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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2015

Open to Public Inspection

			1					
A F	or the	e 2015 ca	lendar year, or tax year beginnin	g 01-01-2015 , and ending 12-31-20	15			
_		applicable	C Name of organization COTTON INCORPORATED			D Emplo	yer ide	ntification number
☐ Add	lress c	change	% DAVID BYRD			62-0	78601	8
∏ Naı	ne ch	nange	Doing business as					
Init	ıal ret	turn	Number and shoot (see D.O. have fire	-d		E Teleph	one num	nber
Fin		erminated	6399 WESTON PARKWAY	ail is not delivered to street address) Room/su	ıite	(919)	678-2	2220
┌ Am	ended	d return	City or town, state or province, coun	ntry, and ZIP or foreign postal code			,	
Г _{Арр}	licatio	on pending	CARY, NC 27513			G Gross	receipts	\$ 77,334,958
			F Name and address of prin	cıpal officer	H(a)]	s this a group	returr	
			DAVID N BYRD 6399 WESTON PARKWAY			subordinates?		_Yes _ No
			CARY, NC 27513		1	Are all subord ncluded?	ınates	□Yes □No
							n a list	(see instructions)
I Ta	x-exe	empt status	「 501(c)(3)	insert no) 4947(a)(1) or 527	H(c)	Group exemp	tion nu	mber ►
J W	ebsit	te:► WW	W COTTONINC COM					
K Forr	n of o	organization	Corporation Trust Association	n	L Year	of formation 19	967 M	State of legal domicile TN
Pa	rt I	Sum	mary					
		Briefly des SEE SCHI	scribe the organization's mission	or most significant activities				
a	=	SEE SCHI	EDULE O					_
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Governance		Check th	ils box 🛐 II tile organization dis	continued its operations of disposed t	n more th	all 25 % Of its	iiet as	sets
	3	Number	of voting members of the governi	ng body (Part VI, line 1a)			3	102
8	4	Number	of independent voting members o	f the governing body (Part VI, line 1b)			4	102
Activities &	5	Total nur	mber of individuals employed in c	alendar year 2015 (Part V, line 2a)			5	145
₽CI	6	Total nur	mber of volunteers (estimate if ne	ecessary)			6	102
•	7a	Total unr	related business revenue from Pa	art VIII, column (C), line 12			7a	0
	Ь≀	Net unrela	ated business taxable income fro	m Form 990-T, line 34			7b	
						Prior Year		Current Year
g _i	8			ne 1h)		77,118,		77,334,958
enue	9	Progra	am service revenue (Part VIII, li	ne 2g)		77,118,	0	77,334,958
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Use Only

Firm's address \blacktriangleright 8401 GREENSBORO DRIVE SUITE 800

MCLEAN, VA 22102
May the IRS discuss this return with the preparer shown above? (see instructions)

Phone no (703) 893-0600

. ▼Yes □No

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

COTTON INCORPORATED, FUNDED BY U.S. GROWERS OF UPLAND COTTON AND IMPORTERS OF COTTON AND COTTON TEXTILE PRODUCTS, IS THE RESEARCH AND MARKETING COMPANY REPRESENTING UPLAND COTTON. THE PROGRAM IS DESIGNED AND OPERATED TO IMPROVE THE DEMAND FOR AND PROFITABILITY OF COTTON.

