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DLN: 93493273001366

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

			I					Inspection
A F	or th	e 2015 ca	lendar year, or tax year beginnin	ng 01-01-2015 , and ending 12-3	1-2015			
		applicable	C Name of organization Alliance for Strong Families and			D Emple	yer ident	ification number
_		change	Communities Inc			39-1	709925	
∏ Nai —		-	Doing business as					
Init		turn	Number and street (or P.O. boy if m	all is not delivered to street address) Roc	m/suite	E Teleph	one numbe	er
Fin ret		erminated	648 Plankinton Avenue No 425	iali is not delivered to street address) Roc	only suite	(414	359-10	40
┌ Am	ende	d return	City or town, state or province, cour	ntry, and ZIP or foreign postal code				
	olicatio	on pending	Milwaukee, WI 53203			G Gross	receipts \$ 8	3,903,734
			F Name and address of prir	ncipal officer	H(a)	Is this a group	return f	or.
			Susan N Dreyfus			subordinates?		Yes √ No
			648 Plankınton Avenue No 4 Mılwaukee, WI 53203	125		Are all subord	ınates	□Yes □No
						included? If "No," attacl	nalıst (s	see instructions)
I Ta	x-exe	empt status	▽ 501(c)(3) □ 501(c)() ◄ (nsert no) 4947(a)(1) or 527		Group exemp	•	·
j W	ebsit	te:► ww	w allıance1 org					
K Forr	n of c	organization	Corporation Trust Associatio	n	L Yea	r of formation 1	992 M S	tate of legal domicile DE
	rt I		mary		<u> </u>			<u> </u>
	1	Briefly de:	scribe the organization's mission	or most significant activities				
		SEE SCH	EDULE O					_
Governance	-							
喜								
ē. Şe	2	Check th	nis box 🔰 if the organization dis	continued its operations or dispos	sed of more th	nan 25% of its	net asse	ets
	3	Number	of voting members of the governi	ng body (Part VI, line 1a)			з	12
20 60 70	l			of the governing body (Part VI, line			4	11
Ě	l		·	alendar year 2015 (Part V, line 2	-		5	0
Activities &	6	Total nui	mber of volunteers (estimate if n	ecessary)			6	12
•	7a	Total uni	related business revenue from Pa	art VIII, column (C), line 12 .			7a	1,343,159
	ь	Net unrela	ated business taxable income fro	m Form 990-T, line 34			7b	-440,854
						Prior Year		Current Year
a)	8		ibutions and grants (Part VIII, li	·		6,366		4,420,754
Revenue	9	_	·	ne 2g)		1,147		1,195,014
Ψć	10		•	n (A), lines 3, 4, and 7d) . . lines 5, 6d, 8c, 9c, 10c, and 11e)		1,631	196	-411,166 1,524,482
	12		, , , , , , , , , , , , , , , , , , , ,	(must equal Part VIII, column (A				
		12)		(,,	9,203	953	6,729,084
	13			IX, column (A), lines 1-3)		496	254	1,043,760
	14			X, column (A), line 4)			0	0
88	15	Saları 5–10		ee benefits (Part IX, column (A), li	nes	4,638	844	5,126,276
Expenses	16a			column (A), line 11e)			0	0
홄	ь	Total fu	undraising expenses (Part IX, column (D), line 25) ► ^{390,399}				
ш	17			lines 11a-11d, 11f-24e)		2,679	628	2,912,306
	18			st equal Part IX, column (A), line 2		7,814	726	9,082,342
	19	Rever	nue less expenses Subtract line	18 from line 12		1,389	227	-2,353,258
Not Assets or Fund Balances					Begin	ning of Current	Year	End of Year
SS et	20	Total	assets (Part X, line 16)			7,950	040	6,078,648
# P P P P P P P P P P P P P P P P P P P	21		liabilities (Part X, line 26)	1,491		1,689,957		
	22			line 21 from line 20		6,458	723	4,388,691
			nature Block					
my k	nowle		belief, it is true, correct, and con	amined this return, including accor aplete Declaration of preparer (oth				
		****				2016-09-26		
Sign		Sign	ature of officer			Date		
Here	Kristi Scharl CFO							
		. IVD€						
			e or print name and title	Preparer's signature	Date	Charle C.	PTIN	
—— Pair	1			Preparer's signature Troy Marine CPA	Date 2016-09-26	Check If self-employed	PTIN P001878	63
Paid Pre			e or print name and title Print/Type preparer's name	Troy Marine CPA			P001878	

Use Only

Firm's address ► 777 E Wisconsin Avenue 32nd Floor

Milwaukee, WI 53202
May the IRS discuss this return with the preparer shown above? (see instructions)

Phone no (414) 777-5500

. ▼Yes □No

Fori	m s	990	(2	01	5)	
			•	_		

Page 2

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Par	t IIII Stateme	nt of Program Servi	ice Accomp	lishments		
	Check if Sc	hedule O contains a resp	onse or note t	to any line in this Part I	II	
1	Briefly describe tl	ne organization's mission				
of hi		human-serving organizat			then the capacities and influer our vision of a healthy societ	
2	Did the organization the prior Form 990		ant program s	ervices during the year	which were not listed on	ΓYes Γ⁄No
	If "Yes," describe	these new services on S	chedule O			
3	services?	on cease conducting, or r		nt changes in how it co	nducts, any program	⊤Yes ▼No
	If "Yes," describe	these changes on Sched	ule O			
4	expenses Section	·) organization	s are required to report	ree largest program services, the amount of grants and allo	•
4a	(Code) (Expenses \$	4,941,480	ıncludıng grants of \$	1,043,760) (Revenue \$	1,321,554)
	STATES AND CANADA	A ALLIANCE MEMBERS SERVE A	APPROXIMATELY 4	I 6 MILLION INDIVIDUALS EA	O COMMUNITY SERVICE ORGANIZATI CH YEAR IN 2,200 LOCATIONS, PRO' ABLE TOOLS AND TECHNIQUES TO TH	VIDING A VAST ARRAY OF
						,
4b	(Code) (Expenses \$	423,544	including grants of \$) (Revenue \$)
	National advocacy et	fort representing the policy into	erests of all mem	bers to federal and state leg	gislatures, the administration, and ot	her organizations
4c	(Code) (Expenses \$	274,746	ıncludıng grants of \$) (Revenue \$)
	FAMILY ISSUES PUB		"THE ALLIANCE	FOR STRONG FAMILIES AND	THE FIELDS OF EDUCATION AND CON COMMUNITIES MAGAZINE" INFORM:	
	Other preserves	anucae (Dacamba in Caba	adula O \			
4 u	(Expenses \$	ervices (Describe in Sche incl	uding grants o	of\$) (Revenue \$)

5,639,770

Total program service expenses ▶

	1990 (2015)			Page
Par	t IV Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 📆	1	Yes	IAO
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 \Box	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	Yes	
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? <i>If "Yes," complete Schedule D, Part V</i> 💆	10	Yes	
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	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional "	12b	Yes	
	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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		No
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? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? 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? <i>If "Yes," complete Schedule G, Part II</i>	18		No
	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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
	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? If "Yes," complete Schedule L, Part III	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)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28b		No
c	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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes Is Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable Discrete the number of Forms W-2G included in line 1a Enter -0 - if not applicable Discrete the number of Forms W-2G included in line 1a Enter -0 - if not applicable Discrete the number of Forms W-2G included in line 1a Enter -0 - if not applicable Discrete the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, file for the calendar year ending with or within the year covered by this return Discrete the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, file for the calendar year ending with or within the year covered by this return Discrete the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, file for the calendar year ending with or more during the year? Note-If the sum of lines 1a and 2 as is greater than 1260, you may be required to e-file (see instructions) Diff a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note-If the sum of lines 1a and 2 as is greater than 1260, you may be required to e-file (see instructions) Diff a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note-If the sum of lines 1a and 2 as is greater than 1260, you may be required to e-file (see instructions) The sum of the sum of the fereign country for this year? If "No' to line 3b, provide an explanation in Schedule O. Diff Yes," has it filed a Form 990-T for this year? If "No' to line 3b, provide an explanation in Schedule O. Diff Yes," enter the name of the foreign country Sae instructions for filing requirements for Finc EN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Diff any tax statement than 1 as a party to a prohibited tax shelter transaction? Diff Yes, to line 5a or 5b, di	
a Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable be not rether the number of Forms W-2 G included in line 1 a Enter -0 - if not applicable 1 b 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	. 「
b Enter the number of Forms W-2G included in line 1a. Enter -0 - if not applicable C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winners? 2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return D If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a. Yes 1 If "Yes," has it filed a Form 990-T for this year?!! "We' to line 3b, provide an explanation in Schedule 0. 3b. Yes 4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR) 5a. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b. Did any taxable party notify the organization file Form 8886-T? 5c. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5c. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c. 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? 6c. Did the organization se	No
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaining (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Notes! If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c Did any taxable party notify the organization and the very solicitation an express statement that such contributions or gifts were not tax deductible? 5c 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? 5d 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? 5d Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 5d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization received a contribution of qualified intellectual property, did the organiz	
agaming (gambling) winnings to prize winners? 2	
The three number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2 a is greater than 250, you may be required to e-file (see instructions) Job If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2 a is greater than 250, you may be required to e-file (see instructions) Job If "Yes," has it filed a Form 990-T for this year?If 'No" to line 3b, provide an explanation in Schedule O. At any time during the calendar year, did the organization have an interest in, or a signature or other authonity over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts) If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) If "Yes," did the organization a party to a prohibited tax shelter transaction at any time during the tax year? Sa If "Yes," do line organization and party to a prohibited tax shelter transaction? Sc If "Yes," do the organization and party to a prohibited tax shelter transaction? Sc If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). If "Yes," did the organization in the very solicitat	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b Yes b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country \$ee instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c If "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 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," indicate the number of Forms 8282 filed during the year 7b If the organization for eceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c If Did the organization notify the donor of the value of the goods or services provided? 7c If the organization received a contribution of qualified intellectual property, did th	
Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b Yes 4c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial accounts of filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5b If "Yes," enter the name of the foreign country Scholar than the foreign country over, a financial Accounts of FBAR) 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c If "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 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 partly as a contribution and partly for goods and services provided to the payor? 7b If "Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$8287 s. 6c If "Yes," indicate the number of Forms \$282 filed during the year. 7d If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account; over, a financial account in a foreign country —	
At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?) b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c c Joes 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? 5c Joes If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 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? 5 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 D If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? 6 Jif "Yes," indicate the number of Forms 8282 filed during the year 7 Jif If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Jif If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 Jif the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required? 7 Jif the organization received a contribution of cars, boats	
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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 8282?	No
file Form 8282?	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	No
Form 1098-C?	
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 b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter	
10 Section 501(c)(7) organizations. Enter	
a Initiation fees and capital contributions included on Part VIII, line 12 10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	
11 Section 501(c)(12) organizations. Enter	
a Gross income from members or shareholders	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a	
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	
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a	No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b Form 990	(2257

