must equal Part VIII, column (A), line 12) | | 23,493. | 0. | | | | |
| } | | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 23,493. | 0. | | | | |
| • | 1 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 138,051. | | | | |
| Expenses | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 0. | 138,031. | | | | | |
| ë | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 0. | <u> </u> | <u> </u> | | | | |
| X | _b | Total fundraising expenses (Part IX, column (D), line 25) | - • • - | 328,221. | 638,761. | | | | |
| _ | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 351,714. | | | | | |
| | | Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) | - | 403,229. | 776,812. 516,276. | | | | |
| | 19 | Revenue less expenses Subtract line 18 from line 12 | D. | | | | | | |
| Net Assets or | | T | Be | ginning of Current Year 572,743. | End of Year | | | | |
| SSE | 20 | Total assets (Part X, line 16) | - | | 1,350,567. | | | | |
| let A | 21 | Total liabilities (Part X, line 26) | - | 147,814. 424,929. | 585,848. | | | | |
| | <u>22</u> art II | Net assets or fund balances. Subtract line 21 from line 20 | 11 | 444,349. | 764,719. | | | | |
| _ | | <u> </u> | oc and statem | ante and to the heat of m | r knowledge and heliaf it in | | | | |
| | | Ities of perjury, I declare that I have examined this return, including accompanying schedule | | | y knowledge and belief, it is | | | | |
| true | e, correc | t, and complete. Declaration of preparer (other than officer) is based on all information of w | niich prepare | i nas any knowledge. | | | | | |
| | | Signature of officer | | Date / | | | | | |
| Sig | - | , , , , , , , , , , , , , , , , , , , | | 11/2/11 | 6. | | | | |
| He | re | Danny Alpert, Executive Director Type or print name and title | | - " " " | 9. | | | | |
| | | | | Date , Check | PTIN | | | | |
| C - ' | : | Print/Type preparer's name Preparer's signature | | 11 1 11/2 1 # " L | | | | | |
| Pai | | Barton Eilts | | Te (Son chipio) | | | | | |
| | parer | Firm's name Eilts & Associates, Inc. | | Firm's EIN | 61-1443699 | | | | |
| US | Only | Firm's address 3711 N. Ravenswood, Ste. 105 | | D |) ENE C181 | | | | |
| | | Chicago, IL 60613 | | Phone no. / / | 3-525-6171 | | | | |
| | | AS discuss this return with the preparer shown above? (see instructions) | | | X Yes No | | | | |
| 532 | 001 12-1 | 6-15 LHA For Paperwork Reduction Act Notice, see the separate instruct | ions. | _ | Form 990 (2015) | | | | |

| | Form | 1990 (2015) The Kindling Group | <u> 36-4478</u> | <u> 3085</u> | Page 2 |
|---|-----------|--|-------------------|--------------|-------------|
| the describe the organization's mission: kindling Group's mission is to produce compelling media to be used as innovative engagement tools for real social change. Our vision is to create a production company that combines compelling, well-crafted films with a social impact through storytelling. Kindling is one of Dothe organization underlake any significant program services during the year which were not tested on the organization costs conducting, or make significant changes in how it conducts, any program services? □ Yes ☑ No if Yes, 'describe these changes on Schedule O. 3 Od the organization program service accomplishments for each of 4s three largest program services, as measured by expenses. Section 501(5)(3) and 501(5)(4) organizations are required to report the amount of grants and elecations to others, the total expenses, and revenue, if any for each program service accomplishments for each of 4s three largest program services, as measured by expenses. Section 501(5)(3) and 501(5)(4) organizations are required to report the amount of grants and elecations to others, the total expenses, and revenue, if any for each program service expenses ⊆ 642,671. Individual program and elecations to others, the total expenses, and revenue, if any for each program service expenses ⊆ 642,671. Individual program and elecations of the program service expenses ⊆ 642,671. 46 Other program service (Describe in Schedule O) Commission of the program service expenses ⊆ 642,671. | Par | rt III Statement of Program Service Accomplishments | | | |
| the refev describe the organization's mission is to produce compelling media to be used as innovative engagement tools for real social change. Our vision is to create a production company that combines compelling, well-crafted films with a social impact through storytelling. Kindling is one of the togenization undertake any significant program services during the year which were not tested on the prior form 990 of 990-E2? If "Yes," desorbe these new services on Schedule O. Dot the organization coase conducting, or make significant changes in how it conducts, any program services? If "Yes," desorbe these changes on Schedule O. Describe the organization by program service accomplishments for each of 4s three largest program services, as measured by expenses. Section 501(c)(s) and 501(c)(s) organizations are required to report the amount of grants and elecations to others, the total expenses, and revenue, if any to each program service accomplishments for each of 4s three largest program services, as measured by expenses. Section 501(c)(s) and 501(c)(s) organizations are required to report the amount of grants and elecations to others, the total expenses, and revenue, if any to each program service expenses. Continued work on the production of documentary & educational films do (come) (Expenses to the production of documentary & educational films do (come) (Expenses to the production of documentary & educational films do (come) (Expenses to the production of documentary & educational films do (come) (Expenses to the production of documentary & educational films do (come) (Expenses to the production of documentary & educational films do (come) (Expenses to the production of documentary & educational films) for the program service (Desorbe in Schedule C) (come) (Expenses to the production of the produ | | Check if Schedule O contains a response or note to any line in this Part III | | | X |
| Kindling Group's mission is to produce compelling media to be used as innovative engagement tools for real social change. Our vision is to create a production company that combines compelling, well-crafted films with a social impact through storytelling. Kindling is one of the poor Formeso or 990 E2? ¬vs. [3] No. ¬vs. [3] No. ¬vs. [3] No. ¬vs. [4] No. ¬vs. [4] No. ¬vs. [4] No. ¬vs. [5] No. ¬vs. [6] No. ¬vs. [7] No. ¬vs. [7] No. ¬vs. [8] No. ¬vs. [8] No. ¬vs. [8] No. ¬vs. [8] No. ¬vs. [9] No. | 1 | | | | |
| innovative engagement tools for real social change. Our vision is to create a production company that combines compelling, well-crafted films with a social impact through storytelling. Kindling is one of 2 bd the organization undertake any significant program services during the year which were not tested on the prior form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Dd the organization cases conducting, or make significant changes in how it conducts, any program services? ▼ves ▼No. 1" Yes, "Secribe the organization's program service significant changes in how it conducts, any 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 avenue, if any, for each program service regarded. Come 16cores 1642,671. **redung grants of \$\frac{1}{2}\$ (Continued work on the production of documentary & educational films 4b (Conte) (Expenses \$\frac{1}{2}\$ (Continued work on the production of documentary & educational films 4c (Conte) (Expenses \$\frac{1}{2}\$ (Continued work on the production of documentary & educational films 4d (Conte) (Expenses \$\frac{1}{2}\$ (Continued work on the production of documentary & educational films 4d (Conte) (Expenses \$\frac{1}{2}\$ (Conte) (Expenses \$\frac{1}{2}\$ (Continued work on the production of documentary \$\frac{1}{2}\$ (Precess \$\frac{1}{2}\$) (| • | | to be i | useđ | as |
| create a production company that combines compelling, well-crafted films with a social impact through storytelling. Kindling is one of the organization undertake any significant program services during the year which were not listed on the professor 190 or 900-527 If "Yes," describe these new services on Schedule O. De drive organization cease conducting, or make significant changes in how it conducts, any program services, as measured by expenses. Seachers 501(6)(5) and 501(6)(5) and 501(6)(5) and 501(6)(5) and 501(6)(5) and 501(6)(6) and 501(6) and 501(6)(6) and 501(6)(6) and 501(6) | | | | | |
| Films with a social impact through storytelling. Kindling is one of | | | | | |
| 2 Dot the organization undertable any significant program services during the year which were not listed on the pure from \$90 or 990 E27 If "Yes," describe these new services on Schedule O. 3 Dot the organization cease conducting, or make significant changes in how it conducts, any program services? | | | | | |
| the proof Form 990 or 990 EZ? | | | ng is or | ne of | |
| 1 "Yes." describe these new services conducting, or make significant changes in how it conducts, any program services? | 2 | Did the organization undertake any significant program services during the year which were not listed on | | | |
| 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? | | the prior Form 990 or 990-EZ? | | Yes | X No |
| 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? | | If "Yes." describe these new services on Schedule O. | | | |
| # Yes," describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501c(s) and 501c(s) 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. 4a (code) (code on the production of documentary & educational films 4b (code) (expenses for each program service and the production of documentary & educational films 4c (code) (expenses for each program service) and each program service and each program service and each program service and each program service (Cescribe in Schedule C) ## Code (code | 2 | | j | □ vec | YNo |
| 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 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. 4 (Code) (Expenses 1 | 3 | | | 163 | 22 140 |
| 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. 4a (Code) (Expenses \$ 642,671. moluding grants of \$ | | | | | |
| revenue, flany, for each program service reported. 4a (Code) (Expenses 5 642,671. motoding grants of 5) (Newnors 110,215. Continued work on the production of documentary & educational films 4b (Code) (Expenses 5 notwing grants of 5) (Revenue 5 | 4 | | - | | |
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| Continued work on the production of documentary & educational films 4b (Code)(Expenses s | _ | revenue, if any, for each program service reported. | | | _ |
| Continued work on the production of documentary & educational films 4b (Code)(Expenses s | 4a | (Code) (Expenses \$ 642,671 · including grants of \$) (Reven | iue \$ | 110. | 215.) |
| 4b (Code) (Expenses S | | | | | |
| 4c (Code) (Expenses \$ | | continued work on the production of documentary a cade | CIOHAI I | | <u></u> |
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| 4e Total program service expenses ► 642,671. Form 990 (2015) | 4d | Other program services (Describe in Schedule O.) | | | |
| 532002 Form 990 (2015 | | | |) | |
| 532002 Form 990 (2015 | <u>4e</u> | Total program service expenses ► 642,671. | | | |
| 532002 | | | | Form 9 | 90 (2015) |
| טר־טו־א א | | | | | - (-010) |
| | 12-16- | - ₁₀ | | | |

