DLN: 93493214013686

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2015

Open to Public Inspection

momari			I					Inspection	
A Fo	or the	e 2015 ca	alendar year, or tax year beginni	ing 01-01-2015 , and ending 12-31-20	15				
B Che	ck if	applicable	C Name of organization Acton Institute for the Study of			D Empl	yer ide	ntification number	
Add	ress c	change	Religion and Liberty			38-2	92682	2	
Nar	ne ch	ange	Doing business as						
Initi	ıal reti	urn				E Teleph	one num	nber	
Fina		rmınated	Number and street (or P O box if 98 E Fulton St No 101	mail is not delivered to street address) Room/su	ııte	·			
_						(616) 454-3	3080	
		l return	Grand Rapids, MI 49503	untry, and ZIP or foreign postal code		G Gross	receipts	\$ 11,233,763	
J App	licatio	on pending						. , ,	
			F Name and address of pr Robert Sirico	incipal officer	H(a)	Is this a group			
			98 E Fulton St No 101		H(b)	subordinates? Are all subord		「Yes √No 「Yes 「No	
			Grand Rapids, MI 49503		"(2)	included?	maces	1 1631 110	
	v-0V0	mpt status		(insert no)				(see instructions)	
				(insert no) 4947(a)(1) or 527	H(c)	Group exemp	tıon nu	mber ►	
J W	ebsit	t e:► ww	w acton org						
K Forn	n of o	rganızatıor	Corporation Trust Associati	on	L Ye	ar of formation 1	990 M	State of legal domicile Mi	
Pa	rt I	Sun	nmary						
		•	scribe the organization's missio	_					
<u>.</u>	<u> </u>	l o promo	te a free and virtuous society cl	naracterized by individual liberty				_	
Governance	-								
EII	_								
9%e	2	Check tl	his box দ if the organization d	scontinued its operations or disposed o	of more t	han 25% of its	net as	sets	
	2	Number	of voting members of the govern	ning body (Part VI, line 1a)			з	13	
Activities &				of the governing body (Part VI, line 1b)			4	11	
Marie				calendar year 2015 (Part V, line 2a)			5	46	
cti.				necessary)			6	30	
4				Part VIII, column (C), line 12			7a	299,636	
				om Form 990-T, line 34			7b	224,729	
						Prior Year	<u> </u>	Current Year	
	8	Contr	ributions and grants (Part VIII,	line 1h)		8,183	,452	9,752,063	
elle.	9						562,305		
Revenue	10	Inves	Investment income (Part VIII, column (A), lines 3, 4, and 7d)					327,252	
Ė.	11	O the	r revenue (Part VIII, column (A)), lines 5, 6d, 8c, 9c, 10c, and 11e)		292	,051	35,565	
	12		revenue—add lines 8 through 1	1 (must equal Part VIII, column (A), lın	е	9,082	,447	10,684,012	
	12	12)		+ IV l (A) l 1 2)		450	0.4.6	1.05 1.01	
	13 14			t IX, column (A), lines 1-3)		459	046	165,161	
				IX, column (A), line 4)	•		- 		
\$	15	5-10		ree benefits (Fart IX, Column (A), intes		2,938	,350	3,234,321	
ens	16a	ı Profe	ssional fundraising fees (Part I)	(, column (A), line 11e)			0	0	
Expenses	b	Total f	undraising expenses (Part IX, column (D), line 25) • 719,515					
	17	O the	r expenses (Part IX, column (A)	, lines 11a-11d, 11f-24e)		6,030	,842	7,017,002	
	18	Total	expenses Add lines 13-17 (m	ust equal Part IX, column (A), line 25)		9,428	,238	10,416,484	
	19	Revei	nue less expenses Subtract line	e 18 from line 12		-345	,791	267,528	
Not Assets or Fund Balances					Begir	ning of Current	Year	End of Year	
Set Ses	20	Total	assets (Part X. line 16)			17,855	.546	17,967,919	
AS dB	21					316	-	380,145	
\$ <u>5</u>	22			t line 21 from line 20		17,539	-	17,587,774	
Par			nature Block			·		· · · · · · · · · · · · · · · · · · ·	
my kr	rer h	edge and nas any k	belief, it is true, correct, and co nowledge	kamined this return, including accompar mplete Declaration of preparer (other tl					
Here		Pob	ert Sırıco President						
			e or print name and title						
			Print/Type preparer's name		Date	Check I If	PTIN	4705	
Paid	i	L	Daren Daiga	Daren Daıga		self-employed			
Pre	pare	er ⊢	Firm's name Capin Crouse LLP	OTF A		Firm's EIN 🕨 3			
'	_		Firm's address 🟲 972 Emerson Parkway	/ SIE A		Phone no (31	/) 885-2	620	

Greenwood, IN 46143
May the IRS discuss this return with the preparer shown above? (see instructions)

Use Only

. ✓ Yes ┌ No

		_		_	
Part TTT	Statement of	Program	Service	Accom	nlishments
	ota to illoiit oi	og. a	JUI 7100		P.1.511111011C

Briefly describe the organization's mission

Mission of the Acton Institute is to promote a free and virtuous society characterized by individual liberty and sustained by religious principles

If "Yes," describe these new services on Schedule O

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 4,605,782 including grants of \$ 30,001) (Revenue \$ 262,807)

Education Acton's Education Department targets current and future religious, business, and community leaders, both nationally and internationally, and works to promote an understanding of market principles and to encourage the economic freedom that creates opportunity for all. The Institute sponsors conferences aimed at educating leaders of all denominations and provides opportunities for awards and scholarships through various programs of the outreach area. The Institute sponsored domestic conferences for current and future leaders with an emphasis on those who shape the moral culture. The conferences included Acton University which is an annual comprehensive four-day exploration of the intellectual foundations of a free society. Many students selected to attend our conferences receive a full or partial scholarship, which covers room and board expenses as well as conference fees. In 2015, 857 students from 60 different countries attended, and limited travel scholarships were provided in cases of need Expenses were also incurred for a discovery process to identify and educate clergy, students, religious leaders and seminary faculty members who can assist us in furthering our programs. We maintained an active networking effort to build strategic alliances and partnerships with evangelical churches, nonprofits, and seminaries Production of For the Life of the World, a seven-part video curriculum, was completed at the end of 2013. In February 2014 we soft-launched this film series in both full-length feature film format and episodic format along with an ecosystem of education tools and resources. In June physical product became available for purchase. Subsequently, For the Life of the World and several of its ancillary resources have been among Acton's top-selling and most sought after resources. At the end of 2015, more than 3,000 groups, churches, and organizations have engaged with these products and resources. Digital distribution and broadcast has taken the series international with growing exposure around th

4b (Code) (Expenses \$ 2,010,521 including grants of \$ 135,160) (Revenue \$ 213,214)