Part VI	Governance.	Management.	and Disclosure

Se	ection A. Governing Body and Management			-7
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 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 business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		N o
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Νο
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
		\longrightarrow	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
L4	Did the organization have a written document retention and destruction policy?	14	Yes	
L 5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νo
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
_		16b		
	Let the States with which a conventible Form 000 is required to be filed.			
L 7	List the States with which a copy of this Form 990 is required to be filed. WI			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			

State the name, address, and telephone number of the person who possesses the organization's books and records The Organization 648 Plankinton Avenue No 425 Milwaukee, WI 53203 (414) 359-1040

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below	more pers and	than on is a dir	one bot ecto	not box h ar or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	dotted line)	Individual trustae or director	Institutional Trustee		employee	Highest compensated employee	-T			
(1) Dennis M Richardson Chair of the Board	0 50	х		х				0	0	0
(2) Father Steven Boes MS Board Member	0 50	х						0	0	0
(3) Richard J Cohen Ph D Board Member	0 50	х						0	0	0
(4) Jeremy Kohomban PhD Board Member	0 50	х						0	0	0
(5) Patti J Lyons Board Member	0 50	х						0	0	0
(6) Milton J Little Jr Board Member	0 50	х						0	0	0
(7) Donald W Layden Jr Board Member	0 50	х						0	0	0
(8) Mary Hollie Vice Chair and Secretary	0 50	х		х				0	0	0
(9) Molly Greenman Board Member	0 50	х						0	0	0
(10) Ron Manderschied Treasurer	0 50	х		х				0	0	0
(11) Stephen C Mack Ex-Officio Board Member	0 50	х						0	0	0
(12) Tracy Wareing Evans Board Member	0 50	х						0	0	0
(13) John Schmidt Chief Operating Officer	22 00			х				110,267	90,219	9,497
(14) Katherine Astrich Former Senior Vice President, Public Policy	40 00			х				112,658	0	4,024

(A) Name and Tıtle	(B) A verage hours per week (list any hours	rage Position (do not check Reportable Reporta- sper more than one box, unless compensation compens (list person is both an officer from the from rel								on d is	(F) Estimated amount of othe compensation from 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)	-	organiz and re organiz	lated
(15) Polina Makievsky Sr VP Knowledge, Mgmt & Innovation	40 00			x				150,75	ı	0		29,507
(16) Susan Dreyfus Chief Executive Officer	32 00 8 00			х				212,496	53,	124		11,468
(17) Doug Diefenbach Former Senior VP Marketing and Philanthropy	40 00			х				198,858	3	0		29,486
(18) UNDRAYE HOWARD Vice President, Intellectual Capital	40 00			х				118,196	5	0		6,557
(19) KRISTI SCHARL CHEIF FINANCIAL OFFICER	32 00 8 00			х				86,54	21,	635		24,480
(20) Marlo Nash Senior Vice President, Public Policy	40 00			х				84,240)	0		3,780
1b Sub-Total					* *			1,074,007	164,978		1	18,799
Total number of individuals (including b \$100,000 of reportable compensation	ut not limited to	those	liste		oove	e) who	rec	eived more than				
3 Did the organization list any former offi							_		ed employee		Yes	No
on line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is the organization and related organizations of the schedule J	ne sum of report	able c	ompe	ensa	tıon		thei		om the	3		No

			165	140
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule I for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νo

Section B. Independent Contractors

 $Complete \ this \ table \ for \ your \ five \ highest \ compensated \ independent \ contractors \ that \ received \ more \ than \ \$100,000 \ of \ solution \ for \ the solution \ for \ for \ the solution \ for \ the so$ compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
SYSLOGIC INC	IT CONSULTING SERVICES	228,230
375 BISHOPS WAY STE 180 BROOKFIELD, WI 53005		
ZG WALKER HOLDINGS LLC	RENT	156,653
TWO WISCONSIN CIRCLE CHEVY CHASE, MD 20815		

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

Part V	4111	Statement o						
		Check if Schedi	ule O contains a respor	ise 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
	12	Federated cam	naigne 1a					512-514
ts is	1a	rederated cam	paigns 1a					
Gifts, Grants ilar Amounts	Ь	Membership du	es 1b	2,966,491				
, G Կա	С	Fundraising eve	ents 1c					
iffs ar/	d	Related organiz	ations 1d					
; m:I	e	Government grants	s (contributions) 1e					
ons Si		All other contribution	ons, gifts, grants, and 1f	1,454,263				
uti 1er		similar amounts no						
Contributions, Giffs, Grants and Other Similar Amounts	g	Noncash contribute 1a-1f \$	ons included in lines					
no	h	Total. Add lines	s 1 a - 1 f		4,420,754			
o O				Business Code				
Пe	2a	Training Income		624100	599,523	599,523		
evel	ь	Program Service Fe	200	624100	595,491	567,681	27,810	
a Ta		- Flogram Service 16		624100	393,491	367,681	27,810	
Program Serwce Revenue	C d			 				
SS	e e			 				
ían		All other presum	am carvico rovervo	 				
ijo l	f	An other progra	am service revenue					
	g	Total. Add lines	s 2a – 2f		1,195,014			
	3		ome (including dividendar amounts)		45,580			45,580
	4		tment of tax-exempt bond					
	5	Royalties						
			(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental						
	_	expenses Rental income						
	C	or (loss)						
	d	Net rental inco	me or (loss)					
	_ _	Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other than inventory	407,146	1,212,525				
	ь	Less cost or	400 443	4.666.074				
		other basis and sales expenses	409,443	1,666,974				
	С	Gain or (loss)	-2,297	-454,449				
	d		s)		-456,746			-456,746
Other Revenue	8a		luding reported on line 1c)					
- e		See Part IV, lin	ie 18 a					
듩	ь	Less direct ex	penses b					
<u> </u>	С		(loss) from fundraising	events				
	9a		rom gaming activities lee 19 a					
	ь	Less direct ex	penses b					
	С		' (loss) from gamıng actı	vities≱-				
	10a	Gross sales of						
		returns and allo	owances . a	237,730				
	ь	less costofa	oods sold b	·				
	C		(loss) from sales of inve	98,233	139,497	139,497		
		Miscellaneous		Business Code				
	11a	Management Fe		900099	959,789		959,789	
	ь	Space Rental		900002	330,069	14,853	315,216	
	С	Other Income		900099	95,127		40,344	54,783
	d	-	ue	+				
	e	Total. Add lines		🕨	4 201 22-			
	12	Total revenue	See Instructions	🕨	1,384,985			
	l			•	6,729,084	1,321,554	1,343,159	-356,383

