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DLN: 93493315002226

OMB No 1545-0047

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

Department of the

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 <a href="www.IRS.gov/foim990">www.IRS.gov/foim990</a>

Open to Public Inspection

Treasu	,	nue Servic	► Information about Form 990 and its instructions is at <u>www.</u>	v IRS c	jov/foir	<u> 1990</u>		Inspection
A F	or the :	2015 ca	lendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015					
_	eck if ap ddress ch		C Name of organization FELLOWSHIP FOUNDATION INC			-	yer ide	ntification number 4
	ame cha iitial retu		Doing business as THE INTERNATIONAL FOUNDATION					
Fi return,	nal /termına	ited	Number and street (or P O box if mail is not delivered to street address) Room/suite 2145 n 24th street	9		E Teleph	one num	ber
<u> </u>	nended r					(703)	536-6	5591
Ap	plication	pending	arlington, VA 22207			<b>G</b> Gross	receipts	\$ 16,464,177
			F Name and address of principal officer William D CAVIN	H(a)		a group linates?		for Yes <b>\</b>
			2145 n 24th street arlington, VA 22207		Νo			l tes l
I Ta	x-exem <sub>l</sub>	pt status	▼ 501(c)(3)		ınclud			□Yes □ No
J W	ebsit e	:► ww	/W FELLOWSHIPFOUNDATION ORG	H(c)		," attach exemp		(see instructions)
K For	n of org	anızatıon	✓ Corporation Trust Association Other ►		-	nation 19		State of legal domicile I
	rt I	Sum						
Activities & Governance	GR		ED, THE WIDOWS, AND THE YOUTH OF THEIR COUNTRY WILL BE INWILL BE DEVELOPED UNDER THE THOUGHTS OF JESUS, INCLUDIN					
Ġ.								
<b>ಸ</b>	<b>2</b> C	heck th	is box ▶ ☐ if the organization discontinued its operations or disposed of	more	than 2!	5% of its	s net as	ssets
ıtıe,	3 N	umber	of voting members of the governing body (Part VI, line 1a)				з	15
ÇŢ.	4 N	umber	of independent voting members of the governing body (Part VI, line 1b)				4	15
⋖	5 T	otal nur	mber of individuals employed in calendar year 2015 (Part V , line 2a) $$ .			•	5	142
			nber of volunteers (estimate if necessary)			•	6	1,300
			related business revenue from Part VIII, column (C), line 12			•	7a 7b	0
	U NC	.c dili cie	recu business taxable income noni roini 550 1, inic 54	Τ.	Prior	Year	70	Current Year
	8	Contri	butions and grants (Part VIII, line 1h)			15,048,	372	14,235,02
Ravenue	9	Progra	am service revenue (Part VIII, line 2g)		1,819,536		2,056,20	
λċΥ	10		tment income (Part VIII, column (A), lines 3, 4, and 7d)			491,		16,68
_	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line			278,		148,46
	12	12)	revenue and mies o through II (must equal) are viii, column (A), me			17,637,	393	16,456,37
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)			5,141,		4,476,01
	14		ts paid to or for members (Part IX, column (A), line 4)			0		
8	15	5-10)				4,719,	682	5,096,29
Expenses	16a	Profes	ssional fundraising fees (Part IX, column (A), line 11e)				0	
꿃	b		ındraısıng expenses (Part IX, column (D), line 25) ▶					
	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			6,293,		6,492,78
	18 19		expenses Add lines 13-17 (must equal Part IX, column (A), line 25) ue less expenses Subtract line 18 from line 12			16,155, 1,482,		16,065,08 391,29
<u>~ ~</u>	13	Keven	de less expenses Subtract me 10 nom me 12		nına of	Current		End of Year
Net Assets or Fund Balances				Begin				
Ass d Ba	20 21		assets (Part X, line 16)			12,762, 1,814,		13,153,42
Net	22		sets or fund balances Subtract line 21 from line 20			10,948,		11,340,40
	rt II	Sign	ature Block	-				
my k	nowled	ge and I	perjury, I declare that I have examined this return, including accompany belief, it is true, correct, and complete Declaration of preparer (other tha nowledge					
		****	ature of officer		201 Dat	6-11-10		
Sign Here		,			Dat	_		
1161	-		am D CAVIN President					

Preparer's signature Deborah G Kosnett

Print/Type preparer's name Deborah G Kosnett **Paid** ► Tate and Tryon Preparer Firm's address ► 2021 L Street NW Suite 400 **Use Only** Washington, DC 20036

. ✓Yes No

Firm's EIN > 52-1855942

Phone no (202) 293-2200

P00290720

May the IRS discuss this return with the preparer shown above? (see instructions)

Check I If

Date

Forn	n 990 (2015)					Page <b>2</b>
Pai	t IIII Statemen	t of Program Serv	ice Accom	olishments		
	Check if Sch	nedule O contains a res	oonse or note	to any line in this Part	III	
1	Briefly describe the	e organızatıon's mıssıor	1			
REC LEA OF 1	ONCILIATION," MC DERS OF MANY NAT THEIR COUNTRY WI	DELING THE PRINCIF FIONS, AND AS THEIR	PLES OF JESU HEARTS ARE POSITIVE M	S, BASED ON LOVIN E TOUCHED, THE POO ANNER YOUTH GRO	TOGETHER, TO GO OUT AS G GOD AND LOVING OTHE DR, THE OPPRESSED, THE N UPS WILL BE DEVELOPED (	RS TO WORK WITH THE VIDOWS AND THE YOUTH
2	Did the organizatio	· -	ant program s	ervices during the yea	r which were not listed on	Yes ✓No
	If "Yes," describe t	hese new services on S	chedule O			
3	Did the organizatio	n cease conducting, or i	make significa	nt changes in how it co	onducts, any program	⊤Yes √No
	If "Yes," describe t	hese changes on Scheo	lule O			
4	expenses Section		l) organizatior	s are required to repor	nree largest program services t the amount of grants and al	
4a	(Code	) (Expenses \$	13,098,309	including grants of \$	4,375,010 ) (Revenue \$	527,222 )
	INTEGRATE THE PRIN		ORK AND IN THE		E WORLD THE FOUNDATION SEEKS HIPS THIS APPLIES WHETHER THEY	
4b	(Code	) (Expenses \$	1,447,042	including grants of \$	0 ) (Revenue \$	1,431,718 )
					R THE NATIONAL PRAYER BREAKFAS 5 FROM AROUND THE WORLD	T HELD ANNUALLY IN

101,000 ) (Revenue \$ (Code ) (Expenses \$ 545,115 including grants of \$ 97,264) OPERATION OF FACILITIES FOR MINISTRIES THE FOUNDATION OWNS AND OPERATES VARIOUS HOUSES WHICH SERVE TO FACILITATE MINISTRY ACTIVITIES

AMONG THE MANY MINISTRIES WHICH ARE PART OF THE INTERNATIONAL FOUNDATION THE PROPERTIES ARE ALSO USED TO HOST PERSONS FROM AROUND THE WORLD FOR DISCIPLESHIP AND TRAINING PURPOSES THE FOUNDATION WORKS WITH MANY OTHER COMMUNITY, CHARITABLE, AND RELIGIOUS ORGANIZATIONS

AND THE FACILITIES ARE USED TO HELP FACILITATE MEETINGS BETWEEN REPRESENTATIVES OF THESE DIVERSE ORGANIZATIONS

Other program services (Describe in Schedule O )

4d (Expenses \$ including grants of \$ ) (Revenue \$

Total program service expenses ▶ 15,090,466 4e

VIII, IX, or X as applicable

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

16

FOIII	1990 (2015)			Page 2
Pa	rt 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	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I "	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III 😕	8		No
	· · · · · · · · · · · · · · · · · · ·			

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt

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

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 . . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII,

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 💆 . . . . . . . . . c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of

ıts total assets reported ın Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆 . . . . . . . . . . .

reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🐕 . . . . . . . . . . . . . . . . . .

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

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

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

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 🥦

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

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

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

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

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . 🔧 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or

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

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

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

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

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

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

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

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

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

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

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

Νo

Νo

Νo

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Form 990 (2015)

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**11**d

11e

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12a

**12**b

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14a

14b

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20a

20b

Yes

Yes

Yes

Yes

Yes

Yes

990 (	2015)		
IV	Checklist of Required Schedules	(continued	)

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 . . . . . . . . . . 💆

Yes

Yes

Yes

21

22

23

24a

24b

**24**c

24d

25a

25b

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28a

28b

**28**c

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Yes

Form 990 (2015)

Yes

Yes

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Pai	rt IV	Ch
21	Did t	he o
	dom	actic

rganization report more than \$5,000 of grants or other assistance to any domestic organization or

Form 990 (2015)

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

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

instructions for applicable filing thresholds, conditions, and exceptions)

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . .

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes,"

orm	990 (2015)			Page !
Par				
	Check if Schedule O contains a response or note to any line in this Part V			<u></u>
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   37		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b  0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
b	by this return	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- 55		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7</b> f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7</b> g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter  Instruction foca and contributions uncluded an Part VIII line 12			
	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter			
а	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		
	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? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	<b>13</b> a		
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? . . . . . .
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . .

14b

Part

90 (	(2015) Pa	age <b>6</b>
VI	Governance, Management, and Disclosure	
	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below,	

	describe the circumstances, processes, or changes in Schedule O. S	see II	istructions.					
	Check if Schedule O contains a response or note to any line in this Part VI					🔽		
Se	ction A. Governing Body and Management							
	•				Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	1	5				
	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	<b>1</b> b	1	5				
2	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?							
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management cor	,		3		No		
4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?							
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets? .							
6	Did the organization have members or stockholders?			6		Νo		
7a	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?			7a		No		
b	<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,							

7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
_Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	even	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12</b> c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			

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 Section C. Disclosure List the States with which a copy of this Form 990 is required to be filed▶ VA , AK , AZ , CO , GA , KY , MN , NH , ND , TN , WA , WV ,

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)

Own website Another's website Upon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

►COHNREZNICK LLP 7501 wisconsin ave ste 400e Bethesda, MD 20814 (301) 654-7555

Form 990 (2015)

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

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	m unle:	ore t ss pe	han erso cer	not one n is and		(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) William D Cavin President	6 00	х		×				0	0	0
(2) Michael Foster Vice President	1 00	×		×				0	0	0
(3) Kent Ford Secretary	1 00	х		x				0	0	0
(4) Christy Atkinson Treasurer	1 00	х		x				0	0	0
(5) Denny Pearce Director	1 00	х						0	0	0
(6) Katy Crane Director	1 00	х						0	0	0
(7) Merle Smith Director	1 00	х						0	0	0
(8) Jerry Jonker Director	1 00	х						0	0	0
(9) Ward Brehm Director	1 00	х						0	0	0
(10) John Ramıg Dırector	1 00	х						0	0	0
(11) Larry Ross Director	1 00	х						0	0	0
(12) J Stewart Rawley Director	1 00	х						0	0	0
(13) Grant Ellis Director	1 00	х						0	0	0
(14) Lee Rooker Director	1 00	х						0	0	0
										Form <b>990</b> (2015)

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle	ore t ss pe offi	c) o not check n one box, on is both an r and a /trustee)			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	and r	ilzation related zations
(15) Bill Wall	1 00	×						0			
Director - 01/01 - 07/27		, ,									
(16) Michael Stoltzfus  Director - 07/27 - 12/31	1 00	×						o	(		
(17) Douglas Coe	40 00										
Associate				X				49,476	(		ı
(18) Henry Deneen	40 00										
Associate						Х		139,789	(	)	57,15
(19) Eric Fellman Associate	40 00					х		118,959	(		
(20) Marty Sherman	40 00										
Associate						Х		113,700	(		9,44
(21) David Coe	40 00										
Associate						Х		100,656	(		11,40
1b Sub-Total				<b>&gt;</b>		•	5:	22,580	0		77,995
Total number of individuals (including but n \$100,000 of reportable compensation from	ot limited to tho	se list			e) w	ho red		· I	<b>I</b>		, -
										Yes	No
3 Did the organization list any <b>former</b> officer, on line 1a? If "Yes," complete Schedule J for							_				No

Section B. Independent Contractors						
9	services rendered to the organization? If "Yes," complete Schedule J for such person					

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				
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 I for such person	5		No			

(B)

Description of services

ACCOUNTING SERVICES

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

cohnreznick llp

7501 WISCONSIN AVE STE 400E betheSDA, MD 20814

(A)

Name and business address

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization  $\blacktriangleright$  1

Form 990 (2015)

(C)

Compensation

477,149

Form 99								Page <b>9</b>
Part V	1111	Statement o						<u></u> -
		Check if Schedi	ule O contains a respor	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts str	<b>1</b> a	Federated cam	paigns 1a					
anta	ь	Membership du	ies <b>1b</b>					
Gr.	С	Fundraising eve	ents <b>1c</b>					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organiz	zations 1d					
	e	Government grants						
Sin				14 225 026				
utic 18 r	f	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	14,235,026				
E E	g	Noncash contribution 1a-1f \$	ons included in lines	337,419				ĺ
Cont and	h	Total. Add lines	s 1a-1f		14,235,026			
				Business Code				
Program Service Revenue	2a	NAT'L PRAYER BRE	EAKFAST	900099	1,431,718	1,431,718		
	ь	SEMINARS AND CO	DNFERENC	900099	329,412	329,412		
	С	Leadership Principle	es	900099	194,850	194,850		
면 전	d	Room/Board Reim	burseme	900099	97,264	97,264		
Š	e	Books & Tapes		900099	2,960	2,960		
grar	f	All other progra	am service revenue					
<b>P</b>	g	Total. Add lines	s 2a-2f	•	2,056,204			
	3		ome (including dividen					
		and other simil	ar amounts)	•	20,953			20,953
	4		stment of tax-exempt bond	proceeds P	27,110			27,110
	5	Royalties	(ı) Real	(II) Personal	27,113			27,110
	6a	Gross rents	(I) ICCUI	(II) I CISOIIdi				
		Less rental						
	Ь	expenses						
	C	Rental income or (loss)						
	d	Net rental inco						
	<b>,</b>	Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other than inventory	1,133	2,400				
	ь	Less cost or other basis and	5,862	1,937				
		sales expenses	·					
	C	Gain or (loss)	-4,729	463	-4,266			-4,266
	d 8a	Gross income f	from fundraising		-4,200			7,200
Other Revenue	, oa	events (not inc						
Re		See Part IV, Iir						
her			a					
Ö	С		penses <b>b</b> (loss) from fundraising	events				
			from gaming activities	evenes p				
		See Part IV, Iir						
	b		penses <b>b</b>					
	С	Net income or (	(loss) from gaming acti	vities				
	10a	Gross sales of returns and allo		·				
	ь	Less cost of a	oods sold <b>b</b>					
		_	(loss) from sales of inve	entory ▶				
		Miscellaneou	s Revenue	Business Code				
	11a	MISCELLANEC	DUSINCOME	900099	121,351			121,351
	ь							
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	•	121,351			
	12	Total revenue.	See Instructions .	▶	16,456,378	2,056,204		0 165,148
		_			, .55,570	_,,		Form 000 (2015)

orm	990 (2015)				Page <b>1</b> 0
Par	IX Statement of Functional Expenses				
Secti	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	this Part IX			
	▼		(B)	(C)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to domestic organizations and		expenses	general expenses	expenses
•	domestic governments See Part IV, line 21	264,767	264,767		
2	Grants and other assistance to domestic	20 1,7 07	201,707		
_	ındıvıduals See Part IV, line 22	106,974	106,974		
3	Grants and other assistance to foreign organizations, foreign	,	, , , , , , , , , , , , , , , , , , ,		
	governments, and foreign individuals See Part IV, lines 15	4 104 200	4 104 260		
4	and 16	4,104,269	4,104,269		
5	Compensation of current officers, directors, trustees, and				
3	key employees	49,476	49,476		
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	4,484,553	4,210,547	274,006	
8	Pension plan accruals and contributions (include section 401(k)	1, 10 1,333	1,210,517	27 1,000	
-	and 403(b) employer contributions)				
9	Other employee benefits	279,737	265,797	13,940	
10	Payroll taxes	202 525	350.003	22 542	
11	Fees for services (non-employees)	282,525	259,982	22,543	
a	Management				
a b	Legal	30,295	900	29,395	
c	Accounting	509,619	300	509,619	
d	Lobbying	309,019		309,019	
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)				
9	amount, list line 11g expenses on Schedule O)	5,558	1,600	3,958	
12	Advertising and promotion				
13	Office expenses	197,532	153,152	44,380	
14	Information technology	79,272	67,052	12,220	
15	Royalties				
16	Occupancy	515,269	493,385	21,884	
17	Travel	1,050,673	1,033,380	17,293	
18	Payments of travel or entertainment expenses for any federal,	37,880	37,880		
19	state, or local public officials	1,628,749	1,625,730	3,019	
20	Interest	1,020,743	1,023,730	3,013	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	172,517	170,411	2,106	
23	Insurance	39,008	30,062	8,946	
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	Housing Allowance	920,121	920,121		
b	SERVICES RENDERED	635,086	635,086		
c	Food and Entertainment	364,304	356,552	7,752	
d	SPECIAL SERVICES PROGRA	116,440	116,440		
e	All other expenses	190,462	186,903	3,559	
25	Total functional expenses. Add lines 1 through 24e	16,065,086	15,090,466	974,620	0
26	Joint costs.Complete this line only if the organization				
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Check here ► ☐ If following SOP 98-2 (ASC 958-720)				

	•
Part X	Balance She
	Check If Schedu

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Net Assets or Fund Balances

Part X	Balance	Shee
	Check if S	chodule

1 01111 9 90 (.	2013)	
Part X	Balance Sheet	

<b>Balance Sheet</b>	
01 1 60 1 1 1 0	

Cash-non-interest-bearing . . . .