_Yes No

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

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

□Yes □No

If "Yes," describe these changes on Schedule O

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

4a (Code

) (Expenses \$

including grants of \$

) (Revenue \$

,

agricultural research committee Resources were diverted from longer term investments to more immediate, high-impact investments in 2015 to counter the present market. Significant program activities of the year included. U.S. cotton producers raised the bar in sustainability. Ten percent of U.S. cotton producers. completed the Natural Resource Survey, which documented improvements in soil, water and fertilizer and demonstrated how stewardship is tied to increased yield Fiber quality breakthroughs were introduced. Using breeding tools, germplasm, and trained scientists from the public sector, all of the major cotton planting seed companies now offer varieties with fiber length and strength at the top of the CCC loan premiums. Part of the support for these introductions comes from long term fiber and spinning testing by the Cotton Incorporated Product Evaluation and Product Development laboratories. Future fiber advancements are also likely with new discoveries in fiber quality. fiber length can be altered with simple pathway manipulations of vitamin C content, and spectrographic evaluation of cellulose. crystallinity allows simultaneous increase in strength and elongation "Future Farm" utilizes big data to improve field management and breeding. In 2015, the Future Farm concept was elevated with High-throughput phenotyping for cotton breeders and various management tools field tested for cotton growers. Data collected during harvest to improve ginning was evaluated and shown to be promising. Shifting microbial populations with surface residues that moderate daily temperature swings was shown to improve soil and cotton health. Several high impact deliverables advanced the breeding of higher yield cotton varieties. The week long Cotton Breeder Tour was attended by 135 people. A 64k SNP-Chip was released to facilitate marker aided breeding. The Upland cotton genome was published and immediately put to use in cotton breeding. Growers converted high yield potential varieties into bales. To support yield gain management, significant deliverables included expanding variety testing and reporting on specialized software, increasing implementation of irrigation management in the Mid-South and South East, multiple states coordinating insect control research and outreach, and expanding information regarding soil health and fertility. We delivered resistant weed control programs for all major growing areas. University and USDA-ARS cooperators created workable resistant weed control prescriptions that include diverse herbicides, cover crops, and weed seed suppression. The cooperators also uncovered new resistance to Liberty and Reflex/Valor herbicides, created a clear understanding of cottons yield sensitivity to auxin herbicide, both rate and timing, and successfully elevated herbicide resistance stewardship within the farming and weed scientist communities Electronic outreach was expanded with new and continuing platforms. The Cotton Cultivated Web site was launched to translate 40+ years of AERD investment into producer expertise "Focus on Cotton" Web site further expanded in 2015 reaching 70,000 viewers since early 2013 Various university electronic outreach tools were extended across the Cotton Belt Cotton diseases were successfully managed despite growing threats Ongoing efforts in Fusarium, Target Spot, Verticillium, and viruses limited the damage from these diseases Two-gene Nematode host plant resistance was released by multiple seed companies Bacterial blight research was expanded with new technologies to detect and identify the bacteria in seed and leaves. A brush-delinting replacement for acid-delinting was introduced to cotton breeders. Acid-delinting poses a safety concern to seed, workers, and the environment. Multi-year development and testing of prototypes led to commercial adoption of breeder-scale brush-delinting. The Cotton Winter Nursery was relocated from Mexico to Costa Rica. An experienced on-site manager was hired and a suitable site was established that is safe and convenient for breeders and favorable for seed production. The ULGCS research necessary to write and submit documents for full U.S. deregulation was completed.

4b (Code

) (Expenses \$

including grants of \$

) (Revenue \$

The Global Supply Chain Marketing committee consists of two divisions Cotton Management System Software (CMS) and Global Supply Chain Marketing (GSCM) The CMS development and maintenance teams released MILLNET software updates that allowed users to handle customer requests. The core of the MILLNET 5.0 software was completed with testing and final conversion programs being targeting in 2016. The CMS teams assisted customers over 3,700 times during the year and conducted 51 service visits. CMS also added seven new MILLNET licenses representing 500,000 bales of new cotton being managed by EFS. The GSCM division conducted more than 760 meetings with 480 companies in 30 different countries during 2015. Marketing objectives for these meetings included the presentation of trend information, discussion of new technology innovations and product concepts, technical assistance, and discussion of the Cotton LEADS program and the related topic of the sustainability of U.S. cotton. In working with industry, the division executed 21 confidential disclosure agreements, 10 technology licensing agreements, and 76 trademark usage agreements for use of the Seal of Cotton or one of the many technology trademarks owned by Cotton Incorporated Staff of GSCM participated in 17 global tradeshows and events in 2015, which resulted in opportunities to meet with over 1,400 industry contacts during these events. In addition to attending tradeshows, specific technology-scouting company visits were conducted. Marketing cotton technologies and developments for outerwear remains a priority because cotton fabrics are not typically considered suitable for outerwear apparel. Cotton is not thought to have performance attributes like repellency, wind resistance, and insulating properties. To counter these assumptions, a marketing package with information on insulating cotton fabrics was developed. The fabrications featured in this package were developed by Cotton Incorporateds Product Development team. The marketing message focuses on the technical fabric constructions and highlights performance attributes including low air permeability (indicating wind resistance) and low heat transfer (indicating insulating properties) Through two major efforts in 2015, division staff marketed the sustainability and responsible production aspects of U.S. cotton production. The first effort is the Farm Tour program, which in 2015 involved 59 attendees from 31 retailer and brand companies. The tour covers a visit to farms, direct meetings with cotton producers, a tour of a warehouse and a gin and finally, a tour of the USDA Memphis Classing facility. The second major effort to address sustainability is through participation in the Cotton LEAD program. In its second full year, the program added more than 105 partners in 2015 and now encompasses 354 partners in 25 companies. Staff in the division worked closely with the other organizations in the Cotton LEADS program to conduct six regional meetings with program partners in Shanghai, Hong Kong, Mexico City, Lima, Peru, Tokyo, and North Carolina. Lastly, the Cotton University marketing site has more than 13,500 registered users and participation from 1,977 companies. A new "Business Center" was launched in late 2015 to provide a stronger and more direct engagement with industry decision makers Through Cotton University, webinars were offered in 2015 There were also 50 technical workshops conducted in 2015 with 1,757 industry participants representing 175 different brands and retailers