Form 990 (2015) Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organiza	ations must com	plete column (A)	
	Check if Schedule O contains a response or note to any line in t	nis Part IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,011,760	1,011,760		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	32,000	32,000		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,074,007	684,148	317,131	72,728
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	2,896,180	1,844,881	855,179	196,120
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	148,313	78,078	66,020	4,215
9	Other employee benefits	697,144	367,007	310,325	19,812
10	Payroll taxes	310,632	163,530	138,274	8,828
11	Fees for services (non-employees)				
а	Management				
b	Legal	31,631		31,631	
С	Accounting	28,090		28,090	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	613,180	271,809	341,371	
12	Advertising and promotion				
13	Office expenses	154,681	105,271	45,370	4,040
14	Information technology				
15	Royalties				
16	Occupancy	357,850	183,794	96,110	77,946
17	Travel	393,769	302,853	90,593	323
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	506,159	477,911	28,248	
20	Interest		-		_
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	191,492		191,492	
23	Insurance	33,305		33,305	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Rental and maintenance	220,111	39,570	174,230	6,311
b	Miscellaneous	219,399	68,716	150,607	76
c	NET PERIODIC & SETTLEME	95,223		95,223	
d	ORGANIZATIONAL DUES	57,681	8,442	49,239	
e	All other expenses	9,735		9,735	
25	Total functional expenses. Add lines 1 through 24e	9,082,342	5,639,770	3,052,173	390,399
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any lir	ne in th	ıs Part X 🔒				
						(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing				1,046,286	1	188,920
	2	Savings and temporary cash investments			Ī		2	
	3	Pledges and grants receivable, net			Ī	1,556,495	3	1,338,109
	4	Accounts receivable, net			Ī	541,321	4	409,009
	5	Loans and other receivables from current and former office		rectors, trus	stees,			
		key employees, and highest compensated employees Control Schedule Louisian Compensated employees Control Compensated employees Control Compensated employees E	omplet					
							5	
Assets	6	Loans and other receivables from other disqualified pers section 4958(f)(1)), persons described in section 4958(contributing employers and sponsoring organizations of s voluntary employees' beneficiary organizations (see inst II of Schedule L	c)(3)(E section	3), and 501(c)(9)			6	
Š	_				ŀ		6	
đ.	7	Notes and loans receivable, net			•		7	
	8	Inventories for sale or use			•		8	
	9	Prepaid expenses and deferred charges				53,340	9	142,774
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		430,420			
	ь	Less accumulated depreciation	10b	4,	111,670	1,930,386	10c	1,318,750
	11	Investments—publicly traded securities			. [2,473,668	11	2,112,464
	12	Investments—other securities See Part IV, line 11 .				348,544	12	568,622
	13	Investments—program-related See Part IV, line 11 .					13	
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11					15	
	16	Total assets.Add lines 1 through 15 (must equal line 34)			. [7,950,040	16	6,078,648
	17	Accounts payable and accrued expenses				1,034,216	17	1,075,263
	18	Grants payable			. [18	
	19	Deferred revenue			Ī	322,115	19	532,252
	20	Tax-exempt bond liabilities			Ī		20	
	21	Escrow or custodial account liability Complete Part IV of	of Sche	dule D .	. [21	
Liabilities	22	Loans and other payables to current and former officers, key employees, highest compensated employees, and di			,			
五		persons Complete Part II of Schedule L			. [22	
<u>-</u>	23	Secured mortgages and notes payable to unrelated third	parties		Ī		23	
	24	Unsecured notes and loans payable to unrelated third pa	rties		. [134,986	24	82,442
	25	Other liabilities (including federal income tax, payables tand other liabilities not included on lines 17-24) Complete Part X of Schedule D	o relat	ed third part	ties,			
							25	
	26	Total liabilities. Add lines 17 through 25				1,491,317	26	1,689,957
yn do		Organizations that follow SFAS 117 (ASC 958), check he	re ► 「	and compl	lete			
Ĕ	27	lines 27 through 29, and lines 33 and 34.				3,250,882	27	2,663,170
<u>ದ</u> ದ	27	Unrestricted net assets			ŀ		27	· · · · · · · · · · · · · · · · · · ·
<u> </u>	28	Temporarily restricted net assets			}	3,059,045	28 29	1,573,545 151,976
Ĭ	29	Permanently restricted net assets			.	140,790	29	151,976
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), cl complete lines 30 through 34.		,	a			
2	30	Capital stock or trust principal, or current funds			.		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment	fund		.		31	
í	32	Retained earnings, endowment, accumulated income, or	other fu	ınds]		32	
ž	33	Total net assets or fund balances]	6,458,723	33	4,388,691
_	34	Total liabilities and net assets/fund balances				7,950,040	34	6,078,648

Da	t XI Reconcilliation of Net Assets				uge ==
Par	Check if Schedule O contains a response or note to any line in this Part XI				∀
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,7	729,084
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,0	082,342
3	Revenue less expenses Subtract line 2 from line 1	3		-2,:	353,258
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		6,4	458,723
5	Net unrealized gains (losses) on investments	5			197,224
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			86,002
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		4,3	388,691
Par	t XIII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	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	За		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		

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As Filed Data -

DLN: 93493273001366

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization Alliance for Strong Families and

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

Communities Inc 39-1709925 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) $\overline{\mathbf{v}}$ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement.

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the orga Isted in your docume	nızatıon governıng	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)
			Yes	No		
Total						

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally

(see instructions) You must complete Part IV, Sections A and D, and Part V.

integrated, or Type III non-functionally integrated supporting organization

Provide the following information about the supported organization(s)

Enter the number of supported organizations

Pa	Support Schedule for (Complete only if you Part III. If the organize	checked the bo	x on line 5, 7,	or 8 of Part I o	or if the organiz	ation failed to d	jualify under
Se	ection A. Public Support	•	•		, ,		
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
•	fiscal year beginning in) F Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	(4,72022	(-)	(9,2323	(=,===	(0)2020	(i)
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 ection B. Total Support						
	Calendar year						
(or	fiscal year beginning in)	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 2015	(f) ⊤otal
7	A mounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12	
13	First five years.If the Form 990 is check this box and stop here	<u> </u>	<u> </u>				
14	ection C. Computation of Pul Public support percentage for 2019			11 column (f))		14	
15	Public support percentage for 201			: 11, Column (1))		14	
	33 1/3% support test—2015.If the	-	•	v on line 12 and	lino 14 is 22 1/20	15	this box
	and stop here. The organization qui 33 1/3% support test—2014. If the box and stop here. The organizatio	alıfıes as a publıc organızatıon dıd	ly supported organic not check a box	anızatıon on lıne 13 or 16a			► □
17a	10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me	— 2015. If the organization meets the fa	anization did not o	check a box on lir tances test, chec	ck this box and st	op here. Explain	orted ▶□
b	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza supported organization	nızatıon meets th	e "facts-and-circ	umstances" test	c, check this box a	nd stop here.	
18	Private foundation. If the organizations	ion did not check	a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and see	- '