| | | | Yes | No |
|-----|--|-----------|----------------|--------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| _ | If "Yes," complete Schedule A | 1 | X | ļ - |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | _ | i | 37 |
| _ | public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | ١., | | |
| _ | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | | . |
| _ | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5_ | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | _ | | . |
| - | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, | 6 | _ | X |
| 7 | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | - | - | |
| 0 | Schedule D, Part III | 8 | ļ | x |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | - | | |
| 9 | 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 | | x |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | J | <u> </u> | 122 |
| 10 | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | x |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | | | ** |
| •• | as applicable | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | х |
| С | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | X | |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | X | |
| 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 | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | | _X_ |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | <u>X</u> |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | 14a | | X |
| b | 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 | | X |
| 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 | 140 | | |
| 13 | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | -10 | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | İ | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | Х |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| - | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 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 | | Х |
| | | | 990 (| |

Form 990 (2015) The Kindling Group
Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|-------------|--|-------------|-----|-----------|
| 2 0a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | X |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | l |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | | X |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No", go to line 25a | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | 1 | | |
| | any tax-exempt bonds? | 24c | | |
| | 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 | | X |
| 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 | 1 1 | | |
| | Schedule L, Part I | 25b | | <u> X</u> |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | | | |
| | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," | | | |
| | complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | 1 | | |
| | of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | _X_ |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | } | | |
| _ | instructions for applicable filing thresholds, conditions, and exceptions). | | | 37 |
| a | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | Х |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | 00- | | v |
| ~ | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | Λ |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 20 | | Х |
| 31 | | 30 | | |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | , | | x |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | 31 | | |
| 32 | Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | 32 | | Λ |
| ~ | sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | 33 | | |
| • | Part V, line 1 | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | 338 | | |
| ~ | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | ~ | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |
| 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 | х | |
| | | Form | | 2015) |

| Par | Statements Regarding Other IRS Fillings and Tax Compilance Cheek of School In Countains a response or note to any line in this Part V | | | |
|----------|--|------|-------|--|
| | Check if Schedule O contains a response or note to any line in this Part V | | · - | <u> </u> |
| | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | | Yes | No |
| 1a | | . | | } |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | l |
| С | (gambling) winnings to prize winners? | 1c | | |
| • | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | 16 | | |
| 2a | filed for the calendar year ending with or within the year covered by this return 2a 4 | | | |
| _ | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | | х |
| b | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | - | |
| 20 | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | х |
| 3a | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O | 3b | | |
| d da | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | | |
| 70 | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | х |
| h | 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 | | Х |
| ь | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| c | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | The state of the s | | | |
| | any contributions that were not tax deductible as charitable contributions? | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | |
| | were not tax deductible? | 6b | | <u></u> _ |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | . 1 | | |
| | to file Form 8282? | 7c | | _X_ |
| d | · · · · · · · · · · · · · · · · · · · | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | - | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| a | 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 10a | | | |
| a | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | . 1 | | |
| о 11 | Section 501(c)(12) organizations. Enter | į | | |
| '' | Gross income from members or shareholders | | | |
| | Gross income from other sources (Do not net amounts due or paid to other sources against | ıÌ | | |
| • | amounts due or received from them.) | i l | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | i |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | ı |
| | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| - | Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| b | | | | |
| | organization is licensed to issue qualified health plans | | | |
| С | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | |
| _ | | Form | 990 (| (2015) |

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. b Enter the number of voting members included in line 1a, above, who are independent 9 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? X . . . ____ Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? Х 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X ß Did the organization have members or stockholders? 6 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? Х Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? .. . X 8a Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such 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? X 11a 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 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b 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 X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed >IL Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records; The Organization - 773-728-8489 4021 N. Broadway, Chicago, Form 990 (2015) 532006 12-16-15

Form 990 (2015) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

| Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employe | Section A. | Officers, Directors, | Trustees, Ke | y Employees, | and Hig | hest Com | pensated Em | ploy | /ees |
|--|------------|----------------------|--------------|--------------|---------|----------|-------------|------|------|
|--|------------|----------------------|--------------|--------------|---------|----------|-------------|------|------|