4c (Code

4e

) (Expenses \$

including grants of \$

) (Revenue \$

The Consumer Marketing Committee is comprised of the Consumer Marketing Division and the Corporate Strategy and Program Metrics The Consumer Marketing Committee is comprised of the Consumer Marketing Division and the Corporate Strategy and Program Metrics Division (CSPM). The Consumer Marketing Division is tasked with creating awareness of, and interest in, cotton among consumer and trade audiences. This is accomplished through an integrated platform of traditional and digital advertising, engagement with the media, and activities and events that directly contact consumers. In April, Cottons long-running celebrity-rich "The Fabric of My Life" campaign was completed. The new, highly personal and emotional campaign, "Cotton. Your Favorite for a Reason" launched immediately after the completion of the celebrity ad series. "Favorites" was based on over a year of consumer research which underscored the need to find a way to get consumers to truly care what their clothes are made of By using 15 individuals as story-tellers, we invited consumers to hear real stories from real people talking about their affinity and relationships with their favorite cotton-rich apparel. The campaign utilized 30 second and 15 second commercials appearing on both television and online, plus a series of video 'stories' that focus on each individual story and garment separately. Recognition increased by 4% since the first wave of campaign activity to 27% averaging 26% recognition among females and 31% among fashion females. In 2015, Internet Search advertising played an increasing role as Cotton sought out opportunities to align the proper audiences with relevant content. Another critical component in the Cotton digital program was the increasing reliance on third-party media partners to produce and place cotton content on their websites and across the internet. A new trade print campaign was also produced and launched in 2015 with ads focusing on sustainability, services, innovations and consumer preference. Cotton's generic promotional program in China continued to thrive. This years videos featuring two attractive young Chinese 'key opinion leaders' achieved more than 20 million plays by mid-October. The Blue Jeans Go Green (BJGG) denim recycling program continued its long string of successful years. Sheryl Crow represented the program as spokesperson in 2015. An up and coming young celebrity, Anna Sophia Robb, also acted as a social media and media spokesperson for BJGG. In 2015 Madewell, a denim-focused retailer with over 100 outlets, initiated an ongoing denim collection program supported by marketing outreach Public Relations (PR) was responsible for overseeing public outreach for Sheryl Crow's support of the Blue Jeans Go Green (BJGG) denim recycling program, including a memorial 10th anniversary Habitat for Humanity build of ten houses in New Orleans in mid-summer. Ms. Crow also served as a spokesperson for the program in a Satellite TV Media Tour for cotton this past spring. Other company activities were featured in continuous PR outreach along with sustainability messaging, Lifestyle Monitor articles, and reports on economic and behavioral research findings Strategic Alliances managed a four part series of full site take-over cotton promotions on Rue La La, which is a major digital flash sale site for contemporary merchandise The program reaches Rue La Las large (14 million+), highly targeted (young female clothing enthusiasts) consumer audience with cotton messaging and retail boutiques full of interesting, high quality cotton offerings for women, men, kids and home. The program was designed to take the Favorites theme and messaging directly to the consumer at the point of sale CSPM led efforts to identify opportunities and threats for cotton using market intelligence data gathered through ongoing studies of consumer attitudes from the Lifestyle Monitor survey, assessments of cotton's share at retail through the Retail Monitor survey, evaluations of consumer reactions to reductions of cotton fiber content in apparel and home textiles products at retail through the Customer Comments Research study, and comprehensive global economic research and analysis. Work completed by CSPM during 2015 includes, but is not limited to the review of data on more than 100,000 products offered at retail in the U.S. in order to evaluate cotton's market share in key categories and to communicate (to internal staff) those areas that are under threat, the evaluation of 6,000 U S consumers to understand key trends and market opportunities for cotton products in the areas of denim, fiber substitution, online shopping, odor issues, cottonseed oil awareness and back-to-school shopping, the continued analysis of customer comment research that includes over 625,000 customer reviews, posted from 2010 to first half of 2015 on 50,000+ adult and children's apparel, home textiles, and intimate products, the management of global quantitative research to garner insights into consumers expectations for cotton in their feminine hygiene products, and the delivery of market outlook presentations related to changes in cotton prices and the impact on the supply chain in the U.S. and internationally CSPM also designed and developed a fabric weight study to assess consumer's preferred fabric weights in their clothes as well as a new brand tracking study to measure recognition and impact of Cotton Incorporateds new ad campaign and marketing efforts CSPM responded to nearly 200 information requests, participated in over 225 meetings and presentations, authored more than 150 publications, videos, and podcasts, and worked on more than 40 projects

0

4d Other program services (Describe in Schedule O)

Total program service expenses >

(Expenses \$ 0 including grants of \$

0)(Revenue\$

0)

Part IV	Checklist	of Rec	uired	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		No
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		
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-19$? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
L5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