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support							
/ · £	Calendar year	(a)2011	(b) 2012	(c) 2013	(d) 2014	(e) 20	15	(f) Total
(or r	iscal year beginning in) F Gifts, grants, contributions, and							
•	membership fees received (Do	9,211,398	2 107 202	3,131,384	6,366,403	4	420 754	26,237,321
	not include any "unusual	9,211,390	3,107,382	3,131,364	0,300,403	4,	420,754	20,237,321
	grants ")							
2	Gross receipts from admissions, merchandise sold or services							
	performed, or facilities furnished							
	in any activity that is related to	752,270	826,196	1,079,641	1,147,960	1,	432,744	5,238,811
	the organization's tax-exempt							
	purpose							
3	Gross receipts from activities that are not an unrelated trade or							
	business under section 513							
4	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit							
	to the organization without							
	charge							
6	Total. Add lines 1 through 5	9,963,668	3,933,578	4,211,025	7,514,363	5,	853,498	31,476,132
7a	A mounts included on lines 1, 2,							
	and 3 received from disqualified	6,596,493	307,500	350,000	3,314,007	1,	281,666	11,849,666
h	persons Amounts included on lines 2 and							
	3 received from other than							
	disqualified persons that exceed							0
	the greater of \$5,000 or 1% of							· ·
	the amount on line 13 for the year							
c	Add lines 7a and 7b	6,596,493	307,500	350,000	3,314,007	1,,	281,666	11,849,666
8	Public support. (Subtract line 7c			,	,	,		
	from line 6)							19,626,466
Se	ction B. Total Support							
	Calendar year	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 20	15	(f) ⊤otal
/ C	to an I are a surface attended to the National States							
-	iscal year beginning in)			4 211 025	7 514 363	5	853 498	31 476 132
9	A mounts from line 6	9,963,668	3,933,578	4,211,025	7,514,363	5,	853,498	31,476,132
-				4,211,025	7,514,363	5,	853,498	31,476,132
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents,			4,211,025 50,172	7,514,363 49,834	5,	853,498 45,580	31,476,132 281,688
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	9,963,668	3,933,578		, ,	5,	,	· · · · · ·
[•] 9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,963,668	3,933,578		, ,	5,	,	
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	9,963,668	3,933,578		, ,	5,	,	
[•] 9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,963,668	3,933,578		, ,	5,	,	
[•] 9 10a	A mounts from line 6 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	9,963,668 58,680	3,933,578 77,422	50,172	49,834	5,	45,580	281,688
9 10a b	A mounts from line 6 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	9,963,668	3,933,578		, ,	5,	,	
9 10a b	A mounts from line 6 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 Net income from unrelated	9,963,668 58,680	3,933,578 77,422	50,172	49,834	5,	45,580	281,688
9 10a b	A mounts from line 6 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 Net income from unrelated business activities not included	9,963,668 58,680	3,933,578 77,422	50,172	49,834	5,	45,580	281,688
9 10a b	A mounts from line 6 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 Net income from unrelated	9,963,668 58,680	3,933,578 77,422	50,172	49,834	5,	45,580	281,688
9 10a b	A mounts from line 6 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	9,963,668 58,680	3,933,578 77,422	50,172	49,834	5,	45,580	281,688
9 10a b	A mounts from line 6 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 Net income from unrelated 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	9,963,668 58,680	3,933,578 77,422	50,172	49,834		45,580	281,688
9 10a b	A mounts from line 6 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 Net income from unrelated 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	9,963,668 58,680 58,680	3,933,578 77,422 77,422	50,172	49,834 49,834		45,580	281,688
9 10a b	A mounts from line 6 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 Net income from unrelated 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	9,963,668 58,680 58,680	3,933,578 77,422 77,422	50,172 50,172 1,651,157	49,834 49,834 1,457,996	1,	45,580 45,580 384,985	281,688 281,688 7,702,485
9 10a b c 111	A mounts from line 6 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 Net income from unrelated 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)	9,963,668 58,680 58,680 1,571,741 11,594,089	3,933,578 77,422 77,422 1,636,606 5,647,606	50,172 50,172 1,651,157 5,912,354	49,834 49,834 1,457,996 9,022,193	1,	45,580 45,580 384,985 284,063	281,688 281,688 7,702,485 39,460,305
9 10a b c 111	A mounts from line 6 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 Net income from unrelated 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	9,963,668 58,680 58,680 1,571,741 11,594,089	3,933,578 77,422 77,422 1,636,606 5,647,606	50,172 50,172 1,651,157 5,912,354	49,834 49,834 1,457,996 9,022,193	1,	45,580 45,580 384,985 284,063	281,688 281,688 7,702,485 39,460,305) organization,
9 10a b c 111 12 13 14	A mounts from line 6 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 Net income from unrelated 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 check this box and stop here	9,963,668 58,680 58,680 1,571,741 11,594,089 for the organization	3,933,578 77,422 77,422 1,636,606 5,647,606 on's first, second,	50,172 50,172 1,651,157 5,912,354	49,834 49,834 1,457,996 9,022,193	1,	45,580 45,580 384,985 284,063	281,688 281,688 7,702,485 39,460,305
9 10a b c 111 12 13 14 Se	A mounts from line 6 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 Net income from unrelated 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 check this box and stop here ction C. Computation of Pub	9,963,668 58,680 58,680 1,571,741 11,594,089 for the organization	3,933,578 77,422 77,422 1,636,606 5,647,606 on's first, second,	50,172 50,172 1,651,157 5,912,354 third, fourth, or fi	49,834 49,834 1,457,996 9,022,193	1, 7, section 5	45,580 45,580 384,985 284,063	281,688 281,688 7,702,485 39,460,305) organization,
9 10a b c 111 12 13 14 See 15	A mounts from line 6 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 Net income from unrelated 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 check this box and stop here ction C. Computation of Put	9,963,668 58,680 58,680 1,571,741 11,594,089 for the organization	3,933,578 77,422 77,422 1,636,606 5,647,606 on's first, second, ercentage (f) divided by line	50,172 50,172 1,651,157 5,912,354 third, fourth, or fi	49,834 49,834 1,457,996 9,022,193	1, 7, section 5	45,580 45,580 384,985 284,063	281,688 281,688 7,702,485 39,460,305) organization, 49 740 %
9 10a b c 111 12 13 14 See 15 16	A mounts from line 6 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 Net income from unrelated 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 check this box and stop here ction C. Computation of Put Public support percentage from 20	9,963,668 58,680 1,571,741 11,594,089 for the organization Dlic Support Position (Inc.) (I	3,933,578 77,422 77,422 1,636,606 5,647,606 on's first, second, ercentage (f) divided by line art III, line 15	50,172 50,172 1,651,157 5,912,354 third, fourth, or fi	49,834 49,834 1,457,996 9,022,193	1, 7, section 5	45,580 45,580 384,985 284,063	281,688 281,688 7,702,485 39,460,305) organization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 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 Net income from unrelated 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 check this box and stop here ction C. Computation of Put Public support percentage from 20 ction D. Computation of Inv	9,963,668 58,680 1,571,741 11,594,089 for the organization of the organization of the organization of the second o	3,933,578 77,422 77,422 1,636,606 5,647,606 on's first, second, ercentage (f) divided by line art III, line 15 ome Percentage	50,172 50,172 1,651,157 5,912,354 third, fourth, or fi	49,834 49,834 1,457,996 9,022,193 fth tax year as a	1, 7, section 5	45,580 45,580 384,985 284,063	281,688 281,688 7,702,485 39,460,305) organization, 49 740 % 49 440 %
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 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 Net income from unrelated 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 check this box and stop here ction C. Computation of Put Public support percentage for 201 Public support percentage from 20 ction D. Computation of Inv Investment income percentage for	9,963,668 58,680 1,571,741 11,594,089 for the organization olic Support Position (line 8, column of 14 Schedule A, Position 14 Schedule A, Position 10 C, column of 10 C, co	3,933,578 77,422 77,422 77,422 1,636,606 5,647,606 on's first, second, ercentage (f) divided by line art III, line 15 ome Percentago	50,172 50,172 1,651,157 5,912,354 third, fourth, or fi 13, column (f))	49,834 49,834 1,457,996 9,022,193 fth tax year as a	1, 7, section 5 15 16	45,580 45,580 384,985 284,063	281,688 7,702,485 39,460,305) organization, 49 740 % 49 440 % 0 710 %
9 10a b c 111 12 13 14 See 15 16 See 17 18	A mounts from line 6 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 Net income from unrelated 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 check this box and stop here ction C. Computation of Put Public support percentage from 20 ction D. Computation of Inv	9,963,668 58,680 1,571,741 11,594,089 for the organization Olic Support P (line 8, column 14 Schedule A, P estment Inco 2015 (line 10 c, c m 2014 Schedule	3,933,578 77,422 77,422 1,636,606 5,647,606 on's first, second, ercentage (f) divided by line art III, line 15 me Percentage olumn (f) divided A, Part III, line 1	50,172 50,172 1,651,157 5,912,354 third, fourth, or fill 13, column (f)) Je by line 13, column	49,834 49,834 1,457,996 9,022,193 fth tax year as a	1, 7, section 5 15 16	45,580 45,580 384,985 284,063 01(c)(3	281,688 7,702,485 39,460,305) organization, 49 740 % 49 440 % 0 710 % 0 730 %

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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

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

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

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

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

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			uct ions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
!	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
,	Other expenses (see instructions)	7		
1	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	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	pt purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval re	quired)		
6 Other distributions (describe in Part VI) See instru	uctions		
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to details in Part VI) See instructions	to which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
 Carryover from 2010 not applied (see instructions) 			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (If amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
c Excess from 2013			
d From 2014			
e From 2015			

Part VI Supplemental Information.

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

Facts	And	Circum	stances	Test
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Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2015

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

DLN: 93493273001366

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Alliance for Strong Families and Communities Inc. 39-1709925 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ☐ Yes Was a correction made? If "Yes." describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from filing organization's contributions received funds If none, enter -0and promptly and directly delivered to a separate political organization If none, enter-0-

chedule C (F	Form 990 or 990-EZ) 2015	Page
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (el under section 501(h)).	ection
Check 🕨	F If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, ad expenses, and share of excess lobbying expenditures)	dress, EIN

		ying Expenditures neans amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public lobbying)	opinion (grass roots			
b	Total lobbying expenditures to influence a legis	slative body (direct lobbying)			
С	Total lobbying expenditures (add lines 1a and 3	1b)			
d	Other exempt purpose expenditures		Ī		
e	Total exempt purpose expenditures (add lines	1c and 1d)			
f	Lobbying nontaxable amount Enter the amount	3	.		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
g	Grassroots nontaxable amount (enter 25% of I	ine 1f)	-		
h	Subtract line 1g from line 1a If zero or less, en				
i	Subtract line 1f from line 1c If zero or less, en	ter -0 -			
j	If there is an amount other than zero on either reporting section 4911 tax for this year?	line 1h or line 1ı, dıd the organization file Form	4720		

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

┌ Yes ┌No

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
<u>2a</u>	Lobbying nontaxable amount	522,361	481,239			1,003,600			
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,505,400			
_c	Total lobbying expenditures	22,664	20,740			43,404			
d	Grassroots nontaxable amount	130,590	120,310			250,900			
e 	Grassroots ceiling amount (150% of line 2d, column (e))					376,350			
f	Grassroots lobbying expenditures								

Return Reference

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ОТ				ige S
<i></i>	1	(a)		(b)	
ror e activ	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Tes				
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	01(c)(5), o	r se	ctio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art IV Supplemental Information					

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

DLN: 93493273001366

OMB No 1545-0047

Open to Public

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► 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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Name of the organization **Employer identification number** Alliance for Strong Families and Communities Inc. 39-1709925 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