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

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

| (A) Name and Title | (B) Average hours per | | not c | Posi heck | more | than | | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of |
|---------------------------------|--|------------------|----------|--------------|----------|--|------|--|--|--|
| | week (list any hours for related organizations below line) | stee or director | | | recto | Highest compensated carpy or semployee | tee) | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | other compensation from the organization and related organizations |
| (1) Ethan Besinger | 1.00 | | | | | | | _ | | |
| Director | | X | | | | | | 0. | 0. | 0 |
| (2) Andrew Friedman | 1.00 | 4 | | | | | | | _ | _ |
| Director | 1 22 | X | <u> </u> | | | | | 0. | 0. | 0 |
| (3) Sheila Roche | 1.00 | | | | | ŀ | | • | | |
| Director | 1 00 | X | _ | <u> </u> | \vdash | \vdash | | 0. | 0. | 0 |
| (4) Mitch Gordon | 1.00 | ٠, | | | | | | 0 | • | |
| Director | 1 00 | X | | _ | \vdash | | | 0. | 0. | 0 |
| (5) Steve Cohen | 1.00 | X | | | | | | 0. | 0. | _ |
| Director | 1.00 | <u> </u> | | | ⊢ | | | <u> </u> | · · | 0 |
| (6) Hilary McCutcheon | 1.00 | x | | | | | ' | 0. | 0. | 0 |
| Director (7) Janice MacVicar | 1.00 | 1 | | | - | \vdash | | | | 0 |
| Director | 1.00 | \mathbf{x} | | | | | | 0. | 0. | 0 |
| (8) Daniel Alpert | 20.00 | | | | | | | | | |
| Board President | | 1 | | x | | | | 41,000. | 0. | 0 |
| (9) Susan White | 1.00 | | | | | | | | | |
| Vice President | | | | X | | | | 0. | 0. | 0 |
| | | | | | | | | | | |
| | | <u> </u> | | | | | | | | |
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| | | 4 | | | | 1 | I | | | |

Form 990 (2015)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Page 9

| | | Check if Schedule O contr | aine a reenonee | or note to any lin | e in this Part VIII | | | |
|--|------|---|------------------|--------------------|---------------------|--|---|--|
| | | Check il Schedule O conti | airis a response | or note to any in | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 |
| ts st | 1 a | Federated campaigns | . 1a | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | Membership dues | 1b | | | | | |
| O.E. | | Fundraising events | 1c | | | | | |
| # 2 | | Related organizations | 1d | | 1 | | | |
| S,E | | Government grants (contributi | • | | | | | |
| Sis | f | All other contributions, gifts, gran | · — | | | | | |
| F | · | similar amounts not included above | | 182,873. | | | | ŀ |
| 풀 | | Noncash contributions included in lines | | | | | | |
| 것일 | _ | Total. Add lines 1a-1f | 1a-11 \$ | | 1,182,873. | | | |
| | | Total. Add lines 12 11 | <u>.</u> | Business Code | | | | |
| as I | 2 2 | Reimbursed inco | m _A | 561499 | 65,478. | 65,478. | | |
| Š | | Sponsorship inc | | 561499 | 18,750. | 18,750. | | |
| Ser | | Distribution in | | 561499 | 17,624. | 17,624. | | |
| E è | | Other | icome | 561499 | 7,449. | 7,449. | | |
| Reg | | | | 301477 | // == | 7,447. | · · · · · · · · · · · · · · · · · · · | |
| Program Service Revenue | e | All other program service reve | | | | · | | |
| | | Total. Add lines 2a-2f | ariue | • | 109,301. | | | + |
| | 3 | Investment income (including | dividende intere | | 100,001. | | | |
| | • | other similar amounts) | arridondo, imon | > | 706. | 706. | | |
| | 4 | Income from investment of tax | v-evemnt hond r | roceeds | 700. | 700. | | |
| | 5 | Royalties . | k exempt bond p | brocceds - | 208. | 208. | | 1 |
| | 3 | rioyanies . | (i) Real | (ıi) Personal | 200. | 200. | | |
| | 6 a | Gross rents | (y riea) | (ii) i craoriai | | | | |
| | | Less rental expenses | | | | | | |
| | | Rental income or (loss) | | | | | | |
| | | Net rental income or (loss) | | | | | | |
| | | Gross amount from sales of | (i) Securities | (ii) Other | | | | |
| | , a | assets other than inventory | (i) Occurries | (ii) Otrici | | | | |
| | h | Less. cost or other basis | | | | | | |
| | Ü | and sales expenses | | | | | | |
| | _ | Gain or (loss) | | | | | | |
| | | Net gain or (loss) | Ļ | | | | | |
| e | | Gross income from fundraising | g events (not | | | | | |
| Ē | | including \$ | of | | | | | |
| ě | | contributions reported on line | • | | | | | |
| i i | | Part IV, line 18 | a | | | | | |
| Other Revenu | b | Less direct expenses | b | | | | | |
| | С | Net income or (loss) from fund | draising events | | | | | |
| | 9 a | Gross income from gaming ac | ctivities. See | | | | | |
| | | Part IV, line 19 | а | | | | | |
| | þ | Less direct expenses | . b | | | | | |
| | C | Net income or (loss) from gam | ning activities | | | | | |
| | 10 a | Gross sales of inventory, less | returns | | | | | |
| | | and allowances | . a | | | | | |
| İ | b | Less. cost of goods sold . | . b | | | | | |
| | С | Net income or (loss) from sale | s of inventory | | | | | <u> </u> |
| ļ | | Miscellaneous Revenu | ie | Business Code | | | | |
| | 11 a | | | | | | | |
| | þ | | | | | | | <u> </u> |
| | c | | | | | <u> </u> | | ļ |
| | _ | | | | | | | |
| | | | | | 4 000 000 | | | |
| | 12_ | Total revenue. See instructions. | <u></u> | | 1,293,088. | 110,215. | 0. | <u>. </u> |

Form 990 (2015) The Kindling Group
Part IX Statement of Functional Expenses

| Secti | on 501(c)(3) and 501(c)(4) organizations must com | | | omplete column (A). | ভ |
|-------|--|----------------|-----------------------------|---------------------------------|--|
| | Check if Schedule O contains a respon | (A) | this Part IX (B) | (C) | X |
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to domestic | | | | |
| _ | individuals. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign | | | | |
| J | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| 3 | trustees, and key employees | 41,000. | 41,000. | | |
| 6 | Compensation not included above, to disqualified | 11,000. | | | |
| J | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 85,512. | 85,512. | | |
| 8 | Pension plan accruals and contributions (include | 00,012. | 00,011 | | |
| 8 | section 401(k) and 403(b) employer contributions | | | | |
| 9 | Other employee benefits | | _ | ļ | |
| 10 | Payroll taxes | 11,539. | 11,539. | | |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | | | | ···· |
| b | Legal | 990. | | 990. | ······································ |
| С | Accounting | 16,227. | | 16,227. | |
| d | Lobbying | | | | <u>-</u> |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A) amount, list line 11g expenses on Sch O.) | | | | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | | | | |
| 14 | Information technology | 3,502. | 3,502. | | |
| 15 | Royalties | 3,304. | | | |
| 16 | Occupancy | 1,541. | 1,541. | | |
| 17 | Travel | 1,341. | 1,541. | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest | 6,731. | | 6,731. | |
| 21 | Payments to affiliates | | | | · |
| 22 | Depreciation, depletion, and amortization | 658. | | 658. | |
| 23 | Insurance | 6,633. | | 6,633. | |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) | | | | |
| а | Production | 239,903. | 220,285. | 19,618. | |
| b | Contractor and services | 165,744. | 165,224. | 520. | · |
| С | Other | 53,286. | 53,286. | | |
| d | Office and administrati | 44,255. | | 44,255. | |
| е | All other expenses See Sch O | 99,291. | 60,782. | 38,509. | |
| 25 | Total functional expenses. Add lines 1 through 24e | 776,812. | 642,671. | 134,141. | 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) | | | | |
| E2201 | 0 12-16-15 | | | | Form 990 (2015) |