Savings and temporary cash investments

Pledges and grants receivable, net .

Notes and loans receivable, net .

Prepaid expenses and deferred charges

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

**Total assets.**Add lines 1 through 15 (must equal line 34)

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

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

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

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

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

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

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

lines 27 through 29, and lines 33 and 34.

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

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

Investments—publicly traded securities . .

Inventories for sale or use .

Complete Part VI of Schedule D

Less accumulated depreciation

Intangible assets . . . .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Accounts receivable, net .

II of Schedule L

Grants payable

Deferred revenue .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

Unrestricted net assets .

Temporarily restricted net assets

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

- lle O contains a response or note to any line in this Part X .

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part

6 713 736

3,633,720

10a

10b

950 1

8,151,230

372,170

248,990

3,216,015

88,415

685,000

12,762,770

1,543,695

270,595

1,814,290

10,948,480

10,948,480

12,762,770

(A)

Beginning of year

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34

(B) End of year

200

9,674,779

20,500

267,157

3,080,016

77,105

33,670

13,153,427

1 536 975

276,050

1,813,025

11,340,402

11,340,402

13.153.42 Form 990 (2015)

- Page **11**

rt XI	Reconcilliation of Net Assets									
	Check if Schedule O contains a response or note to any line in this Part $XI$									
Total	revenue (must equal Part VIII, column (A), line 12)									

Net unrealized gains (losses) on investments .

Part XIII Financial Statements and Reporting

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

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

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

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

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

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

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

Consolidated basis

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

Consolidated basis

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

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

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

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

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

Both consolidated and separate basis

Both consolidated and separate basis

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

art XI	Reconcilliation of Net Assets
	Check if Schedule O contains a response
T - 4 - 1	

•	•	•	•	•	•	•	•	•	
									_

16,456,378
16,065,086
391,292

1

2

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7

8

9

10

Page **12** 

630

10,948,480

11,340,402

Yes

Yes

Yes

2a

2b

2c

3а

3b

▽

No

Νo

Nο

Form 990 (2015)

# Donated services and use of facilities . Investment expenses Prior period adjustments .

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

efi	le GF	RAPHIC pr	int - DO I	NOT PROCES	S As Filed Da	ta -		DLN: 9:	3493315002226
SCHEDULE A (Form 990 or 990EZ)			•	Complete if the Information al	Charity Status organization is a sec 4947(a)(1) nonex • Attach to Forn bout Schedule A (For	tion 501(c)(3) empt charitable 1990 or Form 9	organization o e trust. 90-EZ.	Ort r a section	2015 Open to Public Inspection
Treas	tment : ury	or the	<u>w</u> ı	ww.irs.gov/fo	rm990.				Thispection
		enue Service						Formation and identifie	-+:
		<b>he organizat</b> FOUNDATION						Employer identific	acion number
								53-0204604	
Pa	rt I	Reason	for Publi	c Charity S	<b>tatus</b> (All organiza	ations must c	omplete this	part.) See instructi	ons.
The	organı		•		iuse it is (For lines 1	-	•	•	
1					r association of churc				
2					<b>)(1)(A)(ii).</b> (Attach S				
3		•	•	•	service organization				
4					rated in conjunction	with a hospital	described in <b>se</b>	ection 170(b)(1)(A)(ii	i). Enter the
5	Г	An organı		ated for the ber		niversity owned	or operated by	a governmental unit	described in <b>section</b>
•	_			omplete Part I	•	t doceribed in a	estion 170/b)/	4)/4)///	
6 7	<u> </u>			-	or governmental unit			ental unit or from the	gonoral nublic
′	~				<b>i).</b> (Complete Part II		Tom a governin	ental unit of from the	general public
8					ion 170(b)(1)(A)(vi)		rt II )		
9		receipts fi from gross organizati	om activition investmer on after Jun	es related to it nt income and i ie 30, 1975 S	s exempt functions—	subject to cert xable income ( (Complete Par	ain exceptions, less section 51 t III )	ributions, membership and (2) no more than 11 tax) from business on 509(a)(4).	331/3% of its support
11 a	F	one or mor the box in <b>Type I.</b> A s supported	e publicly s lines 11a th supporting o organizatio	upported organ nrough 11d tha organization op n(s) the power	nizations described in t describes the type erated, supervised, o to regularly appoint o	n section 509(a of supporting o r controlled by or elect a major	a)(1) or section organization and orts supported o	nctions of, or to carry of 1509(a)(2) See <b>secti</b> on I complete lines 11e, organization(s), typica tors or trustees of the	on <b>509(a)(3).</b> Check 11f, and 11g lly by giving the
b c	Г Г	Type II. A manageme must comp Type III fo	supporting int of the su lete Part I' unctionally	organization s ipporting organ V, Sections A a integrated. A s	ization vested in the and C. Supporting organization	ed in connectio same persons on operated in (	that control or connection with	orted organization(s), manage the supported n, and functionally inte	d organization(s) <b>You</b>
d	Г	Type III n	on-function	ally integrated		ızatıon operate	d in connection	<b>), and E.</b> I with its supported or rement and an attentiv	
e	Г	Check this	box if the o	organization re		rmination from	the IRS that it	ıs a Type I, Type II, T	ype III functionally
f	Ente	_			ally integrated suppoins		OII		
g				-	out the supported orga				
(i) Name of supported organ		ganızatıon	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	listed in your governing mone		A mount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
						Yes	No		
Tota	ı								
For F	aperv	work Reduct	ion Act Not	ice, see the In	structions for Form 9	90 or 990EZ.	Cat No 112		1 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (f)Total (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 13,106,939 13,148,880 15,048,372 68,677,850 13,138,633 14,235,026 nts ) ther ehalf lities furnished by a governmental unit

13,148,880

(b)2012

13,148,880

385,763

65,173

	membership fees received (
	not include any unusual gran
2	Tax revenues levied for the
	organization's benefit and eit
	paid to or expended on its be
3	The value of services or facil

to the organization without charge Total. Add lines 1 through 3

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) Public support. Subtract line 5

from line 4

Section B. Total Support Calendar year

(or fiscal year beginning in) ▶

Amounts from line 4

Gross income from interest, dividends, payments received

not the business is regularly

capital assets (Explain in Part

10 Other income Do not include gain or loss from the sale of

11 Total support. Add lines 7

supported organization

instructions

similar sources

carried on

through 10

VI)

15

on securities loans, rents, royalties and income from

Net income from unrelated business activities, whether or

Public support percentage for 2014 Schedule A, Part II, line 14

(a)2011

13,106,939

375,534

13,106,939

62,273

12 Gross receipts from related activities, etc. (see instructions)

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, 

Section C. Computation of Public Support Percentage

Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))