Research The Institute's academic investigations are conducted by its Research Department. This work centers on theology, economics, philosophy, and history, among other topics. Additionally, the investigations produced at the Acton Institute are delivered locally in Grand Rapids as well as at national and international conferences with the goal of reaching the scholarly community at large. The Research Department publishes books, journals, monographs and occasional papers, and its staff regularly publishes books with external publishing houses. The Journal of Markets & Morality is a semi-annual refereed journal that provides a forum for scholars to engage issues concerning the morality of the marketplace. The Christian Social Thought Series examines, in each volume, a key economic issue facing Christians. Non-Christians have also written articles and books addressing relevant themes of interest to the Acton Institute. The Research Department also manages Acton's academic scholarship programs. Fellowships were awarded to provide financial assistance, in the form of academic fellowships and travel grants, to promising seminarians and graduate students who are advancing an understanding of the connection between economic liberty and religious values. The annual Novak Award recipient is presented with a prize to acknowledge and reward new research on the relationship between religion, economic freedom, and the free and virtuous society Lastly, the Research Department manages a number of programs, including (1) small specific conferences for scholars and graduate students that mostly are held in Grand Rapids, (2) larger conferences for leading religious figures, and (3) the scholarly and programmatic outreach of Acton's Rome office Internationally, we have held conferences on various topics such as economic liberty, poverty and development, Catholic social teaching, Judaism and the economy, intellectual property rights, and limited government. Our office in Rome also held regular small lectures at the office

4c (Code) (Expenses \$ 1,278,619 including grants of \$) (Revenue \$ 66,111)

General Education and Communications The Institute reaches out to business leaders, policymakers, students, and religious and community leadership groups through lectures, media products, web and social media, and various writings. The 2015 annual dinner celebrating 25 years of the Acton Institute was held to promote outreach and to thank supporters for their partnership. The dinner and program festivities included discourse with prominent public speakers and Institute supporters. The Faith and Freedom Award was given to Diet Eman, a hero of the Dutch Resistance in World War II. Over 800 attended, and admission was charged to defray expenses incurred. The Acton Lecture Series and Acton Film Series hosted over 25 local events during the year in our conference center with an average attendance of more than 100 people per event for discussions of current events of local interest. The Institute also sponsored several other luncheon and dinner lectures around the country. Our facility in Grand Rapids allowed us to host an increasing number of downtown events offered to the general public Acton Institute also operates a bookstore to promote and sell its own publications, in addition to outside publications, related to our mission and program outreach areas. These educational materials were sold, distributed and exhibited at a variety of events throughout the world. Our rich and robust web presence centers on the Acton website (www acton org), and includes other Acton sites such as the PowerBlog as well as a great deal of current and historical Acton-produced content. The Institute has a broad and growing presence in social media. This platform has steadily increased the scope and frequency of Acton's outreach to the general public The Communications Department manages the growing family of Acton websites, blog, and social media which use leading technology to integrate text, audio, and video content in easily accessible formats and venues to promote Acton's message to web users. It publishes the print and digital edi

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses \$ 1,073,931 including grants of \$) (Revenue \$ 148,750)