| | | | <u>X</u> . | (A) | Т | (B) |
|-----------------------------|-----|--|------------|-------------------|-----|---------------------------------------|
| | | | | Beginning of year | | End of year |
| | 1 | Cash - non-interest-bearing | | 399,463. | 1 | 843,719 |
| | 2 | Savings and temporary cash investments | . [| | 2 | |
| | 3 | Pledges and grants receivable, net | [| | 3 | |
| | 4 | Accounts receivable, net | | 4,367. | 4 | 1,341 |
| | 5 | Loans and other receivables from current and former officers, directors | | | | |
| | | trustees, key employees, and highest compensated employees. Compl | ete | | | |
| | | Part II of Schedule L | | | 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 con | I | | | |
| | | employers and sponsoring organizations of section 501(c)(9) voluntary | Ĭ | | | |
| y, | | employees' beneficiary organizations (see instr). Complete Part II of Sci | 1 L | | 6 | |
| Assets | 7 | Notes and loans receivable, net | · · | | 7 | |
| Ą | 8 | Inventories for sale or use | · | - | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 1,51 | 9 | |
| | 10a | Land, buildings, and equipment: cost or other | | | | |
| | | | ,917. | | | |
| | Ь | Less: accumulated depreciation 10b | 658. | 965. | 10c | 17,259 |
| | 11 | Investments · publicly traded securities | 0001 | | 11 | 21,1233 |
| | 12 | Investments - other securities. See Part IV, line 11 | | | 12 | |
| | 13 | Investments - program-related. See Part IV, line 11 | | 167,948. | 13 | 488,248 |
| | 14 | Intangible assets | | 20, 13200 | 14 | 100,210 |
| | 15 | Other assets. See Part IV, line 11 | | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | 572,743. | 16 | 1,350,567 |
| | 17 | Accounts payable and accrued expenses | | 35,559. | 17 | 89,347 |
| | 18 | Overthe equable | | 337333. | 18 | 07,541 |
| | 19 | Deferred revenue | | | 19 | |
| | 20 | Tax-exempt bond liabilities | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | | 21 | · · · · · · · · · · · · · · · · · · · |
| co. | 22 | Loans and other payables to current and former officers, directors, trus | tees · | | 21 | |
| Ë. | 22 | key employees, highest compensated employees, and disqualified pers | | | | |
| Liabilities | | Complete Part II of Schedule L | 0.13. | | 22 | |
| ₽. | 23 | Secured mortgages and notes payable to unrelated third parties | | | 23 | <u> </u> |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | 24 | 32,299 |
| | 25 | Other liabilities (including federal income tax, payables to related third | - | | _24 | 34,433 |
| | 23 | parties, and other liabilities not included on lines 17:24). Complete Part | Y of | | | |
| | | Schodule D | ^0' | 112,255. | 25 | 464,202 |
| | 26 | Total liabilities. Add lines 17 through 25 | <u> </u> | 147,814. | 26 | 585,848 |
| | | Organizations that follow SFAS 117 (ASC 958), check here ► X | and | 147,014. | -20 | 303,040 |
| ro. | | complete lines 27 through 29, and lines 33 and 34. | and | | | |
| Net Assets or Fund Balances | 27 | Hemselmeter during the control of th | | 424,929. | 27 | 764,719 |
| 檀 | 28 | Toronto model and a discontinuous discontinu | | 101/00/0 | 28 | |
| <u> </u> | 29 | Dormon and the standard and an action | · | | 29 | |
| Ē | 23 | Organizations that do not follow SFAS 117 (ASC 958), check here | ⊾r∸i ⊢ | | 23 | |
| F F | | and complete lines 30 through 34. | | | | |
| ts C | 30 | | | | 30 | |
| šše | 30 | Capital stock or trust principal, or current funds | - | 1- 1 | | |
| Ĕ | 31 | Paid-in or capital surplus, or land, building, or equipment fund | - | == | 31 | |
| Š | 32 | Retained earnings, endowment, accumulated income, or other funds | · - | 424,929. | 32 | 764 710 |
| | 33 | Total hebities and set were to find balances | | | 33 | 764,719 |
| | 34 | Total liabilities and net assets/fund balances | | 572,743. | 34 | 1,350,567 Form 990 (2015 |

| orm | 1 990 (2015) The Kindling Group | 36-4478 | 3085 | Pa | ge 12 |
|------------|--|-----------|-------------|------------|--------------|
| Pa | rt XI Reconciliation of Net Assets | - | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | X |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 1 | L,29: | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | <u> 12.</u> |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | | <u>76.</u> |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | <u>42</u> | <u>4,9</u> | <u> 29.</u> |
| 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 0) | 9 | <u>-176</u> | <u>5,4</u> | <u>86.</u> |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) | 10 | <u> 764</u> | <u>4,7</u> | <u> 19.</u> |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | <u> </u> | — | | <u> </u> |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C |). | | | |
| 2 a | | | 2a | | <u>X</u> |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | on a | | | |
| | separate basis, consolidated basis, or both | | 1 1 | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | 1 1 | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | _X_ | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | basis, | | | |
| | consolidated basis, or both: | | | | |
| | X Separate basis | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | audit, | | | 77 |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | | _ <u>X</u> _ |
| _ | If the organization changed either its oversight process or selection process during the tax year, explain in Sched | | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing | jie Audit | | | • |
| | Act and OMB Circular A-133? | | 3a | | <u> </u> |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require | e audit | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3b | 000 | (0045) |
| | | | Form 9 | マダリ (| 2015) |

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

➤ 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.

Employer identification number

| | The | <u>Kindling G</u> | roup | | | | 3 | 6-4478085 | | | |
|----------|---|--|---|---------------|--|------------------|--------------------|------------------------|--|--|--|
| Part I | Reason for Public (| Charity Status (/ | All organizations must co | mplete th | ıs part.) Se | e instructions | | | | | |
| he orga | inization is not a private found | ation because it is: (| For lines 1 through 11, c | heck only | one box) | | | | | | |
| 1 🗀 | A church, convention of ch | | | | | I)(A)(i). | | | | | |
| 2 | A school described in secti | | | | | | | | | | |
| 3 | A hospital or a cooperative | | | | | i). | | | | | |
| 4 | A medical research organiz | | | | | - | iii). Enter | the hospital's name. | | | |
| | city, and state | | ,,, | | | (-)(-)(-) | ,. | and morphism of manner | | | |
| 5 | | or the benefit of a co | llege or university owner | or operat | ted by a gr | overnmental ur | ut describ | ed in | | | |
| <u> </u> | 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). | | | | | | | | | | |
| 6 – | An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in | | | | | | | | | | |
| 7 L | - | = | ntial part of its support i | ioni a gov | emmentai | unit or nom th | e general | public described in | | | |
| | section 170(b)(1)(A)(vi). (C | | /4W4W 12 /O | . 11.3 | | | | | | | |
| 8 | A community trust describe | | | | | | | | | | |
| 9 LX | _ | • | • | - | | | • | • | | | |
| | activities related to its exen | • | • | | | | • • | • | | | |
| | income and unrelated busin | | (less section 511 tax) fro | om busine | sses acqu | ired by the org | anization | after June 30, 1975. | | | |
| | See section 509(a)(2). (Co | • | | | | | | | | | |
| 10 📙 | An organization organized a | • | • | = | | | | | | | |
| 11 🖳 | An organization organized a | • | • | | | | = | • • | | | |
| | more publicly supported or | ganizations describe | ed in section 509(a)(1) o | r section ! | 509(a)(2). | See section 5 |)9(a)(3). C | check the box in | | | |
| _ | lines 11a through 11d that | describes the type o | of supporting organization | n and com | iplete lines | s 11e, 11f, and | 11g. | | | | |
| a L | Type I. A supporting orga | · · · · · · · · · · · · · · · · · · · | = | - | | · · · · - | | | | | |
| | the supported organization | on(s) the power to re | gularly appoint or elect a | majority o | of the direc | ctors or trustee | s of the s | upporting | | | |
| F | organization. You must o | omplete Part IV, Se | ections A and B. | | | | | | | | |
| b L | Type II. A supporting org | anızatıon supervised | or controlled in connec | tion with it | s supporte | ed organization | ı(s), by ha | ving | | | |
| | control or management o | f the supporting org | anızation vested ın the s | ame perso | ons that co | ontrol or manag | je the sup | ported | | | |
| _ | organization(s) You mus | t complete Part IV, | Sections A and C. | | | | | | | | |
| c | Type III functionally interest | grated. A supportin | g organization operated | ın connec | tion with, a | and functionally | y integrate | ed with, | | | |
| | its supported organizatio | n(s) (see instructions | s). You must complete f | Part IV, Se | ections A, | D, and E. | | | | | |
| a [| Type III non-functionally | y integrated. A supp | orting organization oper | ated in co | nnection v | vith its support | ed organiz | zation(s) | | | |
| | that is not functionally int | egrated The organiz | zation generally must sat | isfy a dist | ribution re | quirement and | an attenti | veness | | | |
| | requirement (see instruct | ions). You must con | nplete Part IV, Sections | A and D, | and Part | V. | | | | | |
| e [| Check this box if the orga | anization received a | written determination fro | m the IRS | that it is a | Type I, Type I | I, Type III | | | | |
| | functionally integrated, or | r Type III non-functio | nally integrated support | ng organiz | zation. | | | | | | |
| f Er | iter the number of supported | organizations | | | | | | | | | |
| | ovide the following information | about the supporte | ed organization(s) | | | | | <u> </u> | | | |
| | (i) Name of supported | (ii) EIN | (iii) Type of organization | (iv) Is the o | rganization | (v) Amount of | nonetary | (vi) Amount of | | | |
| | organization | | (described on lines 1-9 above (see instructions)) | | document? | support (| | other support (see | | | |
| | | | above (See instructions), | Yes | No | instructio | ns) | instructions) | | | |
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| F-4-1 | | | | | | | | | | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 532021 09-23-15