17a 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

b 33 1/3% support test-2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

13,138,633

(c)2013

13,138,633

366,854

40.182

15,048,372

(d)2014

15,048,372

93,585

204,213

15

14

12

14,235,026

(e)2015

14,235,026

48,063

121.351

68,677,850

6.086.594

62,591,256

68,677,850

1,269,799

493,192

70,440,841

8,422,308

(f)Total

Schedule A (Form 990 or 990-EZ) 2015

16a 33 1/3% support test-2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

88 860 % 86 170 %

▶▽

▶□

▶□

Schedule A (Form 990 or 990-EZ) 2015 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	4-12011	(1-)2012	4-12012	(4)204.4	/-N201F	/5\T - b - l
(or f	iscal year beginning in) ▶	<b>(a)</b> 2011	<b>(b)</b> 2012	(c)2013	( <b>d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
1	Gifts, grants, contributions, and						
	membership fees received (Do						
	not include any "unusual grants")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to						
	the organization's tax-exempt						
	purpose						
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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified						
	persons						
h	Amounts included on lines 2 and						
U	3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of						
	the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6 )						
Se	ction B. Total Support						
	· · ·						
	Calendar year	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	(d)2014	(e)2015	(f)Total
(or f	Calendar year iscal year beginning in) ▶	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> Total
(or f	Calendar year iscal year beginning in) ▶ Amounts from line 6	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> Total
(or f	Calendar year iscal year beginning in) ► A mounts from line 6 Gross income from interest,	<b>(a)</b> 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> Total
(or f	Calendar year iscal year beginning in) ▶ A mounts from line 6 Gross income from interest, dividends, payments received on	<b>(a)</b> 2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	<b>(f)</b> Total
(or f	Calendar year iscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties	(a)2011	<b>(b)</b> 2012	(c)2013	<b>(d)</b> 2014	(e)2015	<b>(f)</b> Total
(or f 9 10a	Calendar year iscal year beginning in) ▶  Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a)2011	<b>(b)</b> 2012	(c)2013	<b>(d)</b> 2014	(e)2015	(f)Total
(or f	Calendar year iscal year beginning in) ▶  Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a	Calendar year iscal year beginning in) ▶  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)	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a	Calendar year iscal year beginning in) ▶  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	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b	Calendar year iscal year beginning in) ▶  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)	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b	Calendar year iscal year beginning in) ► 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	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b	Calendar year iscal year beginning in) ► 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	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b	Calendar year iscal year beginning in) ► Amounts 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	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b	Calendar year iscal year beginning in) ►  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	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b	Calendar year iscal year beginning in) ►  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	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b c 11	Calendar year iscal year beginning in) ▶  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	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b c 11	Calendar year iscal year beginning in) ► 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	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b c 11 12	Calendar year iscal year beginning in) ►  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)	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 10a b c 11	Calendar year iscal year beginning in) ►  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,	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	(f)Total
(or f 9 110a b c 11 12	Calendar year iscal year beginning in) ►  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)						
(or f 9 10a b c 11 12	Calendar year iscal year beginning in) ► Amounts 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 first five years.						3) organization,
(or f 9 110a b c 11 12 13 14	Calendar year iscal year beginning in) ►  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 f check this box and stop here	or the organization	on's first, second				
(or f 9 110a b c 111 12 13 14 Se	Calendar year iscal year beginning in) ►  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 f check this box and stop here  Ction C. Computation of Pub	or the organization	on's first, second	, third, fourth, or f		section 501(c)(	3) organization,
(or f 9 110a b c 111 12 13 14 See 15	Calendar year iscal year beginning in) ► Amounts 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 finetic this box and stop here Ction C. Computation of Pub Public support percentage for 2015	or the organization	on's first, second ercentage (f) divided by line	, third, fourth, or f		section 501(c)(	3) organization,
(or f 9 10a b c 11 12 13 14 See 15 16	Calendar year iscal year beginning in) ►  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 f check this box and stop here  ction C. Computation of Pub  Public support percentage from 2015	or the organization lic <b>Support P</b> (line 8, column .4 Schedule A, P	on's first, second  ercentage (f) divided by line art III, line 15	, third, fourth, or f		section 501(c)(	3) organization,
(or f 9 10a b c 11 12 13 14 See 15 16	Calendar year iscal year beginning in) ►  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 f check this box and stop here  ction C. Computation of Pub Public support percentage from 2015 Ction D. Computation of Inv	or the organization lic Support P (line 8, column .4 Schedule A, P estment Inco	ercentage (f) divided by line art III, line 15	, third, fourth, or f	ifth tax year as a	section 501(c)(	3) organization,
(or f 9 10a b c 11 12 13 14 See 15 16	Calendar year iscal year beginning in) ►  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 f check this box and stop here  ction C. Computation of Pub  Public support percentage from 2015	or the organization lic Support P (line 8, column .4 Schedule A, P estment Inco	ercentage (f) divided by line art III, line 15	, third, fourth, or f	ifth tax year as a	section 501(c)(	3) organization,
(or f 9 110a b c 111 12 13 14 Se 15 16 Se	Calendar year iscal year beginning in) ►  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 f check this box and stop here  ction C. Computation of Pub Public support percentage from 2015 Ction D. Computation of Inv	or the organization  lic Support P (line 8, column .4 Schedule A, P estment Inco 2015 (line 10c, c	ercentage (f) divided by line art III, line 15 ime Percenta olumn (f) divided	third, fourth, or four	ifth tax year as a	15   16	3) organization,

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

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

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

### Part IV Supporting Organizations

I, complete Sections A and D, and complete Part V )

Section	A. A	I Supporting Orga	ınizatio	ทร

	I, complete Sections A and D, and complete Part V )			
56	ection A. All Supporting Organizations		Vas	No.
1	A re all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1	Yes	No
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?  If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?  If "Yes," describe in <b>Part VI</b> 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 <b>Part VI</b> what controls the organization put in place to ensure such use	<b>3</b> c		
4a	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		
Ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?  If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)?  If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year?  If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN 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	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	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 <b>Part VI</b> .	9a		
b	DID DID ONE OF MOTE DISCUSSIONS (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 <b>Part VI</b> .	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 <b>Part VI</b> .	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b		
11	Has the organization accepted a gift or contribution from any of the following persons?			
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		
ь	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		

Nο

Yes

2a

2b

3a

3b

Schedule A (Form 990 or 990-EZ) 2015

No

Part IV	Supporting Organizations (continued)	
Section	n B. Type I Supporting Organizations	

			Yes	
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 <b>Part VI</b> 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

Section C. Type II Supporting Organizations Yes No 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  $\bf Part~VI$  how contiol or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) 1 Section 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 2 supported organization(s) 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

Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) The organization satisfied the Activities Test Complete line 2 below а b

- The organization is the parent of each of its supported organizations. Complete line 3 below
- c

The organization supported a governmental entity Describe in Part VI how you supported a government entity (see

- instructions)

2 Activities Test\_Answer (a) and (b) below.

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 nization was responsive to those supported organizations, and how the

II Tes, then in Part VI Identity those sup
furthered their exempt purposes, how the organ
organization determined that these activities co

onstituted substantially all of its activities

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

**b** 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?

- 3 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of
- each of the supported organizations? Provide details in Part VI
- **b** 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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Page 6

1	Check here if the organization satisfied the Integral Part Test as a qualifying $\mathfrak t$	trust on N	ov 20,1970 <b>See inst</b>	ructions. All other
	Type III non-functionally integrated supporting organizations must complete	Sections	A through E	Г
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection o gross income or for management, conservation, or maintenance of property held for production of income (see instructions)			
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
c	Fair market value of other non-exempt-use assets	<b>1</b> c		
d	Total (add lines 1a, 1b, and 1c)	<b>1</b> d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter $1 - 1/2\%$ of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line $8$ , Column $A$ )	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		

6

**Distributable A mount.** Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Section D - Distributions			Current Year						
A mounts paid to supported organizations to accomp	olish exempt purposes								
2 A mounts paid to perform activity that directly further excess of income from activity	oorted organizations, in								
3 Administrative expenses paid to accomplish exemp	ot purposes of supported orga	anızatıons							
4 Amounts paid to acquire exempt-use assets	Amounts paid to acquire exempt-use assets								
5 Qualified set-aside amounts (prior IRS approval rec									
6 Other distributions (describe in Part VI) See instru	. ,								
·	ictions								
7 Total annual distributions. Add lines 1 through 6									
Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide							
<b>9</b> Distributable amount for 2015 from Section C, line	6								
10 Line 8 amount divided by Line 9 amount									
		T	T						
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015						
Distributable amount for 2015 from Section C, line 6									
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)									
<b>3</b> Excess distributions carryover, if any, to 2015									
a									
b									
С									
<b>d</b> From 2013									
<b>e</b> From 2014									
f Total of lines 3a through e									
<b>g</b> Applied to underdistributions of prior years									
h Applied to 2015 distributable amount									
i Carryover from 2010 not applied (see instructions)									
j Remainder Subtract lines 3g, 3h, and 3i from 3f									
4 Distributions for 2015 from Section D, line 7									
<u> </u>									
a Applied to underdistributions of prior years			-						
<b>b</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)									
<b>7 Excess distributions carryover to 2016.</b> Add lines 31 and 4c									
8 Breakdown of line 7									
а									
b									
<b>c</b> Excess from 2013									
d From 2014									
<b>e</b> From 2015		<u> </u>	/F 000 000 == 1 /2 1						
		Schedule A	<b>(Form 990 or 990-EZ)</b> (2015						