le Total program service expenses > 8,968,853

Form 990 (<u> </u>	ired Schedules
Part IV	Checklist of Requi	ired Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 🔁	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	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		N o
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
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 (see instructions)	17		No
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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
_		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νo
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Check if Schedule O contains a response or note to any line in this Part V		990 (2015)			Page 5
be Enter the number reported in 86x 3 of Form 1096 Enter -0 - if not applicable 14 14 15 16 16 16 16 16 16 16	Par				г
De the characteristic process with a complete and the complete and the characteristic periods and reportable parametristic vendors and reportable vendors. Vendors		check if Schedule o contains a response of note to any line in this fart v	· · ·	Yes	No No
but the organization comply with backtup withholding rules for reportable payments to vendors and reportable. 2 Incomplying the property of t	1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 141			
gamma (gambing) winnings to prize winners? Enter the number of employees reported on Form W.3. Transmittel of Wage and Tas Statements, field for the calendar year ending with or within the year covered by the return in experted in the 2, and the origination file at the gamma defined is emblorment to return 7. By the Model the sum of lines is and 2 is a greater than 250, you may be required to end in the result of the Country of the 20 or more dump the ver? By the Country of the Country of the 20 or more dump the ver? By the country of the 20 or more dump the ver? Country of the 20 or more dump the ver? Country of the 20 or more dump to the calendar year, and the organization have an interest in, or a signature or other authority account? If Yes, and the dump the calendar year, and the organization have an interest in, or a signature or other authority account? If Yes, and the dump the calendar year, and the organization is a behalf accounts of the country of the 20 organization is an experiment of the first EH form 114, Report of Foreign Bank and Financial Accounts (FBA.8) By the country of the definition of the first EH form 114, Report of Foreign Bank and Financial Accounts (FBA.8) Country of the design of the organization have a sheller transaction at any time dump the tax year? So Was the organization approach to the value of the Bank Schott. If Yes, to him 5 and 50, did the organization have form 8865-17 So Was the organization and the same octax deductible octavity of the organization of the organization have are not tax deductible on the organization of th	b	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 0			
Tax Statements, filed for the calendar year ending with or within the year covered by this return. It is a file least one is more filed as a file of organization file all requires federal employment tax returns? Note: The as in office is a and 2 as in greater than 250, you may be required to e-tile (see instructions). 30 Did the organization have unrelated business gross income of \$1,000 or more during the year? 31 A vary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in organization account, organization account, organization accounts (reflace). 32 If 'Yes,' or their che name of the foreign country (schools). 33 Yes 34 Yes 35 Was the organization aparty to a prohibited tax sheller transaction at any time during the tax year? 55 Was the organization aparty to a prohibited tax sheller transaction at any time during the tax year? 56 Does the organization aparty to a prohibited tax sheller transaction at any time during the tax year? 57 Yes, ' did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that was or is a party to a prohibited tax shelter transaction? 58 If 'Yes,' did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that was or is a party to a prohibited tax shelter transaction? 59 If 'Yes,' and the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that was yer is a cantribution and party for goods and services provided to the organization have executed solicit any contributions or that was the contributions or gifts were not tax deductible? 70 Organization that may receive deductible contributions under section 1700. 71 Organization that may receive deductible contributions under section 1700. 72 Organization that may receive deductible contributions in t	c		1c	Yes	
If it least one is reported on line 2 a, dot the organization file all required fed employment tax returns? Note: if the sum of lines 1 and 42 as greater than 25, you may be required to e-file (see instructions) 30. If the organization have unrelated business gross income of \$1,000 or more during the year? 40. If Yes, 'has it filed a Form 990-T for this year?!! 'More time 30, provide an explanation in Schedule 0. 41. If Yes, 'has the did a Form 990-T for this year?!! 'More time 30, provide an explanation in Schedule 0. 42. Yes 43. Yes 44. Yes 45. If Yes, 'has the did a Form 990-T for this year?!! 'More time 30, provide an explanation in Schedule 0. 46. At any time during the calendaryear, did the organization fed the committee that year is the county of	2a	Tax Statements, filed for the calendar year ending with or within the year covered			
3a / Yes 11	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
1.1 **Test_** has it filled a form 990-1 for this year? **Time** to the 2b, provide an explanation on a schedule 0	32		32	Vas	
4a At amy time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts) 5b If "Yea," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) 5a Was the organization a party to a prohibited tax shalter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shalter transaction at any time during the tax year? 5b Did any taxable party norshy the organization file form 886-17? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization follows the very solicitation an express statement that such contributions or gifts were not tax dedictible? 6b Did the organization include with every solicitation an express statement that such contributions or gifts were not tax dedictible? 7b Organization that new receive deductible contributions under section 170(c). 8b If "Yea," and the organization notify the concer of the value of the goods or services provided? 7c Organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7c Into the organization neceive a payment in excess of \$75 made party as contribution and party for goods and services provided? 7c Into If "Yea," indicate the number of Forms \$202 filed during the year 7d If Yea," indicate the number of Forms \$202 filed during the year 9c Did the organization magnitude and party as a contribution of granization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 9c Did the organization maintaining door advised funds. 9c Did the sponsoring organization make any taxable distributions under section 4866? 9c Did the sponsoring organization make any taxable distributions under section 4866? 9c Did the sponsori					
See instructions for fining requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 58 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 59 Was the organization aparty to a prohibited tax shelter transaction? 50 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 50 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with very solicitation and express shatement that such contributions or gifts were not tax deductible? 50 Organizations that may receive deductible contributions under section 170(c). 51 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? 51 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? 52 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 52 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 53 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 54 Pos Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 54 Pos Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 55 Pos Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 76 No Pos Did the organization function of qualified intellectual property, did the organization file of premised premised. 77 No Did the organization maintaining donor advised funds. 18 Did the organization instination of premised premised premised premised premised prem		At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a	Yes	
b Did any taxable party notify the organization that it was on is a party to a prohibited tax shelter transaction? 5	b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
to If "Yes," to line 5a or 5b, did the organization file Form 8886-T7 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chantable contributions? b If "Yes," did the organization include with very solicitation an express statement that such contributions or grits were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization on the section 170(c). 7 If "Yes," indicate the number of Forms 8282 filed during the year. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Power in 17 Yes," indicate the number of Forms 8282 filed during the year. 7 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 8 Power organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? 9 Power organization make any taxable distributions under section 4966? 9 Power organization make any taxable distributions under section 4966? 9 Power organization make any taxable distributions under section 4966? 9 Power organization make any taxable distributions under section 4966? 9 Power organization make any taxable distributions under section 4966? 9 Power organization for the section of the section 501(c)(2) organizations. Enter 10 Did the sponsoring organization make any taxable distributions under section 4966? 10 Pow	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
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a 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? b If Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$252.7 d If "Yes," indicate the number of Forms \$282.7 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 70 No 1 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 No 1 If the organization received a contribution of qualified intellectual property, did the organization file Form \$899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0.2 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? 9a Did the sponsoring organization make any taxable distribution to advoor, donor advisor, or related person? 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9cection 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b		were not tax deductible?	6b		
services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$2.82.7 d If "Yes," indicate the number of Forms \$2.82.2 filed during the year			72	Vac	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 9282? d If Yes, enter the amount of fears by symmetric forms \$1282 filed during the year		services provided to the payor?			
file Form 8.282?			76	165	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f No g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 9a Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organizations make any taxable distributions under section 4966? 9b Did the sponsoring organizations make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organizations. Enter 10 Gross receipts, included on Form 990, Part VIII, line 12. 10 Initiation fees and capital contributions included on Part VIII, line 12. 10 Initiation fees and capital contributions included on Part VIII, line 12. 10 Initiation fees and capital contributions. Enter 11 Gross income from members or shareholders 12 Gross income from members or shareholders 13 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 501(c) (29) qualified nonprofit health insurance issuers. 12 If "ves," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c) (29) qualified nonprofit health insurance issuers. 13 Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 13 Enter the amount of reserves on hand 14 Did the organization receive any payments for indoor tanning services during th		file Form 8282?	7c		Νo
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 No 7 N	d	If "Yes," indicate the number of Forms 8282 filed during the year			
required? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? Pa Did the sponsoring organization make any taxable distributions under section 4966? Pa Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Photomatical distributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 B Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(2) organizations. Enter Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in which the organization is licensed to issue qualified health plans in which the organization is licensed to issue qualified health plans in which the organization is licensed to issue qualified health plans in which the organization is licensed to issue qualified health plans in which the organization is required to maintain by the states in which t	e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
required? A If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organizations. Enter 1 Initiation fees and capital contributions included on Part VIII, line 12 1 Initiation fees and capital contributions included on Part VIII, line 12 1 Section 501(c)(12) organizations. Enter 2 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 1 If "Yes," enter the amount of tax-exempt interest received or accrued during the year 3 Section 501(c)(29) qualified nonprofit health insurance issuers. 1 Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 1 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization is required to maintain by the states in the did not provide the organization is seed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization is seed under the organization is seed und	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
Form 1098-C? 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? 9a 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 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9c Did the sponsoring organizations. Enter 100 Did	g		7g		
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	h		7h		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	8	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time	8		
a Initiation fees and capital contributions included on Part VIII, line 12	9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a Initiation fees and capital contributions included on Part VIII, line 12	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	10	Section 501(c)(7) organizations. Enter			
facilities Section 501(c)(12) organizations. Enter a Gross income from members or shareholders					
a Gross income from members or shareholders		facilities			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)					
against amounts due or received from them)					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand	D	· · · · · · · · · · · · · · · · · · ·			
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a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand	b	1 1 2 6 1			
additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
In which the organization is licensed to issue qualified health plans	а	· · · · · · · · · · · · · · · · · · ·	13a		
14a Did the organization receive any payments for indoor tanning services during the tax year?	b	1461			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	С	Enter the amount of reserves on hand			
					No
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			<u> </u>

Coulourance Management and Displacius	
GOVERNANCE MANAGEMENT AND DISCINSURE	
Governance, Management, and Disclosure	

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Se	ection A. Governing Body and Management			•		''
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	13			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	11			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	rior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets? .	5		Νo
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?		elect or appoint one or	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written activear by the following	ons u	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>		annot be reached at the	9		No
Se	ection B. Policies (This Section B requests information about policies not	requ	ired by the Internal R	even	ue Cod	e.)
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		No
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b		
.1a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	ts gov	erning body before filing	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	90			
.2a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annual rise to conflicts?	ly inte	rests that could give	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? <i>If "Yes," describe</i>	12c	Yes	
.3	Did the organization have a written whistleblower policy?			13	Yes	
.4	Did the organization have a written document retention and destruction policy? $\ \ .$			14	Yes	
.5	Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the					
а	The organization's CEO, Executive Director, or top management official			15a	Yes	
b	Other officers or key employees of the organization	•		15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
.6a	Did the organization invest in, contribute assets to, or participate in a joint venture taxable entity during the year?	orsım • •	ılar arrangement with a	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organ participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	e step	s to safeguard the	16b		
-	action C. Disclosure			100		

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

 ${\tt AL,AK,AR,CT,FL,KS,KY,ME,MD,MA,MI,MN,MO}$, NH , NJ , NĆ , OK , OR , PA , RI , SĆ , TŃ , UT , VÁ , WV , WI , MS

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website V Upon request 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 ►Kris Mauren 98 E Fulton St No 101 Grand Rapids, MI 49503 (616) 454-3080