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 The Kindling Group Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Calendary says (or fiscal year beginning in) ► (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total on the control of the organization of benefit and either paid to or expended on its behalf or expended on the expended on the behalf or expended on the expended on the behalf or expended on the expended on the behalf or expended on the ex | Se | ction A. Public Support | _ | | | | | |
|--|-------------|--|-----------------------|-----------------------|-----------------------|---------------------------------------|----------------------------------|-------------|
| membership fees received (10 not include any "unusual grants.") 2 Tax revenues leved for the organization is benefit and either paid to or expended on its behalf 3. The value of services or facilities furnished by a governmental unt to the organization without charge 4. Tatal. Add lines 1 through 3. 5. The portion of total contributions by seph person (other than a governmental unt or publicly supported organization) included an line 1 that exceeds 2% of the amount shown on line 11, column (1) 6. Public support, Sebtact line 1 them line 4. 6. Public support, Sebtact line 1 them line 4. 6. Prototal Support 7. Amounts from line 4. 6. Gross income from interest, dividends, payments received on securities loans, rents, roystress and income from smaller sourcess and income from include gian or loss from the sale of capital assets (Epitan in Part VI) 11. Total support. Add lines? I through 10 12. Gross received on line 4. 13. Public support percentage from 2014 Schedule A, Part II, line 14 14. Public support percentage from 2014 Schedule A, Part II, line 14 15. Public support percentage from 2014 Schedule A, Part II, line 14 16. 33 1/3% support test - 2015. If the organization did not check a box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization meets the "facts and circumstances test. 2015. If the organization qualifies as a publicly supported organization meets the "facts and circumstances test. The organization qualifies as a publicly supported organization meets the "facts and circumstances test. The organization qualifies as a publicly supported organization meets the "facts and | Cale | ndar year (or fiscal year beginning in) | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) 2015 | (f) Total |
| include any "unusual grants", I Tax revenues lewed for the organization's benefit and either paid to or expended on its behalf The value of services or facinities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The potition of total contributions by each person (other than a governmental unit or publicly supported organization) included on the 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support, Setwate line 5 them limit 4 Section B. Total Support Callerdar year (of fised year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Callerdar year (of fised year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Callerdar year (of fised year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Callerdar year (of fised year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Callerdar year (of fised year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Callerdar year (of fised year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Callerdar year (of fised year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Callerdar year (of fised year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Callerdar year (of fised year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Callerdar year (of fised year beginning in) (a) 2015 (f) 2015 | | | | | | | | |
| 2 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf 3. The value of services or facilities furnished by a governmental unit to the organization without charge 4. Total. Add lines 1 through 3. 5. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6. Public support. Selvent line 5 them line 4. 8. Gross income from line 14. 8. Gross income from interest, dividends, payments received on securities loans, rents, received on securities loans, rents, received on on securities loans, rents, received on securities loans, rents, received on securities loans, rents, received on securities loans, rents, received on securities loans, rents, received on securities loans, rents, received on on securities loans, rents, received on on securities loans, rents, received on on securities loans, rents, received on on securities loans, rents, received on on securities loans, rents, received on on securities loans, rents, received on on securities loans, rents, received on on or loans from unrelated business and income from smaller sources and land to the securities of the securities o | | membership fees received (Do not | | | | | | |
| tration's benefit and either paid to or expended on its behalf 3. The value of services or facilities furnished by a governmental unit to the organization without charge 4. Total. Add lines 1 through 3 5. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (i) 6. Public support, Superactions from included on line 1 that exceeds 2% of the amount shown on line 11, column (i) 7. Amounts from line 4 8. Gross income from street, dividendis, payments received on securities loans, rents, royalhes and income from interest, dividendis, payments received on securities loans, rents, royalhes and income from interest, dividendis, payments received on securities loans, rents, royalhes and income from smilar sources 9. Net income from unestated business activities, whether or not the business is regularly carried on 10. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 11. Total support, Add lines 7 through 10. 12. Gross recepts from related activities, etc. (see instructions) 13. 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. The organization qualifies as a publicly supported organization b 33 1/3% support test 2-016. 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 10% facts-and-circumstances test - 2015. If the organization of organization of the respective organization here. Explain in Part VI how the organization meets the "facts-and-circumstances test. 11, the organization did not check a box on line 13, 16a, 16b, 0-17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances test. 2015. If the organization did not check a box on line 13, | | ınclude any "unusual grants.") | | | | | | |
| or expended on its behalf 3. The value of services or facilities furnished by a governmental unit to the organization without charge 4. Total. Add lines 1 through 3. 5. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6. Public support. Buttest less 5 ton line 4. 8. Gross income from line 4. 8. Gross income from line 4. 8. Gross income from line 4. 8. Gross income from line 4. 8. Gross income from line 4. 8. Gross income from line 4. 9. Not income from line line line line line line line line | 2 | Tax revenues levied for the organ- | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 | | ızatıon's benefit and either paid to | | | | | | |
| furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Schriste has 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines? through 10 12 Gross recepts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organizations 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 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 16 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 17 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 18 A 31 1/3% support test - 2015. If the organization of divided by line 11, column (f)) 19 A 10% - facts-and-circumstances sets - 2015. If the organization of 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 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 in Part VI h | | or expended on its behalf | | | | | | |
| the organization without charge 1 Total, Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 296 of the amount shown on line 11, column (f) 6 Public support. Subtest lines a from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) > (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total organization provided in the column of | 3 | The value of services or facilities | | | | | | |
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| 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 Part VI how 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 Part VI how 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, check this box and stop here. Explain in Part VI how 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, check this box and stop here. Explain in Part VI how 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, check this box and stop here. Explain in Part VI how the organization here. | ь | - · | | _ | | Lline 15 is 33 1/3% | or more check th | ue boy |
| 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 instructions | ~ | | | | | | or more, check in | |
| 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 instructions | 17 a | | | | | e 13 16a or 16b : | and line 1/1 is 10% | or more |
| 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 instructions | "" | | - | | | | | • |
| 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 instructions | | | | | | • | it villow the organ | Lation |
| 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 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | H | | • | • | | • | . . 17a_and line 15 io : | 10% or |
| organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | • | | | | | | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | | | | | | | ▶ ┌── |
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532022 09-23-15