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Schedule A (Form 990 o	990-EZ) 2015 P.	age <b>8</b>					
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test						
Return Refere	Return Reference Explanation						
Schedule A , Part II , Line Explanation of Other Inc	' I						
	Schedule A (Form 990 or 990-EZ)	2015					

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE D** 

DLN: 93493315002226 OMB No 1545-0047

2015

# (Form 990)

**Supplemental Financial Statements** 

epa i	rtment of the	Part IV, line 6, 7, 8	he organization answered 3, 9, 10, 11a, 11b, 11c, 11  Attach to Form 99	d, 11e, 11f, 12a, or 1: 0.	2b.		to Public
	nal Revenue Service	Information about Schedule D	(Form 990) and its instru	ictions is at <u>www.irs</u>	.gov/t	<u>orm990</u> . <u>Ins</u>	pection
	me of the organi: LOWSHIP FOUNDATI				Empl	oyer identification n	umber
FEL	TOM SULL FOUNDALI	ON INC			53-0	204604	
Pa	<b>Organi</b> Comple	izations Maintaining Donor	Advised Funds or ed "Yes" on Form 990	Other Similar Fu , Part IV, line 6.	inds o	or Accounts.	
			(a) Donor advised fund	ls	(b)	Funds and other acco	ounts
1	Total numbe	rat end of year					
2	Aggregate va year)	alue of contributions to (during					
3	Aggregate v	alue of grants from (during year)					
4	Aggregate v	alue at end of year					
5	_	ation inform all donors and donor a rganization's property, subject to t	-		or advis	sed <b>Ty</b>	es 🗆 No
6	used only for cl	ation inform all grantees, donors, a naritable purposes and not for the ermissible private benefit?				r purpose	es ∏No
Pai	rt III Consei	rvation Easements. Comple	ete if the organization	answered "Yes" o	n Forn		•
1	Purpose(s) of c	onservation easements held by th	e organization (check all	that apply)			
	•	on of land for public use (e g , recr	eation or				
	education)	of natural habitat	l F	_		ically important land d historic structure	area
	<u>'</u>	on of open space	ı	Fleseivation of a	certifie	a mistoric structure	
2	•	2a through 2d if the organization	held a qualified conserva	tion contribution in th	ne form	of a conservation	
_	•	ne last day of the tax year	mera a quammea conserva		101111	Held at the End o	f the Year
а	Total number o	f conservation easements			2a		
b	Total acreage r	estricted by conservation easeme	ents		2b		
c	Number of cons	servation easements on a certified	historic structure includ	led ın (a)	<b>2</b> c		
d		servation easements included in (our included in (our included in the National Register	c) acquired after 8/17/06	s, and not on a	2d		
3	Number of cons	servation easements modified, tra	nsferred, released, exting	guished, or terminate	d by the	e organızatıon durıng	the
	tax year ▶						
4	Number of state	es where property subject to cons	ervation easement is loc	ated <b>▶</b>			
5		ization have a written policy regar enforcement of the conservation 6		ring, inspection, hand	ling of	☐ Yes	☐ No
6	Staff and voluni year	teer hours devoted to monitoring,	inspecting, handling of vi	olations, and enforci	ng cons	servation easements	during the
	<b>-</b>						
7	A mount of expe	enses incurred in monitoring, inspe	ecting, handling of violati	ons, and enforcing co	nserva	ition easements durii	ng the year
8		servation easement reported on lii on 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the	requirements of sec	tion <b>1</b> 7	0(h)(4) <b>Yes</b>	☐ No
9	balance sheet,	escribe how the organization repor and include, if applicable, the text n's accounting for conservation ea	of the footnote to the or			·	
Par		izations Maintaining Collec			or Oth	ner Similar Asse	ts.
		ete if the organization answere tion elected, as permitted under SI			uo etat	toment and balance of	haat
1a	works of art, his	storical treasures, or other similar e, in Part XIII, the text of the footi	assets held for public ex	khibition, education, o	r resea	arch in furtherance of	
b	works of art, his	tion elected, as permitted under SI storical treasures, or other similar e the following amounts relating to	assets held for public ex				
(	(i) Revenue inclu	ded on Form 990, Part VIII, line :	l		<b>&gt;</b> \$		_
		ed in Form 990, Part X		•			
2	If the organizat	non received or held works of art, h		ther similar assets fo			

Revenue included on Form 990, Part VIII, line 1

Sched	dule D (Form 990) 2015											Page <b>2</b>
Part	Organizations Ma (continued)	intaining	Collections of A	rt, Hi	istori	cal Tre	asures, or (	Oth	ner Similar	Ass	ets	
	Using the organization's acquicollection items (check all tha		ssion, and other rec	ords, o	check a	iny of the	e following that	are	a significant	use	of its	
а	Public exhibition			d	Г	Loan o	r exchange pro	gra	ms			
b	Scholarly research			e	$\Gamma$	Other						
c	Preservation for future g	enerations										
4	Provide a description of the o Part XIII	rganızatıon's	collections and exp	laın ho	ow they	further	the organization	n's	exempt purpo	se in		
	During the year, did the organ assets to be sold to raise fund									Yes	_ No	,
	Escrow and Custo Complete if the orga Part X, line 21.	dial Arra	ngements.									
	Is the organization an agent, included on Form 990, Part X		todian or other interr	nediar	y for co	ontributi	ons or other as:	set	_	Yes	┌ No	)
ь	If "Yes," explain the arrang	gement in Pa	rt XIII and complete	the fo	ollowin	g table		Γ		A mou	ınt	
c	Beginning balance					-	10	: [				
d	Additions during the year						1d	ı				
e	Distributions during the yea	ar					1e	,				
f	Ending balance						1f					
<b>2</b> a	Did the organization include a	n amount or	Form 990, Part X, I	ne 21	, for es	crow or	custodial accou	ınt	liability?	Yes	_ N	)
	If "Yes," explain the arrangen											
Раг	rt V Endowment Funds	s. Complet	(a)Current year		Prior yea		c)Two years back	i –	Three years ba		<b>e)</b> Four ye	ars back
1a	Beginning of year balance .		(C) Carrella y Carr	(-)	, , , , , , , , , , , , , , , , , , , ,		- <b>,</b>	,-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<b>,</b> ,,,	
b	Contributions											
c	Net investment earnings, gai	ns, and										
d	Grants or scholarships											
e	Other expenditures for facilit and programs	ies										
f	Administrative expenses .											
g	End of year balance											
2	Provide the estimated percen	tage of the c	urrent year end bala	nce (l	ıne 1g,	column	(a)) held as					
а	Board designated or quasi-en	dowment <b>&gt;</b>										
b	Permanent endowment ▶											
	Temporarily restricted endow The percentages on lines 2a,		should equal 100%									
	Are there endowment funds no		•	ızatıor	n that a	re held a	and administere	ed fo	or the			
	organization by	·	, and the second						,		Yes	No
	(i) unrelated organizations .									3a(i)		
	(ii) related organizations .				Cabad		-			3a(ii	)	<u> </u>
	If "Yes" on 3a(II), are the rela Describe in Part XIII the inte	_						•	[	3b		
Part					000 -		1 44 -	_	000 -			
	Complete if the organization of pro		nswered 'Yes' to F	orm '		art IV, a)	line 11a.See	FO	rm 990, Par Accumulat			ok value
	Description of pro	percy		(	Cost or c	ther basis tment)		asıs	(c)depreciati		(4)500	value
<b>1</b> a L	Land			. [			1,431,3	361				1,431,361