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

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

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

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

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

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

		Individual trustee or director	Institutional Trustee	Officei	r/Ke) employee	문 방 Highest compensated 으 와 employee	2)	from the organization (W- 2/1099- MISC)	compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations
(1) Rev Robert A Sirico	50 00	Х		х		č		236,419	0	4,794
(2) David Humphreys Chairman	1 00	х		Х				0	0	0
(3) Frank Hanna III Vice Chairman	1 00	х		х				0	0	0
(4) JC Huizenga Secretary	1 00	х		х				0	0	0
(5) John Kennedy III Treasurer	1 00	х		х				0	0	0
(6) Kris Mauren Executive Director	50 00	х		х				234,716	0	26,124
(7) Dr Alejandro Chafuen Director	1 00	х						0	0	0
(8) Dr Gaylen Byker Director	1 00	х						0	0	0
(9) Kenneth Muraskı part year Dırector	1 00	х						0	0	0
(10) Elsa D Prince Broekhuizen Director	1 00	х						0	0	0
(11) John M Gordon Jr Director	1 00	х						0	0	0
(12) Sean Fieler Director	1 00	х						0	0	0
(13) John Crowe	1 00	х						0	0	0
(14) James Rahn Director	1 00	х						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not bo: h aı	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		(F Estim amount o compen from	iated of other isation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)		organız and re organız	lated
·	Tom Vogt tor of Finance	50 00			х				81,332	2	0		24,27
(16)	Sam Gregg	50 00					х		123,991		0		4,360
	tor of Research Stephen Grabill	50 00					×		112,882		0		21,456
(18)	tor of Programs Michael Miller	50 00					X		100,168		0		24,35:
	tor of Media						^		100,100	1	+		24,33.
											+		
											$ lap{1}$		
											4		
											+		
											+		
1b c d	Sub-Total			•		•			889,508	0			105,357
2	Total (add lines 1b and 1c) Total number of individuals (including because 100,000 of reportable compensation	out not limited to	those		ed a	bove	e) who	rec	, <u> </u>	<u> </u>			103,337
												Yes	No
3	Did the organization list any former offi on line 1a? If "Yes," complete Schedule 3			e, key	y em	nplo •	yee,o	r hıg	hest compensate		3		Νo
4	For any individual listed on line 1a, is to organization and related organizations individual									om the			140
5	Did any person listed on line 1a receive services rendered to the organization?									ndıvıdual for	4 5	Yes	No
	ection B. Independent Contracto	ors											
1	Complete this table for your five highes compensation from the organization Re	t compensated										ax year	
		(A) ousiness address							Descripti	(B) on of services		(C) Compen	
Gonll	a Pictures								Film production				187,440

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Gorilla Pictures	Film production	187,440
1514 Wealthy St 290		
Grand Rapids, MI 49506		
Allegra Print and Imaging	Printing services	145,033
3983 Lincoln Ave SE		
Grand Rapids, MI 49548		
Context Partners	Research and development	123,952
2009 NE Alberta Street Ste 201		
Portland, OR 97211		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 3

Part V	1 🗆 🗆	Statement of Revenue					_
		Check if Schedule O contains a respon	nse or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	4						512-514
ts its	1a	Federated campaigns 1a					
Grants mounts	ь	Membership dues 1b					
, G Am	С	Fundraising events 1c	192,220				
ons, Gifts, Grants Similar Amounts	d	Related organizations 1d					
s, G imil	e	Government grants (contributions) 1e					
ion r Si	f	All other contributions, gifts, grants, and 1f	9,559,843				
Contributions, and Other Sim		similar amounts not included above Noncash contributions included in lines					
ntri d O	g	1a-1f \$	80,365				
Cont	h	Total. Add lines 1a-1f	· · · · •	9,752,063			
Je			Business Code				
ven	2a	Education	900099	262,807	262,807		
2 8	Ь	Research	900099	213,214	213,214		
ИСе	С	Communications	900099	66,111	66,111		
Se	d	Media	900099	27,000	27,000		
Program Serwce Revenue	e f	All other program service revenue					
rog⊩	•						
	g	Total. Add lines 2a-2f		569,132			
	3	Investment income (including divident and other similar amounts)		302,612		299,636	2,976
	4	Income from investment of tax-exempt bond	proceeds 🕨				
	5	Royalties	🕨				
	6-	(1) Real Gross rents 159,523	(II) Personal				
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
	ь	Less rental 64,922 expenses					
	С	Rental income 94,601 or (loss)					
	d	Net rental income or (loss)		94,601			94,601
	_	(ı) Securities	(II) Other				
	7a	Gross amount from sales of 70,692 assets other than inventory					
	ь	Less cost or other basis and 46,052					
		sales expenses					
	C d	Gain or (loss) 24,640 Net gain or (loss)		24,640			24,640
Other Revenue		Gross income from fundraising events (not including \$					
the.	_	a	41,150				
ō		Less direct expenses b Net income or (loss) from fundraising	221,936	-180,786			-180,786
		Gross income from gaming activities See Part IV , line 19	events p -	100,700			100,700
	ь	Less direct expenses b					
		Net income or (loss) from gaming acti					
		Gross sales of inventory, less returns and allowances .	338,591				
	ь	Less cost of goods sold b	·				
		Net income or (loss) from sales of inve	216,841 entory p -	121,750	121,750		
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d					
	12	Total revenue. See Instructions .	· · · · •	10,684,012	690,882	299,636	-58,569

Part		Statement of Functional Expenses							
ectio	ection 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)								
		Check if Schedule O contains a response or note to any line in th	ıs Part IX			<u></u>			
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1		nts and other assistance to domestic organizations and estic governments See Part IV, line 21	59,700	59,700					
2		nts and other assistance to domestic	61,080	61,080					
3	gove	nts and other assistance to foreign organizations, foreign ernments, and foreign individuals. See Part IV, lines 15	01,000	01,000					
		16	44,381	44,381					
4		efits paid to or for members							
5	key	pensation of current officers, directors, trustees, and employees	608,957	437,707	74,873	96,377			
6	(as c	pensation not included above, to disqualified persons defined under section 4958(f)(1)) and persons ribed in section 4958(c)(3)(B)	4,245	4,245					
7	Othe	er salaries and wages	2,049,430	1,622,315	127,591	299,524			
8		sion plan accruals and contributions (include section 401(k) 403(b) employer contributions)	54,473	42,924	3,567	7,982			
9	Othe	er employee benefits	338,358	265,368	23,197	49,793			
10	Payr	roll taxes	178,858	138,883	13,418	26,557			
11	Fees	for services (non-employees)							
а	Mana	agement							
b	Lega	1	49,536	14,440	35,096				
С	Acco	ounting	35,293		35,293				
d	Lobb	pying							
е		essional fundraising services See Part IV, line 17							
f		stment management fees							
g		er (If line 11g amount exceeds 10% of line 25, column (A) unt, list line 11g expenses on Schedule O)	2,333,193	2,284,121	17,780	31,292			
12		ertising and promotion	261,103	260,908		195			
13		e expenses	700,051	550,803	21,156	128,092			
14		rmation technology	149,526	143,212	3,096	3,218			
15		alties							
16		upancy	299,715	148,798	140,987	9,930			
17		el	583,543	518,092	44,298	21,153			
18		ments of travel or entertainment expenses for any federal, e, or local public officials							
19	Conf	ferences, conventions, and meetings	1,907,745	1,897,698	3,624	6,423			
20	Inte	rest							
21	Payr	ments to affiliates							
22	Depr	reciation, depletion, and amortization	242,765	144,826	77,020	20,919			
23		rance	14,965	10,034	3,559	1,372			
24	mısc 10%	er expenses Itemize expenses not covered above (List cellaneous expenses in line 24e If line 24e amount exceeds of line 25, column (A) amount, list line 24e expenses on edule O)							
а		pment	162,094	149,211	6,737	6,146			
b	Mea	ls and Entertainment	136,167	119,444	11,369	5,354			
c	UBI	Т	72,000		72,000				
d									
е	Allo	ther expenses	69,306	50,663	13,455	5,188			
25	Tota	I functional expenses. Add lines 1 through 24e	10,416,484	8,968,853	728,116	719,515			
26	repo educ	t costs.Complete this line only if the organization rted in column (B) joint costs from a combined sational campaign and fundraising solicitation ck here ► ☐ if following SOP 98-2 (ASC 958-720)							