Par	3 † † †	Organizations Maintaining (continued)	Collections of A	art, His	storical	Tre	asures, or	Oth	er Similar A	ssets	
3		the organization's acquisition, acc	ession, and other rec	ords, cl	heck any o	of the	following that	t are	a sıgnıfıcant us	e of its	
а		ublic exhibition		d	┌ Loa	n or	exchange pro	gram	S		
b	Γs	cholarly research		е	┌ oti	ner					
c	_	reservation for future generations									
4		de a description of the organization'	s collections and exp	olaın ho	w they fur	thert	the organization	on's e	xempt purpose	ın	
5		g the year, did the organization soli							mılar 👝		
Par	asset t IV	s to be sold to raise funds rather th Escrow and Custodial Arra		as part	of the orga	nıza	tion's collection	on?	☐ Yes	No	
r a i		Complete if the organization a Part X, line 21.		Form	990, Par	t IV	, line 9, or re	epor	ted an amour	nt on For	m 990,
1a		e organization an agent, trustee, cus led on Form 990, Part X?	todian or other inter	mediary	y for contr	butio	ons or other as	ssets	not	∏ No	
b	If"	Yes," explain the arrangement in Pa	art XIII and complete	e the fo	llowing tal	ole			Am	ount	
С	Beg	ginning balance					1	.с			
d	Ado	ditions during the year					1	d			
e	Dıs	tributions during the year					1	e			
f	End	ding balance					1	f			
2a	Did th	ne organization include an amount o	n Form 990, Part X, I	lıne 21,	for escro	word	custodial acco	unt l	iability? TYes	┌ No	
.											_
Do	If"Ye rt V	s," explain the arrangement in Part Endowment Funds. Comple									'
Pa	rt V	Endowment Funds. Comple	(a)Current year		or year		Two years back	<u> </u>	Three years back	(e)Four y	ears back
1a	Begin	ining of year balance	196,661	(-)	180,974	- (-	164,027	+ • •	134,095	(=): = =: 7	108,059
b		nbutions	3,180		5,400		3,550		15,284		26,630
c	Net ir losse	nvestment earnings, gains, and s	-2,685		10,287		13,397	,	14,648		-594
d	Grant	s or scholarships									
е	and p	r expenditures for facilities rograms 									
f		nistrative expenses									
g	End o	f year balance	197,156		196,661		180,974		164,027		134,095
_											
2		de the estimated percentage of the	•	ance (lir	ne 1g, colı	ımn ((a)) held as				
a		designated or quasi-endowment	0 %								
b		anent endowment ▶ 100 000 %	2.04								
С	-	orarily restricted endowment Fercentages on lines 2a, 2b, and 2c	0 % should equal 100%								
3a		nere endowment funds not in the pos ization by	ssession of the organ	nızatıon	that are h	eld a	nd administer	ed fo	r the	Yes	No
	_	related organizations							3a	n(i)	No
		lated organizations							За	(ii)	No
b		s" on 3a(II), are the related organiz	•			R?				3b	
4		ribe in Part XIII the intended uses		endowm	nent funds						
Par	t VI	Land, Buildings, and Equip Complete if the organization a		Form 9	990. Part	IV.	lıne 11a.See	For	m 990. Part X	(. line 10	1_
		Description of property			(a) ost or other (investmer	basıs	(b) Cost or other b (other)		Accumulated (c) depreciation		ok value
1a	Land				,	•	 ` ` ` ` 	,000			390,000
Ь	Buildin	gs					2,525	,809	1,781,76	51	744,048
С	Leaseh	nold improvements		. [
d	Equipm	nent					2,514	,611	2,329,90	09	184,702
	Other										
Tota	I. A dd I	ines 1a through 1e (Column (d) mus	t equal Form 990, Pari	t X, colu	ımn (B), lır	e 10	(c).)	•		D (Form 9	1,318,750

Part VII In	nvestments—Other Securities see Form 990, Part X, line 12.	. Complete if the org	anızatıon answered 'Yes	on Form 990, Part IV, line 11b.
	(a) Description of security or cate		(b) Book value	(c)Method of valuation
(1)Financial de	(including name of security) erivatives			Cost or end-of-year market value
	d equity interests			
(3)O ther (A) Investment	t ın FEI		568,622	С
Total (Caluma (h	a) result agual Forms 000. Part V. and (R) line :	12.)	569 622	
Part VIII T	o) must equal Form 990, Part X, col (B) line i nvestments—Program Relate	····	300,022	
С	omplete if the organization answ	vered 'Yes' on Form 9		
	(a) Description of investmen	t	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	p) must equal Form 990, Part X, col (B) line 1. ther Assets. Complete if the organ			1d See Form 990 Part X June 15
		Description	mr om 550,1 are 10,1 me 1	(b) Book value
Total. (Column	(b) must equal Form 990, Part X, col.(B)) line 15.)		
Part X O	ther Liabilities. Complete ıf the			
Se	ee Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ue	
Federal Income	etaxes			
	o) must equal Form 990, Part X, col (B) line 2.	5) -	1	

Par		Revenue per Audited Financial Statements With Revenue nization answered 'Yes' on Form 990, Part IV, line 12a.	per Re	eturn
1		er support per audited financial statements	1	
2	A mounts included on line 1 b	ut not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses)	on investments 2a		
b	Donated services and use of	facilities 2b		
С	Recoveries of prior year gran	ts		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d .		2e	
3	Subtract line 2e from line 1 .		3	
4	Amounts included on Form 9	90, Part VIII, line 12, but not on line 1		
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII) 4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 an	nd 4c. (This must equal Form 990, Part I, line 12)	5	
Pari		xpenses per Audited Financial Statements With Expense nization answered 'Yes' on Form 990, Part IV, line 12a.	s per	Return.
1	Total expenses and losses pe	er audited financial statements	1	
2	A mounts included on line 1 b	ut not on Form 990, Part IX, line 25		
а	Donated services and use of	facilities		
b	Prior year adjustments			
C	Otherlosses	2c		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d .		2e	
3	Subtract line ${f 2e}$ from line ${f 1}$		3	
4	A mounts included on Form 99	90, Part IX, line 25, but not on line 1:		
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 a	and 4c. (This must equal Form 990, Part I, line 18)	5	
	Supplemental In			
Part		r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2 I, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part t		e any additional
	Return Reference	Explanation		
Part \	/, Line 4	Intended use of the endowment is to create a long-term, consistent, and funding for the Alliance	d reliable	source of operational
		I		

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493273001366

OMB No 1545-0047

2015

Department of the Treasury Internal Revenue Service

Name of the organization Alliance for Strong Families and

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.

► Attach to Form 990.

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

Open to Public **Inspection**

Employer identification number

Com	munities Inc				39-1709925				
Pa	rt I General Information Complete if the organ				14b.				
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.								
3	Activites per Region (The follow	ung Part I, line 3	B table can be du	uplicated if additional spa	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)			g.c	region,					
(2)									
(3)									
(4)									
(5)									
	Sub-total Total from continuation sheets to Part I	0	0						
c	: Totals (add lines 3a and 3b)	0	0						
For P	aperwork Reduction Act Notice, see	the Instructions	for Form 990.	Cat	No 50082W Schedu	ıle F (Form 990) 2015			

Part II	Grants and Other	Assistance to	Organizations o	or Entities	Outside the	United States.
---------	-------------------------	---------------	-----------------	-------------	-------------	----------------

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

(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)
	section	section and EIN (if	section grant and EIN (if	section grant cash grant and EIN (if	section grant cash grant cash disbursement	section grant cash grant cash of non-cash and EIN (if disbursement assistance	section grant cash grant cash of non-cash of non-cash and EIN (if disbursement assistance assistance

2 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

6

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

Part III can be	<u>duplicated if addit</u>	tional space is ne	eded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)					,		
(2)		+ + +			1		<u>'</u>
(3)		1	·		'		1
(4)		+ +	·		†		
(5)		+ +	 I		†		
(6)		+ +	 I		†		
(7)		+ + +			†		<u> </u>
(8)		+			†		<u> </u>
(9)		+ +					<u> </u>
(10)		+	·		<u> </u>		<u> </u>
(11)		+			1		<u> </u>
(12)		+ +					<u> </u>
(13)		+	·		<u>'</u>		<u> </u>
(14)		+ + +			1		
(15)		+ + +			1		
(16)		1			1		
(17)					1		
(18)					1		
							

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	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	ᅜ	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	দ	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	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	٦	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	All applications received are reviewed to ensure that requesting organization is a registe red charitable organization in its country. After the organization has completed the services the funds were intended to cover, the organization is required to submit a report to the Alliance that confirms that the funds were used for the purpose outlined in the original application.

Additional Data

Software ID: Software Version:

EIN: 39-1709925

Name: Alliance for Strong Families and

Communities Inc

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
		Iceland & Greenland)	Grant in support of Aramark Building Community initiative	2,500	check			
		•	Grant in support of Aramark Building Community initiative	20,500	check			
		Pacıfıc - Australıa,	Grant in support of Aramark Building Community initiative	1,500	check			
		•	Grant in support of Aramark Building Community initiative	1,000	check			

, Form 990 Schedu	le F Part II	- Grants or Entitie	es Outside The Un	ited States	_			· .
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraisal, other)
			Grant in support of Aramark Building Community initiative	5,000	check			
		Pacıfic - Australia, Brunei, Burma, Cambodia,	GRANT IN SUPPORT OF ARAMARK BUILDING COMMUNITY INITIATIVE	1,500	Check			

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

DLN: 93493273001366

Open to Public

OMB No 1545-0047

Employer identification number

Department of the Treasury

Internal Revenue Service Name of the organization

(Form 990)

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.