	1990 (2013)				Page
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V				_
	eneck if Schedule o contains a response of flote to any line in this fart v	<u></u>	Ť	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a	145			
b	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?		l c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	145			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	s? 2	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3	a		Νo
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other au over, a financial account in a foreign country (such as a bank account, securities account, or other financial occount)?	ncial	la	Yes	
b	If "Yes," enter the name of the foreign country ►MX, CH, HK, JA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acc (FBAR)	ounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	. 5	ia		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	tion? 5	ь		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	. 6	ia i		No
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or gifts	.		
7	were not tax deductible?	6	ь		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go services provided to the payor?	ods and 7	'a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		'b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was in file Form 8282?		,		
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 con		'e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	t? 7	'f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Formequired?		'g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization form 1098-C?		'h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at a during the year?		8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	<u> </u>	a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	. 9	ь		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12 10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				-
11	Section 501(c)(12) organizations. Enter				
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 104	41?	2a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructional information the organization must report on Schedule O	ctions for	3a		
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?	14	4a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14	4b		

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI	•		<u> ~ </u>
Se	ection A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 102			
	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 102			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			_
ь	more members of the governing body?	7a 7b		No No
8	or persons other than the governing body?			
	year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
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		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure	TOD		
<u> </u>	List the States with which a copy of this Form 990 is required to be filed▶			
	FL , MI , NY , NC , TN			
18	Cantian C104 remission on arrangements to make its Forms 1022 (as 1024 if applicable) 000 and 000 T (F01/a)			
	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			

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

State the name, address, and telephone number of the person who possesses the organization's books and records ►DAVID BYRD 6399 WESTON PARKWAY CARY, NC 27513 (919) 678-2220

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	tion (han d in is l	one b both	ox, an c	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)	organization and related organizations
See Additional Data Table										
										Form 990 (2015)

	(A) Name and Tıtle	more t	tion han o n is	one l both	oox, an d	heck unless officer stee)	,	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)		mated : of other :nsation n the	
		for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-M1SC)	rel	ation and ated zations
See Add	ditional Data Table											
											<u> </u>	
											<u> </u>	
											<u> </u>	
1b 9	Sub-Total						•					
	Total from continuation shee	-			•	•			2,938,169	0		990,345
2 T	otal (add lines 1b and 1c) . otal number of individuals (ii 100,000 of reportable comp	ncluding but not l	ımıted	to the	se l	ıste	d abov	e) wh	· · · · · · · · · · · · · · · · · · ·			990,343
											Yes	No
	old the organization list any f						emplo	yee,	or highest comper	nsated employee		
0	n line 1a? <i>If "Yes," complete</i>	Scneaule I for suc	:n indivi	auai	•	•		•		[3	No

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

Section B. Independent Contractors

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.

(A) Name and business address	(B) Description of services	(C) Compensation
BDO USA LLP, 5430 Wade Park Blvd Suite 300 RALEIGH, NC 27607	Audit/Tax Services	113,058
DONALD BAILEY, 7620 Rock Quarry Rd RALEIGH, NC 27610	Importer Support Con	155,298
THE NIELSON COMPANY, 85 BROAD STREET NEW YORK, NY 10014	Market Research	265,700
PR NEWSWIRE ASSOCIATION, 350 HUDSON ST SUITE 300 NEW YORK, NY 10014	DISTRIBUTION&MONITOR	245,435
HALL AND PARTNERS USA, 711 3RD AVENUE 19TH FLOOR NEW YORK, NY 10017	MARKET CONSULTANT	105,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 🕨 5

Part V	"	Statement of Rev		see or note to any li	ne in thic Dart VIII			_
		Check if Schedule O	ontains a respon	ise or note to any ii	(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from
						function revenue	revenue	tax under sections 512-514
s ts	1a	Federated campaigns	1a					
tributions, Gifts, Grants Other Similar Amounts	ь	Membership dues .	1b					
ē, G	С	Fundraising events .	1c					
Giffs, nilar A	d	Related organizations	1d					
s, 6 imil	e	Government grants (contri	butions) 1e	119,260				
tion sr S	f	All other contributions, gifts similar amounts not include		77,215,698				
ibu ¥e	q	Noncash contributions inclu						
Contributions, and Other Sim		1a-1f \$ Total. Add lines 1a-1	<u>.</u>		77,334,958			
ರ ಕ		Total. Add lines 1a-1		• • •	77,334,330			
an.	2a			Business Code				
Program Serwce Revenue	ь							
	c							
	d							
ර	e							
ogra	f	All other program serv	vice revenue					
Ğ	g	Total. Add lines 2a-2	f	+	0			
	3	Investment income (i and other similar amo			0			
	4	Income from investment o			0			
	5	Royalties		•	0			
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income or (loss)	0	0				
	d	Net rental income or (0			
	7a	Gross amount (1) !	Securities	(II) Other				
	′"	from sales of assets other						
		than inventory						
	ь	Less cost or other basis and		24,579				
	 c	sales expenses Gain or (loss)		-24,579				
	d	Net gain or (loss) .			-24,579			-24,579
<u>a</u>	8a	Gross income from fui	ndraising					
듄		events (not including \$						
Other Revenue		of contributions report See Part IV, line 18						
<u>.</u>		See Fare IV, mile 10	 a					
₹		Less direct expenses						
		Net income or (loss) f	1	events 🛌	0			
	⁹ a	Gross income from ga See Part IV, line 19						
	.		a					
		Less direct expenses Net income or (loss) f		vities -	0			
		Gross sales of invento	i					
		returns and allowance	s .					
	ь	Less cost of goods s	a old b					
		Net income or (loss) f		entory p -	0			
		Miscellaneous Reve	nue	Business Code				
	11a							
	b							
	, c	All other rovenus						
	d e	All other revenue . Total. Add lines 11a-		<u> </u>				
	12	Total revenue. See In			0			
		.o.u. revenue. See III	50 activity		77,310,379			-24,579