Form 990 (2015) Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 77,188 68,604 1 1 2 5.743.151 2 6.283.779 Savings and temporary cash investments Pledges and grants receivable, net 1,842,197 1,665,566 3 3 4 22,139 4 77.712 5 Loans and other receivables from current and former officers, directors, trustees. key employees, and highest compensated employees. Complete Part II of 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 7 275,717 8 245,473 8 232.872 280,972 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 8,363,331 10a Complete Part VI of Schedule D b 10b 1,078,457 7,487,635 10c 7,284,874 Less accumulated depreciation 354,709 11 370,732 11 1,819,938 12 1,690,207 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . 14 14 15 15 16 **Total assets.**Add lines 1 through 15 (must equal line 34) 17,855,546 16 17,967,919 316,187 17 **17** 379,145 Accounts payable and accrued expenses 18 18 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 0 25 1,000 316,187 26 380,145 26 **Total liabilities.**Add lines 17 through 25 . . . Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete Balance lines 27 through 29, and lines 33 and 34. 12,796,575 13,284,414 27 27 4,742,784 4,303,360 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ö 30 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 ž 33 17,539,359 17,587,774 33

Total liabilities and net assets/fund balances

17.967.919

17.855.546

34

Pai	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		•	<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10,6	584,012
2	Total expenses (must equal Part IX, column (A), line 25)	2		10.4	116,484
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			539,359
5	Net unrealized gains (losses) on investments	5			L47,093
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-72,020
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		17,!	587,774
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			 Yes	. ▽ No
1	Accounting method used to prepare the Form 990			res	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Additional Data

Software ID: Software Version:

EIN: 38-2926822

Name: Acton Institute for the Study of

Religion and Liberty

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

(Code) (Expenses \$ 1,073,931 including grants of \$) (Revenue \$ 148,750)

Media The Media Department promotes Acton's message through various media products and outlets. The distribution of our feature-length films continued across the U.S. and internationally, including translation into several languages. Work completed in 2014 on the production of a documentary film (Poverty, Inc.) which was screened in locations domestically and internationally. A curriculum and related website about enterprise solutions to poverty in the developing world (PovertyCure) continued to be promoted. Many schools and universities have incorporated this resource into their curriculums. The project seeks to build a network of likeminded organizations as well as to promote a proper understanding of the human person and society. The media projects will encourage solutions that create opportunity and unleash the entrepreneurial spirit. Poverty, Inc. has earned more than 40 film festival awards to date and has played multiple sold-out premieres both domestically and internationally.

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493214013686

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

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.

Open to Public Inspection

	Institute on and l	e for the Study of Liberty					38-2926822		
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	tions must co	mplete this p		ons.	
The	organiz	zation is not a private fo	oundation beca	ause it is (For lines 1	through 11, ch	eck only one bo	ox)		
1	Γ	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i) .							
2	Γ	A school described in	section 170(b)(1)(A)(ii).(Attach So	hedule E (Form	1990 or 990-E	Z))		
3	Г	A hospital or a cooper	atıve hospıtal	service organization o	described in sec	tion 170(b)(1)	(A)(iii).		
4	\sqcap	A medical research or	ganızatıon ope	erated in conjunction v	vith a hospital d	lescribed in sec	tion 170(b)(1)(A)(iii). Enter the	
5	Г	hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)							
6	Γ	A federal, state, or loc	al government	t or governmental unit	described in se	ection 170(b)(1	.)(A)(v).		
7	┖	An organization that n described in section 1	70(b)(1)(A)(v	/i). (Complete Part II)		ntal unit or from the g	general public	
8	<u> </u>	A community trust de							
9		receipts from activition from gross investmen	es related to it it income and	ves (1) more than 33 is exempt functions—s unrelated business tall eesection 509(a)(2).	subject to certai xable income (le	in exceptions, a ess section 51	and (2) no more than	331/3% of its suppor	
10	Γ	An organization organ	ızed and opera	ited exclusively to tes	t for public safe	ty See sectior	ı 509(a)(4).		
11	Γ	An organization organ one or more publicly s	upported orga	nızatıons described in	section 509(a))(1) or section	509(a)(2) See sectio	on 509(a)(3). Check	
	_	the box in lines 11a th							
а	ı	Type I. A supporting of supported organization							
		organization You mus			-	ty of the unect	ors or trustees or the	supporting	
b	Γ	Type II. A supporting management of the su	organization s pporting organ	upervised or controlle	d in connection				
	_	must complete Part I	•						
C	ı	Type III functionally is supported organization						grated with, its	
d	Г	Type III non-function		· · · · · · · · · · · · · · · · · · ·				anızatıon(s) that ıs	
	•	not functionally integr			•				
	_	(see instructions) Yo							
е	ı	Check this box if the c					s a Type I, Type II, T	ype III functionally	
f	Enter	integrated, or Type III the number of support							
g	Liicoi	Provide the following i	_						
9		Troniae and following f	ormacion ab	out the supported orga	24 (10) (10)				
	ne of s	(i)	(ii)EIN	(iii) Type of	(iv)		(v) A mount of	(vi) A mount of other	
Name of supported organization			organization (described on lines 1- 9 above (see instructions))	Is the organization listed in your governing document?		monetary support (see instructions)	support (see instructions)		
					Yes	No			

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a)2011 **(b)**2012 (d)2014 (e)2015 (c)2013 (f)Total (or fiscal year beginning in) 🟲 1 Gifts, grants, contributions, and 8.115.474 12,329,257 10,169,050 8,183,452 9,752,063 48,549,296 membership fees received (Do not include any unusual grants) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 8,115,474 12,329,257 10,169,050 8,183,452 9,752,063 48,549,296 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included 11,616,507 on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 36,932,789 from line 4 Section B. Total Support Calendar year (a)2011 **(b)**2012 **(c)**2013 (d)2014 **(e)**2015 (f)Total (or fiscal year beginning in) 🟲 8,115,474 12,329,257 10,169,050 8,183,452 9,752,063 48,549,296 Amounts from line 4 Gross income from interest. dividends, payments received on 2,180 122,976 153,041 180,471 232,372 691,040 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or 133,239 248,165 207,004 287,361 299,636 1,175,405 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 40,720 47,972 43,820 46,269 41,150 219,931 capital assets (Explain in Part VI) Total support. Add lines 7 50,635,672 through 10 12 Gross receipts from related activities, etc (see instructions) 12 269,496 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization. Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 14 72 940 % Public support percentage for 2014 Schedule A, Part II, line 14 15 15 73 760 % 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported \vdash organization b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

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

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

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

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

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

18

►ſ

17

18

Part IV Supporting Organizations

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

Se	ction	Δ ΔΙΙ	Sunno	rtina	Orgai	nizations
Je	CUUII	A. A.	Suppu	, una	Ol uai	IILAGUUIIS

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

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

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

3b

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

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

Part VI Supplemental Information.

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

Facts And Circumstances Test

Return Reference	Explanation
	Miscellaneous Revenue - 2012 Amount \$ 5,592 2013 Amount \$ 2,045 2014 Amount \$ 5,244 Special Events - 2011 Amount \$ 40,720 2012 Amount \$ 42,380 2013 Amount \$ 41,775 2014
	Amount \$ 41,025 2015 Amount \$ 41,150

Schedule A (Form 990 or 990-EZ) 2015

DLN: 93493214013686

OMB No 1545-0047

SCHEDULE D (Form 990)

► 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.