Inspection

						1 ' '	
Alliance for Strong Families and Communities Inc						39-1709925	
Part I General Information	on Grants and	d Assistance				L	
 Does the organization maintain rethe selection criteria used to awa Describe in Part IV the organizat 	ard the grants or as	sıstance?				ance, and	✓ Yes
Part II Grants and Other Assistar that received more than \$				plete if the organization	answered "Yes" on Fo	rm 990, Part IV, line 21	l, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
2 Enter total number of section 50	I 1(c)(3) and govern	l ment organizations lis	I sted in the line 1 table .				<u>1</u> 86
3 Enter total number of other organ		_					

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

(a)Type of grant or assistance	te (b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance			
Part IV Supplemental In	nformation. Provide the info	ormation required in P	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.			
Return Reference	Explanation							
 	SELECTION PROCESS - TO IDENTIFY WHICH AGENCIES WILL BE AWARDED FUNDS, THE ALLIANCE SENDS OUT A CALL FOR REVIEWERS ALL PROPOSALS ARE REVIEWED THROUGH A BLIND PANEL REVIEW, MADE UP OF STAFF FROM ALLIANCE MEMBER AGENCIES, THE GRANT ADVISORY COMMITTEES, AND LOCAL AND NATIONAL PARTNERS ORGANIZATIONS THAT APPLY FOR A GRANT ARE NOT ELIGIBLE TO BE A							

TOWARD THEIR STATED GOALS, ALONG WITH FINANCIAL REPORTS SHOWING BUDGET AND ACTUAL RESULTS

REVIEWER DURING THE PARTICULAR RFP PROCESS IN WHICH THEY SUBMITTED AN APPLICATION GRANTEE AGENCY MONITORING PROCESS - WITHIN EACH PROPOSAL, APPLICANTS ARE REQUIRED TO PROVIDE INFORMATION ABOUT EXPECTED IMPACT AND LIST EXPECTED SHORT - AND LONG-TERM GOALS THE ALLIANCE RECEIVES PERIODIC REPORTS ON THE PROGRESS OF EACH GRANTEE

Additional Data

Software ID:

Software Version:

EIN: 39-1709925

Name: Alliance for Strong Families and

Communities Inc

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Atlanta Mission 2353 Bolton Road Atlanta,GA 303181230	58-0572430	501c3	3,262				Grant in support of Aramark Building Community initiative
Bay Area Homeless Services Inc 3406 Wisconsin Street Baytown,TX 775205951	76-0034478	501c3	2,500				Grant in support of Aramark Building Community initiative
Board of Child Care 3300 Gaither Road Baltimore, MD 212442999	52-0591554	501c3	1,500				Grant in support of Child Welfare Research program

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Boys & Girls Club of Dane County 1818 W Beltline Highway Madison, WI 537132334	39-1925617	501c3	3,500				Grant in support of Aramark Building Community initiative			
Boys & Girls Club of the Cedar Valley 515 Lime Street Waterloo,IA 507033804	42-6083723	501c3	2,500				Grant in support of Aramark Building Community initiative			
Branches 11500 NW 12 Ave Mıamı,FL 331686217	65-0716969	501c3	20,262				Grant in support of Aramark Building Community initiative			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Buckner Children and Family Services Inc 700 N Pearl Street Suite 1200 Dallas,TX 752017405	75-2571395	501c3	6,262				Grant in support of Aramark Building Community initiative			
Casa Central 1343 North California Avenue Chicago, IL 606222803	36-2728618	501c3	4,762				Grant in support of Aramark Building Community initiative			
Child & Family Services of Newport 31 John Clarke Rd Middletown, RI 028425641	23-7058381	501c3	1,500				Grant in support of Child Welfare Research program			

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Child & Family Services of Eastern Virginia Inc 150 Boush Street Suite 800 Norfolk, VA 235101637	54-0674774	501c3	6,000				Grant in support of Aramark Building Community initiative				
Child & Family Services of Eastern Virginia Inc 150 Boush Street Suite 800 Norfolk, VA 235101637	54-0674774	501c3	1,262				Grant in support of Aramark Building Community initiative				
Children and Families First 2005 Baynard Boulevard Wilmington, DE 19802	51-0064308	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Childrens Home Society of Washington P O Box 15190 Seattle, WA 98115	91-0575955	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program			
Children's Hospital of Wisconsin Community Services 620 S 76th St Ste 120 Milwaukee, WI 53214	39-1500075	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program			
Cincinnati Union Bethel 300 Lytle Street Cincinnati, OH 452024212	31-0536655	501c3	1,262				Grant in support of Aramark Building Community initiative			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Community Compassion Network 1400 W Broomfield Street Mount Pleasant, MI 488584581	46-1443205	501c3	1,500				Grant in support of Aramark Building Community initiative			
Community Food & Outreach Center 150 W Michigan St Suite A Orlando,FL 328064463	11-3697936	501c3	1,262				Grant in support of Aramark Building Community initiative			
Community Teamwork Inc 155 Merrimack St Lowell, MA 018521723	04-2382027	501c3	12,000				Grant in support of Aramark Building Community initiative			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Congreso de Latinos Unidos Inc 216 West Somerset Street Philadelphia, PA 191333534	23-2051143	501c3	63,600				Grant in support of Aramark Building Community initiative			
Cornerstones of Care 300 East 36th Street Kansas City, MO 641111410	43-1689138	501c3	15,762				Grant in support of Aramark Building Community initiative			
Dare To Care Food Bank 5803 Fern Valley Rd Louisville, KY 402281051	23-7345952	501c3	1,500				Grant in support of Aramark Building Community initiative			

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance			
DaVinci Center for Community Progress 470 Charles Street Providence, RI 029042237	05-0352730	501c3	2,000				Grant in support of Aramark Building Community initiative			
Devereux Kids Inc 5850 T G LEE BLVD STE 400 Orlando,FL 32822	59-3593023	501c3	1,500				Grant in support of Child Welfare Research program			
Doors 2 Change Inc 1000 American Superior Blvd Winter Haven, FL 338805545	46-0903421	501c3	2,500				Grant in support of Aramark Building Community initiative			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
East Baltimore Development Inc (EBDI) 1731 East Chase St Baltimore, MD 212133133	27-0037508	501c3	1,262				Grant in support of Aramark Building Community initiative			
East End House 105 Spring Street Cambridge, MA 021411726	04-2104163	501c3	6,500				Grant in support of Aramark Building Community initiative			
East End House 105 Spring Street Cambridge,MA 021411726	04-2104163	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program			

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Episcopal Community Services 225 S Third St Philadelphia, PA 191063910	23-1352290	501c3	21,600				Grant in support of Aramark Building Community initiative				
Family Promise of Coastal Alabama PO Box 40881 Mobile, AL 366400881	38-3684968	501c3	2,500				Grant in support of Aramark Building Community initiative				
Family Service Association of San Antonio Inc 702 San Pedro San Antonio, TX 782124610	74-1117341	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Family Service Association of San Antonio Inc 702 San Pedro San Antonio, TX 782124610	74-1117341	501c3	1,262				Grant in support of Aramark Building Community initiative			
Family Service of Greater Boston 31 Heath Street Boston, MA 021301650	04-2160528	501c3	1,262				Grant in support of Aramark Building Community initiative			
Family Service of Rhode Island 55 Hope St PO Box 6688 Providence,RI 02906	05-0258858	501c3	1,500				Grant in support of Child Welfare Research program			

Form 990,Schedule I, Par	t II, Grants and	J Other Assistance	e to Domestic Org	anizations and D	omestic Governmε	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance										
Family Service of Roanoke Valley 360 Campbell Ave Roanoke, VA 240163625	54-0505946	501c3	4,000				Grant in support of Aramark Building Community initiative										
Federation of Neighborhood Centers 1528 Walnut Street Suite 200 Philadelphia, PA 191023602	23-1630073	501c3	52,862				Grant in support of Aramark Building Community initiative										
Friends Association for Children 1004 St John Street Richmond, VA 232202525	54-0505899	501c3	21,762				Grant in support of Aramark Building Community initiative										

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Gladden Community House 183 Hawkes Ave Columbus,OH 432231533	31-4379476	501c3	1,500				Grant in support of Aramark Building Community initiative			
Goodwill of the Great Plains 3100 W 4th Street Sioux City,IA 511033202	42-0727509	501c3	2,500				Grant in support of Aramark Building Community initiative			
Grace Hill Settlement House 2600 Hadley Street Saint Louis, MO 631064021	23-7216273	501c3	4,262				Grant in support of Aramark Building Community initiative			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1 3 5	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Harold Mezile North Community YMCA Youth and Teen Enrichment Center 1711 West Broadway Ave Minneapolis, MN 554112450	45-2563299	501c3	1,500				Grant in support of Aramark Building Community initiative		
Horizons A Family Service Alliance 819 5th St SE Cedar Rapids, IA 524012128	42-1135083	501c3	1,262				Grant in support of Aramark Building Community initiative		
Huntsville Family YMCA 2906 Old Houston Road Huntsville,TX 773406508	74-1109737	501c3	2,500				Grant in support of Aramark Building Community initiative		

Form 990,Schedule I, Par	t II, Grants and	J Other Assistance	e to Domestic Org	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance							
KVC Health Systems 21350 W 153rd Street Olathe,KS 66061	27-1672159	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program							
La Salle School 391 Western Avenue Albany, NY 12203	14-1338536	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program							
Louisville Central Community Centers Inc 1300 West Muhammad Ali Boulevard Louisville, KY 402031744	61-0590743	501c3	1,262				Grant in support of Aramark Building Community initiative							

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MACC AllianceMACC Commonwealth 414 South Eighth Street Minneapolis,MN 554041025	41-1959688	501c3	18,762				Grant in support of Aramark Building Community initiative			
Martha O'Bryan Center 711 South Seventh Street Nashville,TN 372063815	62-0477728	501c3	7,262				Grant in support of Aramark Building Community initiative			
Martha O'Bryan Center 711 South Seventh Street Nashville, TN 372063815	62-0477728	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program			