	990 (2015)				Page 10
	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns				
	Check if Schedule O contains a response or note to any line in t	hıs Part IX T			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	466,000			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,706,700			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	11,445,029			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,207,986			
9	Other employee benefits	1,969,244			
10	Payroll taxes	842,418			
11	Fees for services (non-employees)				
а	Management	3,603,127			
b	Legal	149,201			
c	Accounting	171,616			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	305,892			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,346,622			
12	Advertising and promotion	24,024,277			
13	Office expenses	569,510			
14	Information technology	564,948			
15	Royalties	0			
16	Occupancy	1,912,101			
17	Travel	2,668,613			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,241,471			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,567,000			
23	Insurance	225,534			
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	RESEARCH & PROMOTION	13,997,667	0	0	0
b	SPONSORSHIP	1,897,344	0	0	0
c	MAINTENANCE	914,589	0	0	0
d	GRAPHICS	871,693	0	0	0
e	All other expenses	1,325,974	0	0	0
25	Total functional expenses. Add lines 1 through 24e	76,994,556	0	0	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)				

Assets

Liabilities

Net Assets or Fund Balances

Form 990 (2015)

Part X Balance Sheet

	Check if Schedule O contains a response or note to any I	ne ın tl	hıs Part X	<u> </u>	<u>.</u> .	<u>···</u> ·-
				(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing			2,654	1	2,591
2	Savings and temporary cash investments			3,769,174	2	4,254,695
3	Pledges and grants receivable, net			0	3	0
4	Accounts receivable, net			8,713,826	4	6,933,503
5	Loans and other receivables from current and former offi key employees, and highest compensated employees C Schedule L	•				
6	Loans and other receivables from other disqualified pers section 4958(f)(1)), persons described in section 4958 contributing employers and sponsoring organizations of voluntary employees' beneficiary organizations (see ins II of Schedule L	(c)(3)(sectio	(B), and n 501(c)(9)	0	5	0
,	Notes and leans reservable not			0		0
7	Notes and loans receivable, net			0		0
8	Inventories for sale or use			959,643	9	1.106.670
9	Prepaid expenses and deferred charges	 i		959,643	9	1,106,670
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	19,624,838			
Ь	Less accumulated depreciation	10b	14,483,067	5,116,816	10 c	5,141,771
11	Investments—publicly traded securities			0		0
12	Investments—other securities See Part IV, line 11 .			0	12	0
13	Investments—program-related See Part IV, line 11 .			0	13	0
14	Intangible assets			0	14	0
15	Other assets See Part IV, line 11			0	15	0
16	Total assets. Add lines 1 through 15 (must equal line 34) .		18,562,113	16	17,439,230
17	Accounts payable and accrued expenses			13,619,685	17	12,465,198
18	Grants payable			0	18	0
19	Deferred revenue			0	19	0
20	Tax-exempt bond liabilities			0	20	0
21	Escrow or custodial account liability Complete Part IV	of Sch	edule D	0	21	0
22	Loans and other payables to current and former officers, key employees, highest compensated employees, and d					
	persons Complete Part II of Schedule L			0	22	0
23	Secured mortgages and notes payable to unrelated third	partie	es	0	23	0
24	Unsecured notes and loans payable to unrelated third pa	arties		0	24	0
25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24) Complete Part X of Schedule D	to rela	ted third parties,			
				4,374,739	25	4,090,520
26	Total liabilities. Add lines 17 through 25			17,994,424	26	16,555,718
	Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	ere 🟲	▽ and complete			
27	Unrestricted net assets			567,689	27	883,512
28	Temporarily restricted net assets			0	28	0
29	Permanently restricted net assets			0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), complete lines 30 through 34.	heck h	ere 🕨 🦵 and			
30	Capital stock or trust principal, or current funds				30	
31	Paid-in or capital surplus, or land, building or equipment	fund			31	
32	Retained earnings, endowment, accumulated income, or				32	
33	Total net assets or fund balances			567,689	33	883,512
34	Total liabilities and net assets/fund balances			18,562,113		17,439,230