Supplemental Financial Statements

Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service **Employer identification number** Acton Institute for the Study of Religion and Liberty 38-2926822 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education)
Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🛌 Number of states where property subject to conservation easement is located -__ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the vear Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)($_{\rm I}$) and section 170(h)(4)(B)($_{\rm II}$)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	ш	Organizations Maintaining (continued)	Collections of A	rt, His	storical	Trea	asures,	or Ot	her Similar A	ssets	
		the organization's acquisition, accetion items (check all that apply)	ession, and other rec	ords, cl						e of its	
а	ГР	ublic exhibition		d	Lo	an or	exchange	progra	ıms		
b	┌ s	cholarly research		е	┌ ot	her					
c	ΓP	reservation for future generations									
	Provid Part X	de a description of the organization's III	s collections and exp	laın ho	w they fur	ther t	he organız	atıon's	s exempt purpose	: In	
	asset	g the year, did the organization solic s to be sold to raise funds rather tha	an to be maintained a								
Part	IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990, Pai	rt IV,	line 9, o	r rep	orted an amour	nt on Form	າ 990,
		organization an agent, trustee, cus ed on Form 990, Part X?	todian or other interi	mediary	for contr	ıbutıo	ns or othe	rasse	ts not Yes		
ь	If"	Yes," explain the arrangement in Pa	art XIII and complete	e the fo	llowing ta	ble			Am	ount	
c		Jinning balance			5		I	1 c			
d	A do	ditions during the year						1d			
e	Dis	tributions during the year						1e			
f	Enc	ling balance						1f			
2a		e organization include an amount or	n Form 990, Part X, I	ıne 21 <i>.</i>	for escro	worc	ustodial a	ccoun	t liability? TYes	ГПо	
		J	, ,	,					, ,	,	
b	If"Ye	s," explain the arrangement in Part	XIII Check here ıf t	he expl	anation h	as be	en provide	d ın Pa	art XIII		Γ
Par		Endowment Funds. Complete									
			(a)Current year	(b) Pi	nor year	b (c) Two years l	back (d) Three years back	(e)Four yea	ars back
1a	Begin	ning of year balance									
b	Contr •	ributions · · · · · · ·									
С	losse										
d		s or scholarships									
e		rexpenditures for facilities rograms									
f	- A dmı	nistrative expenses									
g		fyear balance									
2	Provid	le the estimated percentage of the o	current vear end bala	nce (lır	ne 1a. col	umn (a)) held as				
		designated or quasi-endowment	,	•	3,	,	,,				
		nent endowment 🗠									
c	Temp	orarily restricted endowment Feercentages on lines 2a, 2b, and 2c :	should agual 100%								
3a	A re th	rere endowment funds not in the pos Ization by		ızatıon	that are h	neld aı	nd admınıs	tered	for the	Yes	No No
		related organizations							3a	a(i)	
	(ii) re	lated organizations							За	(ii)	
		s" on 3a(11), are the related organiza								3b	
		tibe in Part XIII the intended uses o		endowm	nent funds	S					
Part	VI	Land, Buildings, and Equipe Complete if the organization a		Form 0	100 Dart	· T\/ I	ına 11a S	300 F	orm 990 Part V	/ line 10	
		Description of property	niswered res to i		(a) ost or other	basis	(b) Cost or oth	er bası	Accumulated	(d)Book	value
1a	and			-+	(investme	111.)	(othe	080,000	1	1	080 000
				· -				068,824			,080,000 ,689,522
		old improvements		. "_			0,	000,024	3/3,30), J	,009,322
d E	quipm	ient		· _			1,	096,85	592,69	96	504,157
e 0	ther							117,654	106,45	59	11,195

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

7,284,874

	See Form 990, Part X, line 12.			
	(a) Description of security or catego (including name of security)	ry	(b) Book value	(c)Method of valuation Cost or end-of-year market value
	al derivatives			
(2)Closely (3)Other	-held equity interests			
(A) Commo	on Stock of Privately Held Corporation		1,655,000	F
(B) Coins			35,207	F
Total. (Column Part VIII	Investments—Program Related.	*	1,690,207	
	Complete if the organization answere	ed 'Yes' on Form 9	90, Part IV, line 11c. _{See}	Form 990, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
				Cost of end-of-year market value
	mn (b) must equal Form 990, Part X, col (B) line 13)	⊩		
	Other Assets 6			I d C E 000 D V I 4 E
Part IX	Other Assets. Complete if the organization (a) Des		n Form 990, Part IV, line 1:	
Part IX		tion answered 'Yes' o cription	n Form 990, Part IV, line 1:	(b) Book value
Part IX			n Form 990, Part IV, line 1:	
Part IX			n Form 990, Part IV, line 1:	
Part IX			n Form 990, Part IV, line 1:	
Part IX			n Form 990, Part IV, line 1:	
Part IX			n Form 990, Part IV, line 1:	
Part IX			n Form 990, Part IV, line 1:	
Part IX			n Form 990, Part IV, line 1:	
Part IX			n Form 990, Part IV, line 1:	
Part IX			n Form 990, Part IV, line 1:	
Part IX			n Form 990, Part IV, line 1:	
Total. (Colu	(a) Des	e 15.)		(b) Book value
Total. (Colu	(a) Des	e 15.)		(b) Book value
Total. (Colu	(a) Des	e 15.)		(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)		(b) Book value
Total. (Colu	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)		(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Part X 1.	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Total. (Colu Part X	(a) Description of liability	e 15.)	red 'Yes' on Form 990, Pa	(b) Book value
Total. (Colu Part X 1. Federal Inc	(a) Description of liability	e 15.) ganization answer (b) Book valu	red 'Yes' on Form 990, Pa	(b) Book value

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	10,529,821
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a -147,093		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	-82,171
3	Subtract line 2e from line 1	3	10,611,992
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	72,020
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	10,684,012
Par	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s per	Return.
1	Total expenses and losses per audited financial statements	1	10,481,406
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	64,922
3	Subtract line 2e from line 1	3	10,416,484
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	10,416,484

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
Part X, Line 2	The financial statement effects of a tax position taken or expected to be taken are recognized in the financial statements when it is more likely than not, based on the technical merits, that the position will be sustained upon examination. Interest and penalties, if any, are included in expenses in the statements of activities. As of December 31, 2015 and 2014, the Institute had no uncertain tax positions that qualify for recognition or disclosure in the financial statements.
Part XI, Line 2d - Other Adjustments	Rental expense included on Part VIII, Line 6b 64,922
Part XI, Line 4b - Other Adjustments	Book to tax difference for UBTI reported on Schedule K-1 72,020
Part XII, Line 2d - Other Adjustments	Rental expense included on Part VIII, Line 6b 64,922