Form 990,Schedule I, Par	Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Mary's Center for Maternal and Child Care 2333 Ontario Rd NW Washington, DC 200092627	52-1594116	501c3	13,262				Grant in support of Aramark Building Community initiative					
Mary's Place 1830 9th Avenue Seattle, WA 981011321	27-2087950	501c3	5,000				Grant in support of Aramark Building Community initiative					
Mission Neighborhood Centers 362 Capp St San Francisco, CA 941101808	94-1408150	501c3	1,262				Grant in support of Aramark Building Community initiative					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Mission Waco Mission World 1315 N 15th St Waco,TX 767072203	74-2605621	501c3	2,500				Grant in support of Aramark Building Community initiative			
Morristown Neighborhood House Association 12 Flagler Street Morristown, NJ 079603913	22-1487584	501c3	10,762				Grant in support of Aramark Building Community initiative			
Neighborhood Centers Inc PO Box 271389 Houston,TX 772771389	23-7062976	501c3	78,262				Grant in support of Aramark Building Community initiative			

Form 990,Schedule I, Par	Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1 3 4	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Neighborhood House 1225 South Weller Street Suite 510 Seattle, WA 98144	91-0568305	501c3	1,262				Grant in support of Aramark Building Community initiative				
Neighborhood House Inc 7780 SW Capitol Highway Portland, OR 972192477	93-0386875	501c3	6,000				Grant in support of Aramark Building Community initiative				
Nevada Partners 710 W Lake Mead Blvd North Las Vegas, NV 890304067	88-0291463	501c3	2,800				Grant in support of Aramark Building Community initiative				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
North Light Community Center 175-183 Green Lane Philadelphia, PA 191271265	23-1365378	501c3	2,000				Grant in support of Aramark Building Community initiative				
Ozanam 421 E 137th Street Kansas City, MO 641451455	44-0545442	501c3	1,500				Grant in support of Child Welfare Research program				
People's Community Services 420 S Leigh St Detroit, MI 482092614	38-1641161	501c3	3,262				Grant in support of Aramark Building Community initiative				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Pressley Ridge 5500 Corporate Dr Suite 400 Pittsburgh, PA 152375848	25-0965460	501c3	3,262				Grant in support of Aramark Building Community initiative			
Pressley Ridge 5500 Corporate Dr Suite 400 Pittsburgh,PA 152375848	25-0965460	501c3	1,500				Grant in support of Child Welfare Research program			
Raphael House 1065 Sutter Street San Francisco, CA 941095891	94-3141608	501c3	2,500				Grant in support of Aramark Building Community initiative			

Form 990,Schedule I, Par	Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.												
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1 3 5	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance						
Roark-Sullivan Lifeway Center Inc PO Box 1707 Charleston, WV 253261707	55-0633523	501c3	1,500				Grant in support of Aramark Building Community initiative						
Robert Morris University 6001 University Blvd Moon Township, PA 151082574	25-1120678	501c3	1,500				Grant in support of Aramark Building Community initiative						
Ronald McDonald House Charities of Central Illinois 610 N 7th Street Springfield, IL 627025329	37-1145155	501c3	2,500				Grant in support of Aramark Building Community initiative						

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Salvation Army Center of Hope PO Box 31128 Charlotte, NC 282311128	58-0660607	501c3	3,262				Grant in support of Aramark Building Community initiative
Salvation Army of Southern California Red Shield Youth and Community Cente 1532 W 11th Street Los Angeles, CA 90015	95-1656360	501c3	3,262				Grant in support of Aramark Building Community initiative
Sisters of Charity Foundation of Cleveland 2475 East 22nd Street Fourth Floor Cleveland, OH 441153209	34-1832698	501c3	6,262				Grant in support of Aramark Building Community initiative

Form 990,Schedule I, Par	t II, Grants and	I Other Assistance	e to Domestic Org	anizations and D	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.												
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1 ` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance										
Southeast Community Services 901 Shelby Street Indianapolis,IN 462031151	35-1318068	501c3	8,262				Grant in support of Aramark Building Community initiative										
SouthWest Improvement Council 1000 S Lowell Blvd Denver,CO 802193339	74-2510477	501c3	6,262				Grant in support of Aramark Building Community initiative										
St Joseph Catholic Church and Food Pantry 700 Hooper Ave Toms River, NJ 087537717	21-0651025	501c3	3,500				Grant in support of Aramark Building Community initiative										

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.												
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Supplies Over Seas 1500 Arlington Avenue Louisville, KY 402063177	27-2624272	501c3	2,500				Grant in support of Aramark Building Community initiative					
The Children's Home Inc 1001 Reynolda Road Winston Salem, NC 271043245	56-0547495	501c3	3,500				Grant in support of Aramark Building Community initiative					
The Family Partnership 414 S 8th St Minneapolis, MN 554041025	41-0693858	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program					

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.												
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance						
The Pantry at Hamilton Mill United Methodist Church 1450 Pine Road Dacula, GA 300191455	58-2283292	501c3	1,500				Grant in support of Aramark Building Community initiative						
The Spring of Tampa Bay Inc PO Box 5147 Tampa,FL 336755147	59-1777135	501c3	6,500				Grant in support of Aramark Building Community initiative						
Two Rivers YMCA 2040 53rd Street Moline,IL 612653650	36-2169199	501c3	1,500				Grant in support of Aramark Building Community initiative						

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.												
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
UMOM New Day Centers Inc 3333 E Van Buren Street Phoenix,AZ 850086812	86-0521062	501c3	3,262				Grant in support of Aramark Building Community initiative					
United Neighborhood Centers of Milwaukee 710 N Plankinton Ave Milwaukee, WI 532032404	90-6031721	501c3	1,262				Grant in support of Aramark Building Community initiative					
United Neighborhood Houses of New York Inc 70 West 36th Street - Suite 503 New York, NY 100188007	13-5563409	501c3	1,262				Grant in support of Aramark Building Community initiative					

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Volunteers of America of Minnesota 7625 Metro Blvd Minneapolis, MN 554393053	41-1554078	501c3	1,500				Grant in support of Child Welfare Research program					
Wellspring Family Services 1900 Rainier Ave S Seattle, WA 98144	91-0567261	501c3	50,000				Grant in support of Robert Wood Johnson ACEs Research program					
YMCA of Roanoke Valley 1126 Kıme Lane Salem,VA 241535301	54-0515736	501c3	1,000				Grant in support of Aramark Building Community initiative					

<u>Form 990,</u> Schedule I, Par	<u>rt II, Grants and</u>	<u> I Other Assistance</u>	<u>e to Domestic Orga</u>	<u>anizations and D</u>	<u>omestic Governme</u>	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA of Trenton 431 Pennington Ave Trenton, NJ 086183104	21-0635052	501c3	2,500				Grant in support of Aramark Building Community initiative
Youth Homes of Mid America PO Box 39 7225 NW 58th Street Johnston, IA 501310039	42-0680439	501c3	2,500				Grant in support of Aramark Building Community initiative

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DLN: 93493273001366

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Alliance for Strong Families and

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

Communities Inc 39-1709925 **Questions Regarding Compensation** Part I No Yes Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? Yes Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Νo 5b Any related organization? Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

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	fW-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns		
		Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990	
John Schmidt Chief Operating Officer	(i)	110,267	0	0	3,947	1,276	115,490	0	
	(ii)	90,219	0	0	3,230	1,044	94,493	0	
2 Polina Makievsky Sr VP Knowledge, Mgmt &	(i)	150,751	0	0	6,031	23,476	180,258	0	
Innovation	(ii)	0	0	0	0	0	0	0	
3 Susan Dreyfus Chief Executive Officer	(i)	212,496	0	0	8,450	725	221,671	0	
	(ii)	53,124	0	0	2,112	181	55,417	0	
4 Doug Diefenbach Former Senior VP Marketing	(i)	198,858	0	0	6,498	22,988	228,344	0	
and Phila	(ii)	0	0	0	0	0	0	0	

Schedule J (Form 990) 2015

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference

Part I, Line 4a

IN 2015, KATHERINE ASTERICH RECEIVED A TRANSITION PAYMENT OF \$27,731 AS SHE ENDED HER SERVICE AT THE ORGANIZATION, AND DOUG DIEFENBACH RECEIVED A TRANSITION PAYMENT OF \$25,386, AS HE ENDED HIS SERVICE AT THE ORGANIZATION

Schedule J (Form 990) 2015

DLN: 93493273001366

Employer identification number

Schedule L

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

2015

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Communities Inc	, rummes and						39	-170	9925			
		t Transaction ganization answe					:)(29)	organı	zations		40b	
	me of disqualif			atıonshıp bet	ween disqualit			:) Des	cription saction		(d) Corr	
					- Igailization		+	LIAII	Saction		Yes	No
			•									
							+					
							+					
Enter the	amount of tax	incurred by orga	anızatıon ma	nagers or dis	squalified pers	ons during the	yearı	ınder	section			
								.	\$			
Enter the	amount of tax	, if any, on line 2	, above, reir	mbursed by t	he organizatio	n		•	* \$			
		d/or From In										
		organization ans orted an amount				line 38a, or Fo	orm 99	0 , Par	t IV, lın	e 26, d	r if the	
						(f)Palance	(-)	Tn	(1-		(i)\//e	tton
) Name of nterested	with Purpose of o		1	e	(e)Original principal	(f) Balance due	(g) defa		(h)	ved	(i)Wri agreen	
person	organizatio	on loan	organizatio	n?	amount					by board or committee?		
			То	From			Yes	No	Yes	No	Yes	No
												