**b** Buildings . . . . .

**c** Leasehold improvements .

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

**d** Equipment . .

**e** Other . .

Schedule D (Form 990) 2015

2,592,541

387,657

653,522

. ▶

4,154,558

441,522

686,295

1,562,017

53,865

32,773

3,080,016

	(Form 990) 2015					Page <b>3</b>
Part VII	<b>Investments—Other Securities.</b> Cor See Form 990, Part X, line 12.	mplete if the or	ganıza	ation answered 'Y	es' on For	m 990, Part IV, line 11b.
	(a) Description of security or category			(b)Book value		Method of valuation
(4)5	(including name of security)				Costo	r end-of-year market value
	Il derivatives Held equity interests					
(3)Other	Held equity interests					
					1	
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	<b>•</b>				
Part VIII	Investments—Program Related.					
	Complete if the organization answered	'Yes' on Form	990, F	art IV, line 11c.	See Form	990, Part X, line 13.
	(a) Description of investment			(b) Book value	(c	:) Method of valuation
					Costo	r end-of-year market value
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 13 )	•				
Part IX	Other Assets. Complete if the organization		on For	m 990, Part IV, line	e 11d See F	
	(a) Descr	iption				(b) Book value
	mn (b) must equal Form 990, Part X, col (B) line 1				<b>▶</b>	
Part X	<b>Other Liabilities.</b> Complete if the organise Form 990, Part X, line 25.	anization answe	ered 'Y	es' on Form 990	, Part IV,	line 11e or 11f.
1.	(a) Description of liability	(b) Book va	lue			
Federal inco	ome taxes					
-						
		+				
		+				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25 )	<u> </u>				

1

2

b

d

3

2

b

d

3

а b

c

Part XIII

information

Schedule D (Form 990) 2015

630 48,704

> 2e 3

4c

1

2e

3

Page 4

49,334

16,456,378

16,456,378

16,113,790

48,704

16,065,086

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments . . . Donated services and use of facilities . . Recoveries of prior year grants . . . . Other (Describe in Part XIII) . . . .

Add lines 2a through 2d . .

Subtract line 2e from line 1 . .

Donated services and use of facilities .

Other (Describe in Part XIII ) . . .

**Supplemental Information** 

Prior year adjustments . . . Other losses . . . .

Add lines 2a through 2d .

Add lines 4a and 4b . .

Return Reference

Subtract line 2e from line 1 .

b

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

Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12) . . . . . . . Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

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

Investment expenses not included on Form 990, Part VIII, line 7b.

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

Total revenue, gains, and other support per audited financial statements . . . .

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

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Explanation

2c

2d

2b

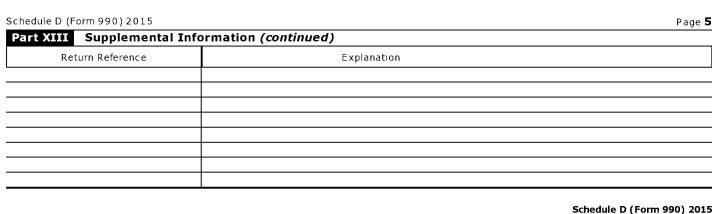
2c 2d

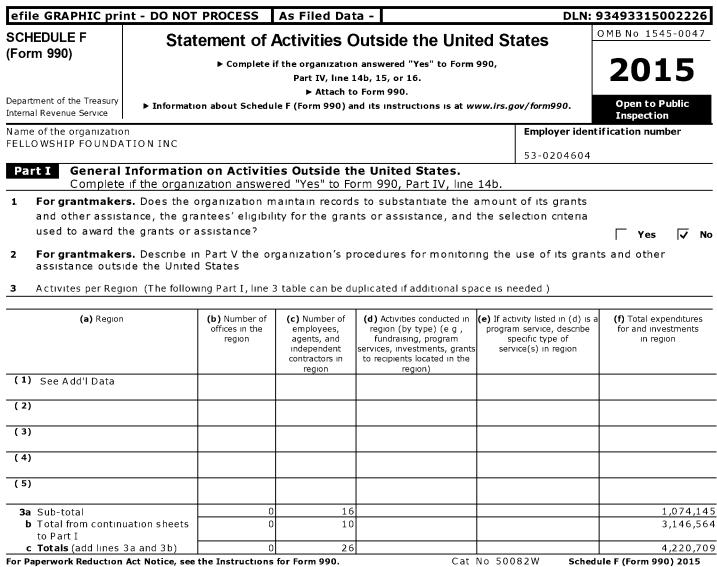
2a

48,704

4c 16,065,086 Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional

Schedule D (Form 990) 2015





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

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

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

tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . >

10

(7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Schedule F (Form 990) 2015

Part III can be	Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
	Sub-Saharan Africa - Angola, Benin, Botswana, Burkina Faso,	1	48,000	Wire					
( 2) Assisting earthquake victims in Nepal	South Asia	1	40,000	wire					
(3)									
(4)									
( 5)									
(6)									

( 2) Assisting earthquake victims in Nepal	South Asia	1	40,000	wire		
( 3)						
(4)						
( 5)						

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

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)

Νo

✓ Yes

Schedule F (Form 990) 2015

OF GRANT FUNDS AS WELL AS PROGRAMMATIC ACCOMPLISHMENTS FUNDED BY THE GRANT

THE GRANTEE ORGANIZATION MUST SUBMIT BOTH A FINANCIAL AND NARRATIVE PROGRAMMATIC STATEMENT AT THE CONCLUSION OF THE GRANT PERIOD REPORTING ON A LINE ITEM BASIS ACTUAL EXPENDITURES

Page 5

Schedule F (Form 990) 2015

Part I. Line 2

Software ID: Software Version:

**EIN:** 53-0204604

Name: FELLOWSHIP FOUNDATION INC

Form 990 Schedule F F	Part I - Activit	ties Outside T	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,	0	2	Located in Region	Encouraging small leadership groups meeting for prayer, relationship building and encouragement Mentoring youth based on the principles and precepts of Jesus of Nazareth including literacy, appropriate skills for their community and active service A ddressing the needs of the poor, building peopleto-people relationships worldwide, connecting resources to need, and encouraging opportunities of reconciliation and building relationships of trust beyond traditional lines Much of this is carried on by volunteers from all walks of life Develop mentoring work in the spirit of Jesus with at-risk young people in the underdeveloped nations of the world Encourage and facilitate meetings on a regional and individual basis to discuss the core teachings of loving God and loving one another	319,062
East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	0	6		Encouraging small leadership groups meeting for prayer, relationship building and encouragement Mentoring youth based on the principles and precepts of Jesus of Nazareth including literacy, appropriate skills for their community and active service A ddressing the needs of the poor, building peopleto-people relationships worldwide, connecting resources to need, and encouraging opportunities of reconciliation and building relationships of trust beyond traditional lines Much of this is carried on by volunteers from all walks of life Develop mentoring work in the spirit of Jesus with at-risk young people in the underdeveloped nations of the world Encourage and facilitate meetings on a regional and individual basis to discuss the core teachings of loving God and loving one another	249,090
Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgium	0	2		Encouraging small leadership groups meeting for prayer, relationship building and encouragement Mentoring youth based on the principles and precepts of Jesus of Nazareth including literacy, appropriate skills for their community and active service A ddressing the needs of the poor, building people-to-people relationships worldwide, connecting resources to need, and encouraging opportunities of reconciliation and building relationships of trust beyond traditional lines Much of this is carried on by volunteers from all walks of life Develop mentoring work in the spirit of Jesus with at-risk young people in the underdeveloped nations of the world Encourage and facilitate meetings on a regional and individual basis to discuss the core teachings of loving God and loving one another	3,000

Form 990 Schedule F				1	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa - Algeria, Bahrain, Djibouti, Egypt,	0	0	Program Services, Grants to Recipients Located in Region	Encouraging small leadership groups meeting for prayer, relationship building and encouragement Mentoring youth based on the principles and precepts of Jesus of Nazareth including literacy, appropriate skills for their community and active service Addressing the needs of the poor, building peopleto-people relationships worldwide, connecting resources to need, and encouraging opportunities of reconciliation and building relationships of trust beyond traditional lines Much of this is carried on by volunteers from all walks of life Develop mentoring work in the spirit of Jesus with at-risk young people in the underdeveloped nations of the world Encourage and facilitate meetings on a regional and individual basis to discuss the core teachings of loving God and loving one another	360,000
North America - Canada and Mexico, but but not the United States	0	0	Program Services, Grants to Recipients Located in Region	Encouraging small leadership groups meeting for prayer, relationship building and encouragement Mentoring youth based on the principles and precepts of Jesus of Nazareth including literacy, appropriate skills for their community and active service Addressing the needs of the poor, building people-to-people relationships worldwide, connecting resources to need, and encouraging opportunities of reconciliation and building relationships of trust beyond traditional lines Much of this is carried on by volunteers from all walks of life Develop mentoring work in the spirit of Jesus with at-risk young people in the underdeveloped nations of the world Encourage and facilitate meetings on a regional and individual basis to discuss the core teachings of loving God and loving one another	10,000
Russia & the Newly Independent States - Armenia, Azerbijan, Belarus,	0	1	Program Services, Grants to Recipients Located in Region	Encouraging small leadership groups meeting for prayer, relationship building and encouragement Mentoring youth based on the principles and precepts of Jesus of Nazareth including literacy, appropriate skills for their community and active service Addressing the needs of the poor, building people-to-people relationships worldwide, connecting resources to need, and encouraging opportunities of reconciliation and building relationships of trust beyond traditional lines Much of this is carried on by volunteers from all walks of life Develop mentoring work in the spirit of Jesus with at-risk young people in the underdeveloped nations of the world Encourage and facilitate meetings on a regional and individual basis to discuss the core teachings of loving God and loving one another	500