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493214013686

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. 2015

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

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

Open to Public Inspection

	e of the organization				Employer ident	ification number				
	n Institute for the Study of									
	ion and Liberty				38-2926822					
Pa	rt I General Information Complete if the organi				14b.					
1	For grantmakers. Does the	amount of its grants	_							
	and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria									
	used to award the grants or a	assistance?				✓ Yes				
2	For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitori	ng the use of its gran	ts and other				
3	Activites per Region (The follow	ing Part I, line 3	3 table can be d	uplicated if additional sp	ace is needed)					
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region				
(1)	Europe (Including Iceland & Greenland)	1	3	Program Services	Education	167,658				
(2)	South America	0	0	Grants to Recipients		24,276				
(3)	Europe (Including Iceland & Greenland)	0	0	Grants to Recipients		13,476				
(4)	Sub-Saharan Africa	0	0	Grants to Recipients		4,729				
(5)	East Asia and the Pacific	0	0	Grants to Recipients		1,900				
3a	Sub-total	1	3			212,039				
b	Total from continuation sheets to Part I	0	0			0				
C	Totals (add lines 3a and 3b)	1	3			212,039				

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			The Acton Institute has established relationships with several international affiliate organizations that share our mission and seek to promote ideas of the Acton Institute The affiliates are independent organizations that work with Acton to promote the ideas of a free and virtuous society in their own countries and within their own cultural context Acton provides these affiliates with small grants for conferences, publications, website maintenance, translation, and other activities		Electronic transfer			
(2)								
(3)								
(4)								

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

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
(1) Education and travel assistance	South America	4	1,276						
(2) Education and travel assistance	Europe (Including Iceland & Greenland)	17	13,476						
(3) Education and travel assistance	Sub-Saharan Africa	4	4,729	Wire					
(4) Education and travel assistance	East Asia and the Pacific	3	1,900	Wire					
(5)									
(6)									
(7)									
(8)									
(9)									
(10)		†							
(11)		1							
(12)									
(13)									
(14)	+	+			†				
(15)	+	+							
(16)		+							
(17)	+	+ +			+				
(18)		+							

Part IV Foreign Forms

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

Schedule F (Form 990) 2015

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

Part V

Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I, Line 2	Grant recipients are required to submit a written report detailing how the grant funds wer e used. The reports are reviewed by Acton staff to verify proper use. Some grants relate to Acton sponsored events and can be verified internally. Grant funds may be revoked for use outside of grant purpose.

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I, line 3	Expenditures are accounted for using the accrual method of accounting

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DLN: 93493214013686

Employer identification number

OMB No 1545-0047

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SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Supplemental Information Regarding

Attach to Form 990 or Form 990-EZ.

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

Acton Institute for the Study of Religion and Liberty 38-2926822 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants **a** ☐ Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iv) Gross receipts (v) A mount paid to (vi) A mount paid to (iii) Did ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No 1 10 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 o
fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross
receipts greater than \$5,000

	receipts greater than \$5,000).			
		(a)Event #1 Annual Dinner	(b) Event #2	(c)O ther events	(d) Total events (add col (a) through
		(event type)	(event type)	(total number)	col (c))
Revenue		222.270			222.270
æ	1 Gross receipts	233,370			233,370
	2 Less Contributions	192,220			192,220
	line 2)	41,150			41,150
	4 Cash prizes	2,500			2,500
	5 Noncash prizes				
မှာ	6 Rent/facility costs	50,376			50,376
Expenses	7 Food and beverages	107,166			107,166
ă ă	8 Entertainment	6,433			6,433
Direct	9 Other direct expenses	55,461			55,461
출	10 Direct expense summary Add lines	4 through 9 ın column (d)		221,936
	11 Net income summary Subtract line :	LO from line 3, column (d)		-180,786
Par	t III Gaming. Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on F	Form 990, Part IV, line	19, or reported mo	re than \$15,000 on
Revenue		(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c)O ther gaming	(d) Total gaming (add col (a) through col (c))
æ	1 Gross revenue				
<u>پ</u>	2. Cook progress				
Sus	2 Cash prizes				
Expense	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteerlabor	┌ Yes <u>%</u> ┌ No	✓ Yes	Yes <u>%</u> No	
	7 Direct expense summary Add lines	2 through 5 in column (d)		
	8 Net gaming income summary Subtra	act line 7 from line 1, col	umn (d)	<u></u> •	
9	Enter the state(s) in which the organiza				□ Yes □ No
a					·
b	If "No," explain				
10a	Were any of the organization's gaming l	icenses revoked, suspe	nded or terminated during	the tax year?	│Yes │No
b	If "Yes," explain				

Schedule	G (Form	990	or 990-EZ)	201

Page	3
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L1	Does the organization conduct gaming	activities with nonmember	ers?	Yes N	0
12	Is the organization a grantor, beneficia	ry or trustee of a trust or	a member of a partnership or other entit	ty	
	formed to administer charitable gaming	g?		┌Yes ┌N	0
13	Indicate the percentage of gaming acti	ıvıty conducted ın			
а	The organization's facility			13a	%
b	An outside facility			13b	%
L4	Enter the name and address of the pers	son who prepares the orga	anızatıon's gamıng/specıal events books	s and records	
	Name 🟲				
	Address ►				
.5a	Does the organization have a contract				
	revenue?			┌Yes ┌N	0
b	If "Yes," enter the amount of gaming re	evenue received by the or	ganızatıon 🟲 \$ a	and the	
	amount of gaming revenue retained by	the third party 🟲 \$			
c	If "Yes," enter name and address of th	e thırd party			
	Name 🟲				
	Address ►				
L 6	Gaming manager information				
	Name 🕨				
	Gaming manager compensation * \$				
	Description of services provided				
	Director/officer	Employee	☐ Independent contractor		
.7	Mandatory distributions				
а	Is the organization required under stat	e law to make charitable o	distributions from the gaming proceeds t	to	
	retain the state gaming license?			ΓYes ΓΝ	0
b	Enter the amount of distributions requi	red under state law distril	buted to other exempt organizations or s	spent	
	in the organization's own exempt activ				
Pai	rt IV Supplemental Information	on. Provide the explar 5b, 15c, 16, and 17b, a	nations required by Part I, line 2b, one applicable. Also complete this pa); and
	Return Reference		Explanation		
		•			

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Schedule I

(Form 990)

Department of the

Internal Revenue Service Name of the organization

Treasury

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

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

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

OMB No 1545-0047

DLN: 93493214013686

Open to Public Inspection

Employer identification number

Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	✓ Yes N
the selection criteria used to award the grants or assistance?	✓ Yes N
	Part IV, line 21, for any recipient
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, that received more than \$5,000 Part II can be duplicated if additional space is needed	
	(h) Purpose of grant or assistance
(1) Walsh University 34-0868798 501(c)(3) 9,000 2020 E Maple Street North Canton, OH 44720	O rganization support
(2) Asbury University 61-0458355 501(c)(3) 6,200 1 Macklem Dr Lexington, KY 40390	O rganization support
(3) The Kings College 13-1810448 501(c)(3) 17,000 56 Broadway New York, NY 10004	O rganization support
(4) A quinas College 38-1367080 501(c)(3) 10,000 1607 Robinson Rd Grand Rapids, MI 49506	O rganization support
(5) 95-1890710 501(c)(3) 10,000 California Baptist University 1473 Crystal Ct San Marcos, CA 02078	O rganization support
Jacksonville State (6) UniversityJSU Foundation 700 Pelham Road N Jacksonville, AL 36265	O rganization support
2 Enter total number of section 501 (c)(3) and government organizations listed in the line 1 table	. ▶ 6

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

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

(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
2	12,500			
352	37,175			
30	11,405			
	recipients 2	recipients cash grant 2 12,500 352 37,175	recipients cash grant non-cash assistance 2 12,500 352 37,175	recipients cash grant non-cash assistance FMV, appraisal, other) 2 12,500 352 37,175

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
,	Grant recipients are required to submit a written report detailing how the grant funds were used. The reports are reviewed by Acton staff to verify proper use. Some grants relate to Acton sponsored events and can be verified internally. Grant funds may be revoked for use outside of grant purpose.