Schedule A (Form 990 or 990-EZ) 2015 The Kindling Group Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

| Section A. Public Support | | | | | | | |
|---------------------------|--|---------------------------|-----------------------|------------------------|----------------------|----------------------|-----------------------------|
| | | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (a) 2015 | (6) Total |
| | ndar year (or fiscal year beginning in) | (a) 2011 | (0) 2012 | (0) 2013 | (0) 2014 | (e) 2015 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") | 274,493. | 34,020. | 68,861. | 586,995. | 1183081. | 2147450. |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 24,376. | | 5,060. | 167,948. | | 306,685. |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | 298,869. | 34,020. | 73,921. | 754,943. | 1292382. | 2454135. |
| 7 a | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | 0. |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | 0. |
| c | Add lines 7a and 7b | | | | | | 0. |
| 8 | Public support. (Subtract line 7c from line 6) | | i | | | | 2454135. |
| | ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) 2015 | (f) Total |
| 9 | Amounts from line 6 | 298,869. | 34,020. | 73,921. | 754,943. | 1292382. | 2454135. |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 348. | | 1,629. | | 706. | 2,683. |
| b | Unrelated business taxable income (less section 511 taxes) from businesses | 340. | | 1,025. | | 700. | |
| | acquired after June 30, 1975 | | | | | | |
| c | Add lines 10a and 10b | 348. | | 1,629. | | 706. | 2,683. |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12) | 299,217. | 34,020. | 75,550. | 754,943. | 1293088. | 2456818. |
| 14 | First five years. If the Form 990 is for | the organization's | first, second, third | l, fourth, or fifth ta | ax year as a section | n 501(c)(3) organiza | ation, |
| | check this box and stop here | <u> </u> | | <u>.</u> | · · · | <u> </u> | |
| Sec | ction C. Computation of Publ | ic Support Per | rcentage | | | | |
| 15 | Public support percentage for 2015 (I | ine 8, column (f) di | vided by line 13, co | olumn (f)) | | 15 | 99.89 % |
| | Public support percentage from 2014 | | | | | 16 | <u>99.88 %</u> |
| Se | ction D. Computation of Inves | stment Income | e Percentage_ | | | | |
| 17 | Investment income percentage for 20 | 15 (line 10c, colum | nn (f) divided by lin | e 13, column (f)) | | 17 | .11 % |
| 18 | Investment income percentage from | 2014 Schedule A, F | Part III, line 17 | | | 18 | .12 % |
| 19a | a 33 1/3% support tests - 2015. If the | organization did n | ot check the box o | n line 14, and line | 15 is more than 3 | 3 1/3%, and line 1 | 7 is not |
| | more than 33 1/3%, check this box a | - | | | | | $\triangleright \mathbf{X}$ |
| t | 33 1/3% support tests - 2014. If the | = | | | | | |
| | line 18 is not more than 33 1/3%, che | | | | | _ | . ▶∐ |
| <u>20</u> | Private foundation. If the organization | n did not check a l | box on line 14, 19a | , or 19b, check th | | | |
| 5320 | 23 09-23-15 | | | | Sche | edule A (Form 990 | or 990-EZ) 2015 |

Part IV Supporting Organizations

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

| sec | tion A. Ali Supporting Organizations | | V 1 | NI. |
|------------|--|------|----------|-----|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing | | Yes | No |
| ' | 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 | İ | | |
| | organization was described in section 509(a)(1) or (2). | 2 | | |
| 32 | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer | | | |
| ou | (b) and (c) below. | 3a | | |
| h | 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. | 3ь | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) | | | _ |
| Ū | 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 | | | |
| 74 | "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below. | 4a | | |
| ь | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign | | | |
| | supported organization? If "Yes," describe in Part VI how the organization had such control and discretion | | | |
| | despite being controlled or supervised by or in connection with its supported organizations. | 4b | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination | | - | |
| · | under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used | | | |
| | to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) | | | |
| | purposes. | 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 | l | | |
| | numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; | j | | |
| | (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 | | |
| ь | 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 | | |
| С | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to | | | |
| | anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class | | 1 | |
| | benefited by one or more of its supported organizations, or (iii) 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 section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with | | | |
| | regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). | 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 I of Schedule L (Form 990 or 990-EZ). | 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 9a) hold a controlling interest in any entity in which | | | |
| | the supporting organization had an interest? If "Yes," provide detail in Part VI. | 9b | <u> </u> | |
| C | Did a disqualified person (as defined in line 9a) 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 | \sqcup | _ |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section | | | |
| | 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated | | | |
| | supporting organizations)? If "Yes," answer 10b 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 husiness holdings) | 105 | 1 | |

Parent of Supported Organizations. Answer (a) and (b) below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.

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.

| 2 a | |
|------------|------|
| 2 b | |
| 3a | |
| 3b | |

| Pai | Type III Non-Functionally Integrated 509(a)(3) Supporting | g Organ | izations | |
|------|---|--------------|-----------------------------------|--------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | g trust on l | Nov. 20, 1970. See instr e | uctions. All |
| | other Type III non-functionally integrated supporting organizations must co | mplete Se | ctions A through E | |
| Sect | on A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| _1_ | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or | | | |
| | collection of gross income or for management, conservation, or | | | |
| | maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |
| Sect | ion B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year) | | | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| C | Fair market value of other non-exempt-use assets | 1c | | |
| | Total (add lines 1a, 1b, and 1c) | 1d | | |
| | Discount claimed for blockage or other | | | |
| | factors (explain in detail in Part VI) | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, | | | |
| | see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by .035 | 6 | | |
| 7 | Recovenes of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | ion C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 85% of line 1 | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3 | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | <u> </u> | |
| | emergency temporary reduction (see instructions) | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-functional instructions). | ly-integrate | ed Type III supporting org | anization (see |

Schedule A (Form 990 or 990-EZ) 2015

Administrative expenses paid to accomplish exempt purposes of supported organizations
 Amounts paid to acquire exempt-use assets

5 Qualified set aside amounts (prior IRS approval required)

Other distributions (describe in Part VI). See instructions.
 Total annual distributions. Add lines 1 through 6.

8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.