Form 990 Schedule F F				(2) 75 1	/6\ T - t - 1
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America - Argentina, Bolivia, Brazil, Chile, Columbia, Ecuador,	0	1	Program Services, Grants to Recipients Located in Region	Encouraging small leadership groups meeting for prayer, relationship building and encouragement Mentoring youth based on the principles and precepts of Jesus of Nazareth including literacy, appropriate skills for their community and active service A ddressing the needs of the poor, building peopleto-people relationships worldwide, connecting resources to need, and encouraging opportunities of reconciliation and building relationships of trust beyond traditional lines Much of this is carried on by volunteers from all walks of life Develop mentoring work in the spirit of Jesus with at-risk young people in the underdeveloped nations of the world Encourage and facilitate meetings on a regional and individual basis to discuss the core teachings of loving God and loving one another	28,281
South Asia - Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal,	0	4	Program Services, Grants to Recipients Located in Region	Encouraging small leadership groups meeting for prayer, relationship building and encouragement Mentoring youth based on the principles and precepts of Jesus of Nazareth including literacy, appropriate skills for their community and active service Addressing the needs of the poor, building peopleto-people relationships worldwide, connecting resources to need, and encouraging opportunities of reconciliation and building relationships of trust beyond traditional lines Much of this is carried on by volunteers from all walks of life Develop mentoring work in the spirit of Jesus with at-risk young people in the underdeveloped nations of the world Encourage and facilitate meetings on a regional and individual basis to discuss the core teachings of loving God and loving one another	104,212
Sub-Saharan Africa - Angola, Benin, Botswana, Burkina, Faso,	0	10	Program Services, Grants to Recipients Located in Region	Encouraging small leadership groups meeting for prayer, relationship building and encouragement Mentoring youth based on the principles and precepts of Jesus of Nazareth including literacy, appropriate skills for their community and active service Developing schools and youth leadership initiatives Addressing the needs of the poor, building people-to-people relationships worldwide, connecting resources to need, and encouraging opportunities of reconciliation and building relationships of trust beyond traditional lines Much of this is carried on by volunteers from all walks of life Develop mentoring work in the spirit of Jesus with at-risk young people in the underdeveloped nations of the world Encourage and facilitate meetings on a regional and individual basis to discuss the core teachings of loving God and loving one another	3,146,564

(q) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) Sub-Saharan Africa -SCHOOLS IN 2.810.000 Wire Angola, Benin, kampala, UGANDA Botswana, Burkina, Faso,

(i) Method of

	Middle East and	Building a school in	360,000	Wire	1	1
	North Africa	lebanon				
	Central America and	Hospital in	319,875	Wire		
	the Carıbbean -	Guatemala				1
	Antigua & Barbuda,					1
	Aruba Bahamas					1

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

Brunei, Burma,

Cambodia,

land children in

Bangkok

(b) IRS code

JA ruba, Bahamas, East Asia and the Home for 230,000 Wire

Pacific - Australia, marginalized women

(g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) 120,000 Wire Sub-Saharan Africa -Works with young Angola, Benin, people in Ethiopia Botswana, Burkina, Faso, 50,761 Wire Sub-Saharan Africa -Orphan care center Angola, Benin, Botswana, Burkina, Faso, Sub-Saharan Africa -Provide a library and 35,000 Wire computers for school

13,000 Wire

(i) Method of

Angola, Benin, Botswana, Burkina, children Faso,

Ministry to young

people in slums of

Nairobi

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

Sub-Saharan Africa -

Botswana, Burkina,

Angola, Benin,

Faso,

(b) IRS code

(b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) North America -Literacy and 10.000 Check Canada and Mexico, leadership for women but but not the United in Todos Santos States Sub-Saharan Africa -MINISTRY WORK 8,000 Wire Angola, Benin,

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

Botswana, Burkina,

lFaso,

efile GRAPHIC prin	t - DO NOT	PROCESS AS	Filed Data -				DLN: 9	93493315002226
Schedule I (Form 990)  Department of the Treasury Internal Revenue Service		Go\ Comple	vernments and te if the organization	Individuals in answered "Yes," on Fo Attach to Form 990.	O Organizations the United Stat rm 990, Part IV, line 21 o	<b>es</b> or 22.	2	No 1545-0047  O 15  pen to Public Inspection
Name of the organization							Employer identificati	on number
FELLOWSHIP FOUNDAT							53-0204604	
Does the organizate the selection criter Describe in Part IV  Part II Grants and Grants and Grants are grants.	ion maintain ia used to aw the organiza Other Assista	vard the grants or as ation's procedures fo ance to Domestic Or	nate the amount of the sistance?or monitoring the use ganizations and Dome	of grant funds in the Ur			orm 990, Part IV, line 2	<b>√ Yes N</b> 1, for any recipient
(a) Name and addres organization or government		( <b>b)</b> EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data T	able							
		-						
		+						
2 Enter total number	of section 50	)1(c)(3) and govern	ment organizations li	sted in the line 1 table .				8
3 Enter total number	of other orga	nızatıons lısted ın tl	ne line 1 table				•	0

Page 2

Schedule I (Form 990) 2015

Schedule I (Form 990) 2015

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

Part IV Return Reference Explanation

THE GRANTEE ORGANIZATION MUST SUBMIT BOTH A FINANCIAL AND NARRATIVE PROGRAMMATIC STATEMENT AT THE CONCLUSION OF ITHE GRANT PERIOD REPORTING ON A LINE ITEM BASIS ACTUAL EXPENDITURES OF GRANT FUNDS AS WELL AS PROGRAMMATIC

## **Additional Data**

(a) Name and address of

Colorado Springs, CO 80919 World Resources Group

West Palm Beach, FL 33401 Youth Mentoring Worldwide

509 Flamingo Dr

116 S Mitchell Street Cadillac, MI 49601

305

**(b)** EIN

65-0970260

46-3373660

Software ID: Software Version:

(c) IRC section

EIN: 53-0204604

Name: FELLOWSHIP FOUNDATION INC.

(d) A mount of cash

54,462

110,000

(e) A mount of non-

(g) Description of

(h) Purpose of grant

or assistance

Supportive Ministry

Supportive Ministry

Supportive ministry

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

organization	ıf applıcable	grant	cash	(book, FMV, appraisal,	non-cash assistance
or government			assistance	other)	

or government				assistance	Stiller,	
Joy to the World Foundation	72-1551621	501c3	7,500			

Joy to the World Foundation	72-1551621	501c3	7,500		

Joy to the World Foundation 5550 Tech Center Drive Ste	72-1551621	501c3	7,500		

501c3

501c3

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) E 0 4 0 - - - ministry

1501 Goldenrod Lane Keller,TX 76248	45-31/2958	50103	5,000		Supportive ministry
Embrace Grace	45-5202711	501c3	23,000		Supportive ministry

7.500

Supportive ministry

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

501c3

773 Lonesome Dove Drive Hurst, TX 76054

93-1300690

Friends of the Children

44 NE Morris Street Portland, OR 97212

(e) Amount of non- (f) Method of valuation (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Daruvian Dartners 27-3133129 501c3 28,281 Supportive ministry

7.200

Supportive ministry

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

501c3

FCIUVIAIIF	arthers			
PO Box 73	5			
Delano, MN	55328			
Redemption Works				

International
PO Box 235764
Encinitas.CA 92024

20-0096384

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493315002226 Compensation Information OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 2015 ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ➤ Attach to Form 990. Open to Public Department of the ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Treasury Inspection **Employer identification number** Name of the organization FELLOWSHIP FOUNDATION INC 53-0204604 Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes 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? 4a Nο 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Νo Participate in, or receive payment from, an equity-based compensation arrangement? 40

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

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

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

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

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

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

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

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

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

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

compensation contingent on the revenues of

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

compensation contingent on the net earnings of

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

The organization?