Schedule I (Form 990) 2015

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DLN: 93493214013686

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Religion and Liberty

Compensation Information

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

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

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

2015

Open to Public Inspection

Internal Revenue Service Name of the organization Acton Institute for the Study of

Employer identification number

38-2926822

Pa	rt I	Questions Regarding Compensation	n				
						Yes	No
1a				ny of the following to or for a person listed on Form ride any relevant information regarding these items			
		First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Γ-	Travel for companions	Г	Payments for business use of personal residence			
	Γ-	Tax idemnification and gross-up payments	<u> - </u>	Health or social club dues or initiation fees			
		Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b		y of the boxes in line 1a are checked, did the or bursement or provision of all of the expenses de	_	ion follow a written policy regarding payment or l above? If "No," complete Part III to explain	1b	Yes	
2		he organization require substantiation prior to r		sing or allowing expenses incurred by all prector, regarding the items checked in line 1a?		,,	
	unec	tors, trustees, officers, filefulling the CLO/Exec	cutive D	meetor, regarding the items checked in line 1a.	2	Yes	
3	orgar	ate which, if any, of the following the filing organization's CEO/Executive Director Check all the by a related organization to establish compens	nat apply				
	▽ (Compensation committee	Г	Written employment contract			
		Independent compensation consultant	I→	Compensation survey or study			
	▽ 1	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4		ng the year, did any person listed on Form 990, related organization	Part VI	I, Section A, line $1a$ with respect to the filing organization			
а	Rece	eive a severance payment or change-of-control	paymen	it?	4a		No
b	Parti	cipate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		No
c	Parti	cipate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		No
	If "Y	es" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	Only	501(c)(3), 501(c)(4), and 501(c)(29) organization	tions mu	ust complete lines 5-9.			
5		ersons listed on Form 990, Part VII, Section A pensation contingent on the revenues of	, line 1a	a, did the organization pay or accrue any			
а	The	organization?			5a		No
b	Any	related organization?			5b		No
	If"Y	es," on line 5a or 5b, describe in Part III					
6		ersons listed on Form 990, Part VII, Section A pensation contingent on the net earnings of	, line 1a	a, did the organization pay or accrue any			
а	The	organization?			6a		No
b	Any	related organization?			6b		Νo
	If"Y	es," on line 6a or 6b, describe in Part III					
7		ersons listed on Form 990, Part VII, Section A nents not described in lines 5 and 6? If "Yes," o			7		No
8	subje	any amounts reported on Form 990, Part VII, ect to the initial contract exception described in rt III		accured pursuant to a contract that was stions section 53 4958-4(a)(3)? If "Yes," describe	8		No
9		es" on line 8, did the organization also follow th	e rebutt	able presumption procedure described in Regulations	٦		140

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable benefits (E) Total of columns (B)(ı)-(D)	(E) Total of columns	
		Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation		column(B) reported as deferred on prior Form 990	
1 Rev Robert A Sırıco President	(i)	221,563	10,000	4,856	4,000	1,298	241,717	0
	(ii)	0	0	0	0	0	0	0
2 Kris Mauren Executive Director	(i)	216,546	9,000	9,170	4,000	22,548	261,264	0
	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2015

Part III Supplemental Information

rovide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation				
	Kris Mauren utilizes the organization's membership with University Club for bona-fide business purposes to conduct offsite meetings with staff and donors. It is policy to have him reimburse the organization for any personal charges that are not considered bona-fide business expenses.				

Schedule J (Form 990) 2015

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DLN: 93493214013686

2015

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number Acton Institute for the Study of Religion and Liberty

					38-2926822			
Pa	art I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contrib	etermın	_	ts
1	Art—Works of art							
2	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications	Х		2,010	Fair market value			
5	Clothing and household							
6	goods					-		
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	Х	11	78 355	Fair market value			
	Securities—Closely held stock .			, 0,333	Tan market varae			
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	Other ► ()							
	Other ► ()							
	Other ► ()							
	Other ► ()				<u> </u>			
29	Number of Forms 8283 received for which the organization comple				29		V 1	- N-
30=	During the year, did the organize	ition receiv	e by contribution any prope	rty reported in Part I lines	1 through 28 that		Yes	No
	it must hold for at least three ye				red to be used			
	for exempt purposes for the enti					30a		Νo
Ŀ	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif	t acceptano	ce policy that requires the i	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?		ies or related organizations	to solicit, process, or sell i	noncash • • •	32a		No
Ŀ	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	an amount	: in column (c) for a type of	property for which column (a) is checked,			

		,
Part II	Supplem	nental Infor

Supplemental Information.Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
Part I, Column (b)	The number of contributors represents the number of contributions received

Schedule M (Form 990) (2015)

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DLN: 93493214013686

OMB No 1545-0047

Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ) Department of the Treasury

Internal Revenue Service

SCHEDULE O

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

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

Open to Pu<u>blic</u> Inspection

Name of the organization
Acton Institute for the Study of
Religion and Liberty

Employer identification number

38-2926822

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	The corporation is organized on a membership basis. There are two classes of members, full members, and associate members. Only full members are entitled to vote. The full members elect one or more members of the governing body, the Board of Directors. The original members were appointed in the founding documents of incorporation. New members may be added by a two-thirds vote of the full members. The Board of Directors, by unanimous action, may terminate the membership of any member who fails to comply with the bylaws or regulations.
Form 990, Part VI, Section A, line 7a	Members have the ability to elect or appoint one or more members of the organization's gov erning body, the Board of Directors. The by-laws grant members the power to fill vacancies or remove existing directors by a majority vote.
Form 990, Part VI, Section B, line 11	The Form 990 is prepared by an independent CPA firm it is reviewed by the Director of Fin ance. A draft copy of the Form 990 is electronically provided to the members of the Board of Directors for review prior to filing. In addition, a copy of the Form 990 draft will be available in a secured part of the website.
Form 990, Part VI, Section B, line 12c	Officers and board members sign annual conflict of interest statements which are reviewed by in-house counsel. Should any potential conflicts of interest be disclosed, the board me mber or officer would be asked to refrain from participation in any decision with regard to matters affected by the relationship
Form 990, Part VI, Section B, line 15	The Board investigates and determines the compensation package for the President and Execu tive Director. The Executive Director and Human Resources determine the compensation for a li other officers. The process includes comparison to similar organizations and salary sur veys as well as analysis of responsibilities and performance. The approval process is documented in the minutes.
Form 990, Part VI, Section C, line 19	The organization's governing documents, conflict of interest policy, and financial statements are made available upon request
Form 990, Part IX, line 11g	Payroll services Program service expenses 8,910 Management and general expenses 0 Fundr aising expenses 0 Total expenses 8,910 Contracted services Program service expenses 1,9 71,849 Management and general expenses 17,780 Fundraising expenses 31,292 Total expense s 2,020,921 Honorariums Program service expenses 303,362 Management and general expense o Total expenses 303,362
Form 990, Part XI, line 9	Book to tax difference for UBTI reported on Schedule K-1 -72,020
Form 990, Part XII, Line 2c	The organization's Board assumes responsibility for oversight of the audit of its financia I statements and selection of its independent accountant. This process has not changed sin ce the prior year.