- 01111	750 (2013)				raye 12
Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				┌
1	Total revenue (must equal Part VIII, column (A), line 12)	1		77,:	310,379
2	Total expenses (must equal Part IX, column (A), line 25)	2		76,9	994,556
3	Revenue less expenses Subtract line 2 from line 1	3		;	315,823
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		į	567,689
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		8	883,512
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev a separate basis, consolidated basis, or both	iewed or			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se basis, consolidated basis, or both	parate			
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversion of the audit, review, or compilation of its financial statements and selection of an independent accountant		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ıın			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Single Audit Act and OMB Circular A-133?	the	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

Software ID: **Software Version:**

EIN: 62-0786018

Name: COTTON INCORPORATED

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more tl perso and a	tion (han o n is l	ne b ooth ctor,	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		-,,	related organizations
Buddy Allen BOARD MEMBER	10	х						0	0	0
Albert Andel BOARD MEMBER	1 0	x						0	0	0
Lloyd Arthur BOARD MEMBER	1 0	х						0	0	0
Coley Bailey	1 0	х						0	0	0
BOARD MEMBER Allen Below	1 0	X						0	0	0
BOARD MEMBER Marvin Beyer	0 0	X						0	0	0
BOARD MEMBER Frank Bezner	0 0	×						0	0	0
BOARD MEMBER Ryne Brannen	0 0									
BOARD MEMBER Carl Brown	0 0	X						0	0	0
BOARD MEMBER Andrew Burleson	0 0	Х						0	0	0
BOARD MEMBER	0 0	Х						0	0	0
Larry Burns BOARD MEMBER	0 0	х						0	0	0
Malcolm Calhoun BOARD MEMBER	0 0	х						0	0	0
Link Carlton BOARD MEMBER	0 0	х						0	0	0
Steven Clay BOARD MEMBER	1 0	х						0	0	0
Ron Coley BOARD MEMBER	10	×						0	0	0
Jason Condrey BOARD MEMBER	1 0	х						0	0	0
John Crapse BOARD MEMBER	1 0	х						0	0	0
Johnny Crawford BOARD MEMBER	1 0	х						0	0	0
Jerry Davis BOARD MEMBER	10	х						0	0	0
Henry Davis BOARD MEMBER	1 0	х						0	0	0
Hugh Dollar	1 0	х						0	0	0
Steven Droke	0 0	X						0	0	0
BOARD MEMBER Kenton Dunn	0 0	×						0	0	0
BOARD MEMBER Philip Edwards	0 0	X						0	0	0
BOARD MEMBER Robert Englert	0 0									
BOARD MEMBER	0 0	Х						0	0	0

Content	Compensated Employees, and Ind		ntracto						I	1	1 1
Separate	(A) Name and Title	hours per week (list	more to	tion (d han o n is b	do no ne b ooth	ox,ι an o	ınless fficer	;	compensation from the	compensation from related	compensation
Annex Company Annex An		organizations below	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	related
Description			х						0	0	0
SOME PRIMERS D.		1 0									
March Marc			X						0	0	0
NAME INTERPRET 10			×						0	0	0
NECONSTRUMENTS COLOR PREMICES COLOR PREMICES	BOARD MEMBER										
March Marc			x						0	0	0
MANDER MARKER 0	•		×						0	0	0
March 1998 Mar	BOARD MEMBER	0 0	<u> </u>								
Emerry Grounder			×						0	0	0
Company Comp	-					_					
Burgles Griffin		ļ	x						0	0	0
Chamman		1 0									
Company Comp			×		Х				0	0	0
Deliver Harrock									0	0	0
Secretary		0 0							Ů	0	<u> </u>
Total Hardwark			×		X				0	0	0
DAGED MEMBER	·										
Myron Hawes		·····	×						0	0	0
DOARD MEMBER DO DO DO DO DO DO DO D											
Company Comp	BOARD MEMBER	0 0	Х						0	0	0
Cray Hemrich		·····	х						0	0	0
Crag Hennich		ļ	х						0	0	0
SOARD MEMBER	Craig Heinrich	1 0									
BOARD MEMBER 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			×						0	0	0
Seff Hux		·····	х						0	0	0
Doseph Jimmerson		1 0	х						0	0	0
DOARD MEMBER		1 0	 								
Same Solinson So			Х						0	0	0
Demand Jordan		·····	х						0	0	0
Donny Lassiter		1 0	х		х				0	0	0
Note											
BOARD MEMBER	BOARD MEMBER	0 0	X						0	0	0
John Lindamood			x						0	0	0
X		1 0									
X 0 0 0 0 0 0 0 0 0	BOARD MEMBER	0 0	X						0	0	0
X		ļ	х						0	0	0
POADD MEMBED			×						0	0	0
		0 0									