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 required-see instructions) | 111-1-10 | | |
| 3 Excess distributions carryover, if any, to 2015 | | | |
| a | | | |
| b | | | |
| C | | | |
| d From 2013 | | | |
| e From 2014 | | | |
| f Total of lines 3a through e | | | <u>. </u> |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2015 distributable amount | | | |
| i 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 3 | | | |
| and 4c. | | | |
| 8 Breakdown of line 7. | | | |
| _a | | | |
| b | | | |
| c Excess from 2013 | | | |
| d Excess from 2014 | | | |
| e Excess from 2015 | | | |

Schedule A (Form 990 or 990-EZ) 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. |
| • | 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. |
| | 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.) |
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Schedule A (Form 990 or 990-EZ) 2015 The Kindling Group

36-4478085 Page 8

SCHEDULE D

(Form 990)

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

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

| | | The Kindling Group | | 36-4478085 |
|-----|-----------------------|---|--|--|
| Par | t I Organiza | tions Maintaining Donor Advise | d Funds or Other Similar Funds o | or Accounts. Complete if the |
| | organization | answered "Yes" on Form 990, Part IV, lin | e 6. | |
| | | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at en | d of year | | |
| 2 | Aggregate value of | contributions to (during year) | | |
| 3 | | grants from (during year) | | |
| 4 | Aggregate value at | | | |
| 5 | | | writing that the assets held in donor advised | funds |
| _ | • | n's property, subject to the organization's | - | Yes No |
| 6 | _ | | dvisors in writing that grant funds can be us | |
| • | = | - | or donor advisor, or for any other purpose co | |
| | ımpermissible priva | | | Yes No |
| Par | | | ganization answered "Yes" on Form 990, Pai | |
| 1 | | ervation easements held by the organizati | | |
| • | | of land for public use (e.g., recreation or e | | cally important land area |
| | | natural habitat | Preservation of a certifie | |
| | | of open space | | |
| 2 | | • | fied conservation contribution in the form of | a conservation easement on the last |
| _ | day of the tax year | _ | | Held at the End of the Tax Year |
| а | • | nservation easements | | 2a |
| b | | icted by conservation easements | | 2b |
| | _ | ration easements on a certified historic str | neture included in (a) | 2c |
| c | | | after 8/17/06, and not on a historic structure | · · · · · · · · · · · · · · · · · · · |
| d | listed in the Nation | | and of and not on a motion of actual | 2d |
| 3 | | | leased, extinguished, or terminated by the o | —————————————————————————————————————— |
| 3 | year > | ation easements mounca, nansienca, re | icasca, extinguished, or terminated by the o | gamzation during the tax |
| 4 | | vhere property subject to conservation ea | sement is located | |
| 5 | | non have a written policy regarding the pe | | |
| 5 | - | procedure a written policy regarding the per | | Yes No |
| e | • | | handling of violations, and enforcing conser | . — — |
| 6 | Stan and volunteer | modes devoted to morntoning, inspecting, | Transing of Violations, and officing consci | valion casements during the year |
| 7 | Amount of expense | | dling of violations, and enforcing conservatio | n easements during the year |
| • | ►\$ | as meaned in mornioring, mapacing, name | and officialistic, and officially conscious | in oddomonto during the year |
| 8 | · · — | vation easement reported on line 2(d) above | ve satisfy the requirements of section 170(h) | (4)(B)(i) |
| • | and section 170(h) | · | | Yes No |
| 9 | | | on easements in its revenue and expense st | • — — |
| • | | | tion's financial statements that describes the | |
| | conservation ease | | | g |
| Par | | | f Art, Historical Treasures, or Oth | er Similar Assets. |
| | | the organization answered "Yes" on Form | | |
| | | · · · · · · · · · · · · · · · · · · · | SC 958), not to report in its revenue statemen | nt and balance sheet works of art |
| | - | | hibition, education, or research in furtherance | |
| | | note to its financial statements that descr | | o or passe service, provide, in reality (iii, |
| ь | | | SC 958), to report in its revenue statement a | nd balance sheet works of art, historical |
| | • | · • | ducation, or research in furtherance of public | , and the second second second second second second second second second second second second second second se |
| | relating to these ite | • | duction, or resource in farther and or public | s service, provide the following amounts |
| | = | dad C 000 Dad \/III liaa 1 | | ▶ ¢ |
| | ., | 1 E 000 D 1V | | ► \$ ► \$ |
| 0 | • • | | easures, or other similar assets for financial g | |
| 2 | _ | ints required to be reported under SFAS 1 | - | an, provide |
| _ | _ | | TO (ACC 300) relating to these items. | ▶ € |
| a | | on Form 990, Part VIII, line 1 | • • • • | ► \$ ► \$ |
| | Assets included in | | s for Form 990 | |
| ᅜᅜ | For Paperwork Re | eduction Act Notice, see the Instruction | 3 IUI FUIIII 33U. | Schedule D (Form 990) 2015 |

532051 11-02-15

| Sche Par | | lections of A | | orical Tr | easures, or Ot | her : | | | /8085 ts /continu | |
|--------------------|--|---------------------------------|---------------|--------------|----------------------|----------|-------------------|------------------|-----------------------------|--------------|
| 3 | Using the organization's acquisition, accession | | | | | | | | | |
| 3 | (check all that apply): | i, and other record | s, check | ally of the | lollowing that are a | a Sigili | псан | use or its | CONSCION | iteilis |
| | `——— | | \Box | oon or ovel | hange programs | | | | | |
| а | Public exhibition | d | | Other | nange programs | | | | | |
| Ь | Scholarly research | е | | Julei | | | | | | |
| С | Preservation for future generations | | | 6 | | | | D | . VIII | |
| 4 | Provide a description of the organization's coll | | | | | | | ose in Par | t XIII. | |
| 5 | During the year, did the organization solicit or it to be sold to raise funds rather than to be main | | | | | liai as | Seis | | Yes | □ |
| Dar | t IV Escrow and Custodial Arrange | | | | | on Fo | rm 000 |) Dort IV | | <u> </u> |
| | reported an amount on Form 990, Part | | | Organizatio | ii answered Tes | 01110 | 1111 330 | o, i aitiv, | iii e 3, 0i | |
| 12 | Is the organization an agent, trustee, custodial | | lary for o | contribution | s or other assets r | not inc | luded | | | |
| 14 | on Form 990, Part X? | | | | | | idaca | | Yes | ☐ No |
| h | If "Yes," explain the arrangement in Part XIII ar | nd complete the fo | Ilowina ta | able: | • | • | | - | _ 1C3 | 140 |
| | ii res, explain the arrangement iii are xiii ar | ina complete the le | | | | | | | Amount | |
| С | Beginning balance | | | | | | 1c | • | , and and | - |
| | Additions during the year | • •• | | | • | | 1d | | | |
| e | Distributions during the year | •• | | • • | • | | 1e | | | |
| f | Ending balance | , , | | | • | | 1f | | | - |
| 2a | Did the organization include an amount on For | m 990, Part X, line | 21, for e | scrow or cu | ustodial account lia | ability? |) | | Yes | ☐ No |
| | if "Yes," explain the arrangement in Part XIII. C | | | | | | | | | |
| Pai | | | | | | | | | | |
| | | (a) Current year | (b) Pi | nor year | (c) Two years back | (d) | Three y | ears back | (e) Four y | ears back |
| 1a | Beginning of year balance | | | | | | | | | |
| b | Contributions | | | | | | | | | |
| С | Net investment earnings, gains, and losses | | | | | | | | | |
| d | Grants or scholarships | | | | | | | | | |
| е | Other expenditures for facilities | | | | | | | | | |
| | and programs | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | |
| g | End of year balance | | | | <u></u> | | | | | |
| 2 | Provide the estimated percentage of the curre | nt year end balanc | e (line 1ç | g, column (a | a)) held as: | | | | | |
| а | Board designated or quasi-endowment > _ | <u> </u> | _% | | | | | | | |
| b | Permanent endowment > | % | | | | | | | | |
| c | Temporarily restricted endowment ▶ | % | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c should | ld equal 100%. | | | | | | | | |
| 3a | Are there endowment funds not in the posses | sion of the organiza | ation tha | t are held a | nd administered fo | r the | organiz | zation | | |
| | by: | | | | | | | | Υ Υ | es No |
| | (i) unrelated organizations | | | | | | | ••• | 3a(i) | |
| | (ii) related organizations | | | | | | | | 3a(ii) | |
| b | If "Yes" on line 3a(ii), are the related organizati | | | | | | | • | _3b | |
| 4 | Describe in Part XIII the intended uses of the c | | wment f | unds. | | | | | | |
| Pai | t VI Land, Buildings, and Equipme | | D-4 N | | | V 1 | - 40 | | | |
| | Complete if the organization answered | 1 | | | | | | <u></u> | () D = -1 | |
| | Description of property | (a) Cost or o basis (investr | | | | | mulate ciation | I | (d) Book v | /alue |
| | 1 | Dasis (investi | | Dasis | (50.101) | achie | Jailon | - | | |
| | Land | | | | | | | - | | |
| b | Buildings | | - | | | | | - - | <u> </u> | |
| C | Leasehold improvements | | + | | | | | | | |
| d | Equipment | . | | 1 | 7,917. | | 6 | 58. | 17 | 250 |
| | Other | ual Form 990 Part | Y colum | | | | <u> </u> | | 17 | 259 |