The organization?

ın Part III

Any related organization?

Any related organization?

section 53 4958-6(c)?

8

5a

5b

6a

6b

7

Νo

Νo

Νo

Νo

Νo

## Schedule J (Form 990) 2015

Cat No 50053T

Page 2

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

1 Henry DeneenAssociate

139.789

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

57,175

196.964

Schedule J (Form 990) 2015 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

provided for ordained ministers who participate in a church partnership program that provides pastoral activities outside of the church proper

Schedule J (Form 990) 2015

Part I, Line 1a

efile GRAPH	IC prir	nt - DO N	NOT PROC	ESS	As	Filed Dat	a -				DLN:	9349	33150	02226
Schedule L			Tra	nsac	tior	s with	Intereste	d Person	S			омві	No 1545	5-0047
(Form 990 or 9	90-EZ)		"Yes" on	Form 99	90, Pa	art IV, lines	ganization an 25a, 25b, 26, t V, line 38a d	27, 28a, 28b, c	or 28c,			7	01	5
		<b>A.</b> 7.	.f				90 or Form 99							
Department of the Treasury		▶11	ntormation a	about So		•	990 or 990-EZ <u>v /form990</u> .	) and its instru	actions	s is at			en to P nspect	
nternal Revenue S														
Name of the or FELLOWSHIP FOU									Er	nploye	r identi	ificatio	n numbe	r
										3-020				
								(4), and 501(d 25a or 25b, or					40b	
		qualified p						fied person an			cription	-		rected?
						10	ganızatıon			tran	saction		Yes	No
									+					
3 Enterthe	amount o	of tax incu	rrod by orga	nization	. man	agore or die	auglified per	sons during the	. voar	undor	caction			
								• • • •			<b>▶</b> \$			
<b>3</b> Enter the	amount o	of tax, ıf ar	ny, on line 2,	, above,	reım	bursed by tl	ne organizatio	on			<b>&gt;</b> \$			
Part II Lo	anc to	and/or	From In	toroct	od F	lorconc								
Co	mplete i	f the organ	nization ans	wered "\	Yes"	on Form 99	0-EZ, Part V , e 5 , 6 , or 22	line 38a, or Fo	orm 99	0, Pai	t IV, lii	ne 26, d	or If the	
(a) Name of interested person	V v	ationship with nization	(c) Purpose of loan	(d) Lo or fror organız	n the		(e)O riginal principal amount	<b>(f)</b> Balance due		In ult?	Appro by boa	oved ard or	(i)Wr agreer	
				То		From			Yes	No	Yes	No	Yes	No
										-				
										-				
														1
										1		+		-
			▶ s										l	
	ants o	r Assista	ance Bene	efiting	Int	erested F	Persons.							
		if the org	ganızatıon	answei	red "			rt IV, line 27	<b>.</b>					
(a) Name of pers			Relationshi erested pers	on and t		(c) A mount	ofassistance	e <b>(d)</b> Type	ofass	stance	e (e)	) Purpo:	se of ass	sistance
			organiza	LIOTI										
					$\dashv$									
					$\dashv$			+			-			
					$\dashv$			+						
								1						
or Paperwork Re	duction	Act Notice,	see the Insti	ructions	for F	orm 990 or 9	90-EZ.	Cat No 50056A		Sche	lule L (F	orm 99	0 or 990-	-EZ) 201!

(2) DAVID COE

(4) ELENA COE

(5) JANICE COE

(7) Anna Jubb

(6) Courtney Corder

(8) Meghan Smith

(9) doug Burleigh

(10) Lee Corder

Part V

(3) TIMOTHY COE

lorganization's revenues?

Yes

Page 2

No

Nο

Nο

Νo

Νo

Nο

Nο

Nο

Nο

Νo

Nο

Schedule L (Form 990 or 990-EZ) 2015

Dusiness iransactions in	business iransactions involving interested Persons.									
Complete if the organization	answered "Yes" on F	form 990, Part IV, lin	e 28a, 28b, or 28c.							
(a) Name of interested person	(b) Relationship	(c) A mount of	(d) Description of transaction							
	between interested	transaction								

	person and the organization
(1) ALDEN COE	RELATIVE OF DOU COE

**Supplemental Information** 

Return Reference

tion DOUG RELATIVE OF DOUG

RELATIVE OF DOUG

RELATIVE OF DOUG

Relative of Doug Coe

Relative of Doug Coe

ReLATIVE OF DOUG

ReLATIVE OF DOUG

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

Relative of Merle Smith

COF

IC O F

COE

COE

COE

COE

RELATIVE OF DOUG

23,760 COMPENSATION 103,296 COMPENSATION 99,770 COMPENSATION 30,632 COMPENSATION 23,660 COMPENSATION

32,685 Compensation & housing

14,350 COMPENSATION

40,479 COMPENSATION

15,000 Housing

17,750 Housing

**Explanation** 

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493315002226 **SCHEDULE M** OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization FELLOWSHIP FOUNDATION INC 53-0204604 Types of Bronerty

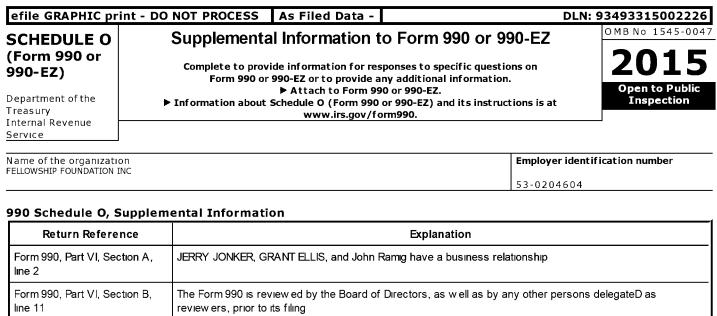
Part I Types of Property					
		(a) Check If applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art			-	
2	Art—Historical treasures .				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded $oldsymbol{.}$	Х	32	337,419	FMV ON DATE OF GIFT
10	Securities—Closely held stock .				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential .				
16	Real estate—Commercial				

7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded .	Х	32	337,419	FMV ON DATE OF GIFT
10	Securities—Closely held stock .				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential .				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies .				
21	Taxıdermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► ()				
26	Other ▶ ()				
	Other ▶ ()				
28	Other ▶ ()				
				_	1 1

Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a

Νo **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . 32a Yes **b** If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) (2015)



990 Schedule O, Supplemental Information Return Reference

	THE ORGANIZATION ANNUALLY DISTRIBUTES A COI QUESTIONNAIRE TO ALL OFFICERS, DIRECTORS AND KEY
ı	EMPLOYEES AND REQUIRES ALL RESPONDENTS TO CONFIRM THAT THEY HAVE READ AND ARE FAMILIAR WITH THE
ı	POLICY, AND WILL DISCLOSE ALL POSSIBLE CONFLICTS MANAGEMENT ENSURES THAT RESPONSES ARE RECEIVED
	FROM EVERYONE, AND FOLLOWS UP ON ANY POTENTIAL CONFLICTS THAT MIGHT BE DISCLOSED
ı	

Explanation

Form 990. Part VI Salaries for all employees, regardless of title, are approved as part of the annual budget approval process by the Budget Committee, a committee appointed by the Board of Directors Section B. line 15a Once the Budget Committee has approved the budgets, they are presented to the board for final approval. The minutes reflect the budget committee's recommendation and the approval of the board For Question 15a, while the organization does not strictly use comparabilit y data for its top management official, that is because he receives a very small salary, w ell below the market range for a similar organization. For Question 15b, the guestion is a nsw ered "no" because there are no persons listed in Form 990. Part Viii that fall under th e "other officer or "key employee" classification

Return Reference Explanation

Form 200 Port VI. Section C. Ino. 10 governing documents, conflict of interset holicy, and financial attempts are not made evaluable.

990 Schedule O, Supplemental Information

Expenses

	governing documents, conflict of interest policy, and financial statements are not made available to the public
PArt IX, Line 18, Statement of Functional	3 officials received over \$1,000 in travel or entertainment expenses

990 Schedule O, Supplemental Information

Return Reference Explanation

Form 990, Part XII, Line 2C

The audit oversight process remains unchanged