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t IIII Gr		sistance Ben										
	·	e organization (b) Relationsh		_	orm 990, Pai t of assistance				- 1(-)	D		
(a) Name of pers		interested pers	on and the	(c) A mount	t or assistance	(d) Type	orassis	stance	e (e)	Purpos	e of ass	istan
		organiza	ition									
				}		-						

Part IV Business Transactions I			20- 20- 20-		
Complete if the organizatio (a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Molly Greenman	Board Member, president and CEO of The Family Partnership	50,000	regrant recipient		No
Part V Supplemental Informati					•

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

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2015

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493273001366

OMB No 1545-0047

2015

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization
Alliance for Strong Families and
Communities Inc

Employer identification number

39-1709925

Return Reference	Explanation
Form 990, Part I, Line 1	THE ALLIANCE FOR STRONG FAMILIES AND COMMUNITIES, INC MISSION IS TO STRENGTHEN THE CAPACITIES AND INFLUENCE OF OUR NATIONAL NETWORK OF HIGH-IMPACT NONPROFIT HUMAN-SERVING ORGANIZATIONS SO THAT TOGETHER WE MAY PURSUE OUR VISION OF A HEALTHY SOCIETY AND STRONG COMMUNITIES FOR ALL CHILDREN, ADULTS, AND FAMILIES

Return Reference	Explanation
Form 990, Part VI, Section A, line 2	Some directors are head of member agencies

Return Reference	Explanation
Form 990, Part VI, Section A, Iine 6	THE MEMBERS OF ALLIANCE FOR STRONG FAMILIES AND COMMUNITIES, INC CONSIST OF ORGANIZATIONS AND/OR INDIVIDUALS MEETING THE MEMBERSHIP REQUIREMENTS FOR ONE OR MORE OF THE CLASSES OF MEMBERS AS ARE ESTABLISHED FROM TIME TO TIME BY THE BOARD OF DIRECTORS MEMBERS ARE OBLIGATED TO PAY SUCH DUES AND HAVE SUCH VOTING AND OTHER RIGHTS AND PRIVILEGES AS ARE DETERMINED BY THE BOARD OF DIRECTORS OR THE BOARD'S DELEGATED COMMITTEE HOWEVER, VOTING RIGHTS MAY NOT BE ELIMINATED OR DECREASED WITHOUT APPROVAL OF A MAJORITY OF SUCH AFFECTED MEMBERS THOSE MEMBERS HAVING VOTING RIGHTS ARE ENTITLED TO ONE DELEGATE TO THE NATIONAL DELEGATE ASSEMBLY EACH DELEGATE IS ENTITLED TO ONE VOTE FOR ALL MATTERS BROUGHT BEFORE THE NATIONAL ASSEMBLY

Return Reference	Explanation
, ,	THE DELEGATE FROM EACH VOTING MEMBER AND THE BOARD OF DIRECTORS MEET ANNUALLY AS A NATIONAL DELEGATE ASSEMBLY FOR THE ELECTION OF DIRECTORS AND THE TRANSACTION OF OTHER BUSINESS ON A DATE AND AT A TIME FIXED BY THE BOARD OF DIRECTORS THE BOARD OF DIRECTORS IS DIVIDED INTO THREE CLASSES, AND ONE CLASS IS VOTED UPON EACH YEAR

Return Reference	Explanation
Form 990, Part VI, Section A, line 7b	DELEGATES FROM VOTING MEMBERS AND THE BOARD OF DIRECTORS MEET ANNUALLY AS A NATIONAL DELEGATE ASSEMBLY FOR THE ELECTION OF THE BOARD OF DIRECTORS AND THE TRANSACTION OF OTHER BUSINESS AS DETERMINED BY THE BOARD OF DIRECTORS WHENEVER ACTION IS TAKEN BY THE NATIONAL DELEGATE ASSEMBLY, IT CONSTITUTES ACTION BY THE ALLIANCE FOR STRONG FAMILIES AND COMMUNITIES, INC THE AFFIRMATIVE VOTE OF A MAJORITY OF DELEGATES OF THE NATIONAL ASSEMBLY AT A MEETING AT WHICH A QUORUM IS PRESENT CONSTITUTES AN ACT OF THE NATIONAL DELEGATE ASSEMBLY

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	The finance committee of the board of directors has a week to review and submit their comments and questions on the Form 990 to management. Upon satisfactory resolution of questions, the Form 990 is made available to the full board for two weeks prior to filing

Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c	Alliance for Strong Families and Communities, Inc. regularly and consistently monitors and enforces compliance with the conflict of interest policy in that any officer, director or key employee who has a direct or indirect financial interest must disclose the existence of the financial interest and be given the opportunity to disclose all the material facts to the officers or directors considering the proposed transaction or arrangement. The remaining directors or officers meeting will decide if conflicts of interest exist. Each officer, director and key employee annually signs a statement which affirms such person has received a copy of the conflict of interest policy, has read and understands the policy, and has agreed to comply with the policy.

Return Reference	Explanation
Form 990, Part VI, Section B, Iine 15	IN DETERMINING THE COMPENSATION OF THE ORGANIZATION'S OFFICERS AND KEY EMPLOYEES, THE PROCESS INCLUDES A REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA, AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND FINAL DECISION THE ORGANIZATION RECEIVES A COMPENSATION STUDY FROM A THIRD PARTY PERIODICALLY, WHICH COMPARES THE COMPENSATION OF THE ORGANIZATION'S OFFICERS AND KEY EMPLOYEES TO SIMILAR ORGANIZATIONS THROUGHOUT THE U.S. THE COMPENSATION IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS, AND DOCUMENTATION IS RETAINED BY THE CHIEF FINANCIAL OFFICER THE INDIVIDUALS ARE NOT PRESENT WHEN THEIR COMPENSATION IS REVIEWED

Return Reference	Explanation
Form 990, Part VI, Section C, line 19	Alliance for Strong Families and Communities, Inc. will provide its governing documents, conflict of interest policy, and financial statements upon request

Return Reference	Explanation				
Form 990, Part XI, line 9	Change in pension valuation 86,002				

Return Reference	Explanation
Form 990, Part XII, Line 2C	No changes to the prior year's process have been made

DLN: 93493273001366

SCHEDULE R (Form 990)

Name of the organization Alliance for Strong Families and

Department of the Treasury

Internal Revenue Service

Communities Inc

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public Inspection

Employer identification number

39-1709925

Part I Identification of Disregarded Entities Complete	te ıf the organızatıon	answered "Yes" o	n Form 990, Pa	rt IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during th		 he organization ar	nswered "Yes" o	n Form 990, Pa	rt IV, line 34 because it h	ad one	e
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity sta (if section 501(c))	tus Direct controlling (3)) entity	Section (13) co ent	ontrolle tity?
	Voluntary national not-for- profit organization	NY	501(c)(3)	Line 9	ALLIANCE FOR STRONG FAMILIES AND COMMUNITIES INC	Yes	No
13-1624106 (2)Ways To Work Inc 648 N Plankinton Ave Milwaukee, WI 53203	Promote strategies to improve the financial condition of the distressed	DE	501(c)(3)	Line 7	ALLIANCE FOR STRONG FAMILIES AND COMMUNITIES INC	Yes	
39-1945011							

Part III	Identification of Related Organizations Taxable as a Partnership Complete of the organization answered	"Yes"	on Form 990,	Part IV, line 3
	because it had one or more related organizations treated as a partnership during the tax year.			

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca	ortionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or aging ner?	(k) Percentage ownership
				,			Yes	No		Yes	No	
												1

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	Section (b)(contro enti	n 512 13) olled ty?
								Yes	No
	Behavioral health and crisis management		ALLIANCE FOR STRONG FAMILIES AND COMMUNITIES INC		92,382	1,536,326	100 000 %		No

Part V Transactions With Related Organizations Complete if the organization answer	ered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more re	elated organizations li	sted in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
b Gift, grant, or capital contribution to related organization(s)				1b		No
c Gift, grant, or capital contribution from related organization(s)				1c		No
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
j Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes	
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o Sharing of paid employees with related organization(s)				10		No
p Reimbursement paid to related organization(s) for expenses				1 p		No
q Reimbursement paid by related organization(s) for expenses				1q	Yes	
r Other transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	vered relationships	and transaction thresholds			
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amo	ount in	volved	
	type (a-s)	74 House Hivoryea	Treation of determining and	June III	IVOIVEU	
ee Additional Data Table						

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section i01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations'	ı	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	Ī

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2015

Additional Data

Software ID: Software Version:

EIN: 39-1709925

Name: Alliance for Strong Families and

Communities Inc

Form 990, Schedule R, Part V - Transactions With Related Organizations

Torin 550, Schedule R, Fart V Transactions with Related organizations										
	(a) Name of related organization	(b) Transaction type(a-s)	(c) A mount Involved	(d) Method of determining amount involved						
(1)	Ways to Work Inc	Q	86,504	CASH						
(1)	Ways to Work Inc	J	24,333	Reasonable allocation						
(2)	ways to Work Inc	L	331,097	reasonable allocation						
(3)	FEI Behavioral Health Inc	L	628,692	Reasonable allocation						
(4)	FEI Behavioral Health Inc	J	273,288	CASH						
(5)	FEI Behavioral Health Inc	Q	318,483	Reasonable allocation						
(6)	FEI Behavioral Health Inc	L	15,000	CASH						