| rai | T XI Reconciliation of Revenue per Audited Financial Statemen | its with Revenue per i | | |
|--------------------------|---|------------------------|--------------------|------------------------------------|
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 1,308,951. |
| 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 | 2b 15,863 | .] | |
| c | Recoveries of prior year grants | 2c |] | |
| d | Other (Describe in Part XIII.) | 2d | 1 1 | |
| e | Add lines 2a through 2d | | 2e | <u>15,863.</u> |
| 3 | Subtract line 2e from line 1 | | 3 | 1,293,088. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | 1 1 | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | <u> </u> | |
| b | Other (Describe in Part XIII.) | 4b |] | |
| С | 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 | 1,293,088. |
| Par | rt XII Reconciliation of Expenses per Audited Financial Stateme | nts With Expenses pe | ^r Retui | 'n. |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | | | |
| 1 | Total expenses and losses per audited financial statements | | 1 | <u>792,675.</u> |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | | |
| а | Donated services and use of facilities | 2a 15,863 | <u>.</u> | |
| b | Prior year adjustments | 2b | . | |
| С | Other losses | 2c | . | |
| d | Other (Describe in Part XIII.) | 2d | - | |
| е | Add lines 2a through 2d | | 2e | <u> 15,863.</u> |
| 3 | Subtract line 2e from line 1 | | 3 | 776,812. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | 1 1 | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII) | 4b | 4 | |
| С | Add lines 4a and 4b | | 4c | 0. |
| | | | 1 1 | 776 040 |
| 5 Par Provi | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV. 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional states. | | 4; Part 2 | 776 , 812 . K, line 2, Part XI, |
| 5 Par Provi | rt XIII Supplemental Information. | | | |
| 5 Par | rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV | | | |
| 5 Par | rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV | | | |
| 5 Par | rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV | | | |
| 5 Par Provi | rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV | | | |

KIN=0021

36-4478085 Page 4

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

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.

Open to Public Inspection

Internal Revenue Service Name of the organization Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number 36-4478085

| The Kindling Group | 36-4478085 |
|---|--------------------------------------|
| Form 990, Part I, Line 1, Description of Organization Mi | ssion: |
| the civic and educational impact of such media. These a | activities |
| further all aspects of the mission through the production | on of |
| documentary films and videos, films and television progr | cams; |
| educational curricula; and educational websites. Produc | ctions by the |
| Kindling group investigate, document, & present important | nt social, |
| civic, political, historical, and educational issues. | |
| Form 990, Part III, Line 1, Description of Organization | Mission: |
| Chicago's premiere content creators; with a group of dec | licated |
| filmmakers, digital strategists, artists, and activists | developing and |
| producing documentaries for traditional and new media as | vehicles for |
| change. Every story the team sets out to tell is rooted | in curiosity, a |
| desire to create dialogue, and a commitment to cross pla | ntform |
| engagement - converting passive viewers to active stakeh | nolders and |
| resulting in real, measurable impact. | |
| Form 990, Part VI, Section B, line 11: | |
| | · nnion to |
| Board gets together to sign 990 tax return and review it | prior to |
| submission | |
| Form 990, Part VI, Section C, Line 19: | |
| All documents are available for public review upon reque | est |
| Form 990, Part IX, Line 24e, All Other Functional Expens | ses: |
| Marketing and development: LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Sch | pedulo O (Form 200 or 200 F7) (2045) |
| SCI TO I OF TAPEL WORK THE GLOCIO IN ACCUSTORS, SEE THE HIST GLOCIO IS TO FORTH 350 OF 350-EZ. | nedule O (Form 990 or 990-EZ) (2015) |

532211 09-02-15

| Name of the organization The Kindling Group | Employer identification numbe 36-4478085 |
|---|---|
| Program service expenses | 40,877 |
| Management and general expenses | 2,440 |
| Fundraising expenses | 0 |
| Total expenses | 43,317 |
| Reimbursed : | |
| Program service expenses | 14,340 |
| Management and general expenses | 18,355 |
| Fundraising expenses | 0 |
| Total expenses | 32,695 |
| Operating fees: | |
| Program service expenses | 0 |
| Management and general expenses | 11,743 |
| Fundraising expenses | 0. |
| Total expenses | 11,743. |
| Equipment rental: | |
| Program service expenses | 4,992. |
| Management and general expenses | 0. |
| Fundraising expenses | 0. |
| Total expenses | 4,992. |
| Bank charges: | |
| Program service expenses | 0. |
| Management and general expenses | 2,769. |
| Fundraising expenses | 0. |
| Total expenses | 2,769. Schedule O (Form 990 or 990-EZ) (2015 |
| 532212 08-02-15 32 1-01-1-02-7-9-7-8-08-KIN-0-02-2015-04030 The K | |

| Name of the organization The Kindling Group | Employer identification numb |
|---|-------------------------------------|
| ine kindling Gloup | 30 4470003 |
| Postage and shipping: | |
| Program service expenses | |
| Management and general expenses | 1,160 |
| Fundraising expenses | |
| Total expenses | 1,160 |
| License and permits: | |
| Program service expenses | |
| Management and general expenses | 1,07 |
| Fundraising expenses | |
| Total expenses | 1,07 |
| Loss on disposal of fixed assets: | |
| Program service expenses | |
| Management and general expenses | 969 |
| Fundraising expenses | |
| Total expenses | 969 |
| Research: | |
| Program service expenses | 300 |
| Management and general expenses | |
| Fundraising expenses | |
| Total expenses | 300 |
| Meals and entertainment: | |
| Program service expenses | 273 |
| Management and general expenses | Schedule O (Form 990 or 990-EZ) (20 |
| 532212 09-02-15 33 1-0-1-1-0-2-7-9-7-8-0-8-KIN-00-220-1-50-4-0-30-The-K-1-1 | , |

| Name of the organization | Employer identification number |
|--|--------------------------------|
| The Kindling Group | 36-4478085 |
| Fundraising expenses | 0. |
| Total expenses | 273. |
| Total Other Expenses on Form 990, Part IX, line 24e, Col | A 99,291. |
| Form 990, Part XI, line 9, Changes in Net Assets: | |
| Prior period audit adjustment - restate 2014 audit | -176,486. |
| Form 990, Part XII, Line 2c: | |
| The board gets together to review the annual audit | |
| | |
| | |
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