Compensated Employees, and Independent Cont						,	•	1				
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (nan o n is b	ne b	ox, u an of	ınless fficer	;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-2/1099-MISC) 0	(F) Estimated amount of other compensation from the		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations		
James Massey	1 0	x						0	0	0		
BOARD MEMBER	00											
BOARD MEMBER	0 0	х						0	0	0		
Gregg Mayberry	1 0	×						0	0	0		
BOARD MEMBER	0 0											
James McGougan BOARD MEMBER	0 0	х						0	0	0		
Henry McLaurin	1 0	x						0	0	0		
BOARD MEMBER	0 0							Ů				
Weldon Melton	1 0	x						0	0	0		
BOARD MEMBER	0 0											
Peter Michael BOARD MEMBER	0 0	x						0	0	0		
Robert Miller	1 0	x						0	0	0		
BOARD MEMBER	0 0							_	-			
Brady Mimms BOARD MEMBER	1 0	х						0	0	0		
Travis Mires	1 0							_		_		
BOARD MEMBER	0 0	X						0	0	0		
Van Murphy	1 0	x						0	0	0		
BOARD MEMBER Brent Nelson	0 0											
BOARD MEMBER	0 0	×						0	0	0		
John Newby	1 0	x						0	0	0		
BOARD MEMBER	0.0											
Herrick Norcross BOARD MEMBER	1 0	х						0	0	0		
Lyall Pacheco BOARD MEMBER	1 0	х						0	0	0		
Michael Patschke	10											
BOARD MEMBER	0 0	X						0	0	0		
David Pearson BOARD MEMBER	1 0	х						0	0	0		
Glen Phipps	1 0											
BOARD MEMBER	0 0	х						0	0	0		
Terry Pollard	1 0	,,										
BOARD MEMBER	0 0	X						0	U	0		
Charles Provance	1 0	×						0	0	0		
BOARD MEMBER Bornard Pustasoveky	0 0											
Bernard Pustejovsky BOARD MEMBER		x						0	0	0		
Nathan Reed	1 0	, , , , , , , , , , , , , , , , , , ,										
BOARD MEMBER	0 0	X							0	0		
Johnie Reed BOARD MEMBER	0 0	х						0	0	0		
Danny Robbins	1 0	х						0	0	0		
BOARD MEMBER	0 0											
Ryan Robbins BOARD MEMBER	0 0	x						0	0	0		
	-	-										

Compensated Employees, and Inde		rs			, -	,	1	1		
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th persoi	ion (d nan o n is b	ne b	ox, u an of	ınless fficer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee				Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
Randolph Rogers	1 0					ă.				
BOARD MEMBER	0 0	×						0	0	О
Dean Rovey	1 0									
BOARD MEMBER	0 0	X						0	0	0
John Ruark	1 0	x						0	0	0
BOARD MEMBER	0 0							,		
Larry Sayes	1 0	×						0	0	0
BOARD MEMBER Harry Schroeder	0 0									
BOARD MEMBER	0 0	×						0	0	О
Eric Seidenberger	1 0									
BOARD MEMBER	0 0	X						0	0	0
Vance Shoaf	1 0	х						0	0	0
BOARD MEMBER	0 0							Ů	•	
Timothy Smith	1 0	×						0	0	0
BOARD MEMBER	0 0									
Lewie Joe Smith BOARD MEMBER		x						0	0	0
Sam Sparks	1 0									
BOARD MEMBER	0 0	×						0	0	0
Charles Speake	1 0	x						0	0	0
BOARD MEMBER	0 0	^						0		
Lawrence Starrh	1 0	×						0	0	0
BOARD MEMBER	0 0									
Cloyce Stevens BOARD MEMBER		×						0	0	0
Earl Stiles	1 0									
BOARD MEMBER	0 0	X						0	0	0
Martin Stoerner	1 0	x						0	0	0
BOARD MEMBER	0 0							0		
Gary Tidwell	1 0	×						0	0	0
BOARD MEMBER	0 0									
Phil Vandiver BOARD MEMBER		x						0	0	0
Tom Wade	1 0									
BOARD MEMBER	0 0	X						0	0	0
Robert Walker	1 0	x						0	0	0
BOARD MEMBER	0 0							0	0	0
Jim Waters	1 0	x						0	0	0
BOARD MEMBER	0 0									
Mark Watte		×		х				0	0	0
Vice Chairman William Weaver	0 0									
BOARD MEMBER	0 0	×						0	0	0
Clint Webb	1 0							_		_
BOARD MEMBER	0 0	X						0	0	0
Jason West	1 0	х						0	0	0
BOARD MEMBER	0 0									
Lance Whitehead	1 0	×						0	0	0
BOARD MEMBER	0 0		<u> </u>							<u> </u>

Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F)													
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne booth a	ox, u an of	inless ficer tee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the			
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations			
Stephen Wilbur BOARD MEMBER	1 0	x						0	0	0			
Mark Weight	0 0												
Mark Wright BOARD MEMBER	0 0	×						0	0	0			
J Berrye Worsham	40 0			Х				611,140	0	157,630			
President & CEO	0 0												
David Byrd	40 0			x				247,224	0	87,413			
Sr VP & CFO	0 0												
John Morgans	40 0			×				201,079	0	81,020			
VP Administration	0 0												
Richmond Hendee	40 0				X			253,391	0	97,807			
SR VP Consumer MKTG	0 0				_			233,391	0	97,807			
Kater Hake	40 0				×			248,348	0	119,105			
VP Agricultural/Env Research	0 0							240,340	0	119,103			
Mark Messura	40 0				X			265,712	0	104,960			
SR VP Global Supply Chain	0 0							203,712		104,500			
Robert Tyndall	40 0				х			184,519	0	69,694			
VP Prod Dev & Implem	0 0							,		,			
Michael Watson	40 0					x		179,072	0	80,980			
VP Fiber Competition	0 0							179,072		80,980			
Kımberly S Kıtchıngs	40 0					x		161,503	0	74,420			
VP , Corp Strategy	0 0							,		,			
Wentao Zheng	40 0					×		151,465	0	34,970			
Manager, EFS	0 0							131,103		31,370			
Katsuro Ishida	40 0							39E 400		16 410			
VP Marketing Asia	0 0					X		285,400	0	16,419			
John Chiavacci	40 0					x		149,316	0	65,927			
СТО	0 0							145,510		03,321			

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OMB No 1545-0047

SCHEDULE D

(Form 990)

Inter

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

	Revenue Service	Information about Schedule D	(Form 990) and its instructions is at <u>www.ii</u>	<u>rs.gov/form990</u> .	Inspection
	me of the organi			Employer identifi	cation number
_				62-0786018	
Pa	rt I Organi	izations Maintaining Donor	Advised Funds or Other Similar F		ts.
	Comple	ete if the organization answere	ed "Yes" on Form 990, Part IV, line 6.	/LNE	.h
L	Total numbe	r at end of year	(a) Donor advised funds	(b)Funds and o	ther accounts
		alue of contributions to (during			
	year)	ande of contributions to (during			
	Aggregate v	alue of grants from (during year)			
	Aggregate v	alue at end of year			
			dvisors in writing that the assets held in do the organization's exclusive legal control?	nor advised	┌ Yes ┌ No
			and donor advisors in writing that grant fund		
		haritable purposes and not for the ermissible private benefit?	benefit of the donor or donor advisor, or for a	any other purpose	┌ Yes ┌ No
a		•	ete if the organization answered "Yes"	on Form 990, Part	IV, line 7.
	Purpose(s) of c	conservation easements held by th	e organization (check all that apply)		
		on of land for public use (e g , recre		n historically importa	int land area
	☐ Protection	of natural habitat	Preservation of a	certified historic str	ucture
	☐ Preservatio	on of open space			
			held a qualified conservation contribution in	the form of a conserv	/ation
	easement on th	ne last day of the tax year		11-14-4-4	h - FJ -6 4h - V
	Total number o	f conservation easements		2a Heid at t	he End of the Year
•		restricted by conservation easeme	ents	2b	
		servation easements on a certified		2c	
i			e) acquired after 8/17/06, and not on a		
		ire listed in the National Register		2d	
	Number of cons	servation easements modified, trai	nsferred, released, extinguished, or terminat	ed by the organization	n during the
	tax year ►				
	Number of stat	es where property subject to cons	ervation easement is located ►		
		nization have a written policy regar enforcement of the conservation e	ding the periodic monitoring, inspection, hai asements it holds?		Yes No
	Staff and volun year	teer hours devoted to monitoring,	inspecting, handling of violations, and enforc	cing conservation eas	sements during the
	A manustration (sakuna handluna efizikletien.		
	A mount of expe		ecting, handling of violations, and enforcing	conservation easeme	nts during the year
			ne 2(d) above satisfy the requirements of se	uction 170/h\/4\	
	(B)(ı) and secti	on 170(h)(4)(B)(II)?		Г	Yes No
	balance sheet,		ts conservation easements in its revenue ai of the footnote to the organization's financia sements		
lli			tions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Other Simila	r Assets.
<u> </u>			FAS 116 (ASC 958), not to report in its reve	enue statement and h	alance sheet
	works of art, his	storical treasures, or other similar	assets held for public exhibition, education note to its financial statements that describ	, or research in furthe	
b	works of art, his		FAS 116 (ASC 958), to report in its revenue assets held for public exhibition, education these items		
(i) Revenue inclu	ided on Form 990, Part VIII, line 1	L	► \$	
(i	i) Assets include	ed ın Form 990, Part X		► \$	
			nistorical treasures, or other similar assets FAS 116 (ASC 958) relating to these items	for financial gain, pro	
a	Revenue includ	led on Form 990, Part VIII, line 1		► \$	

b Assets included in Form 990, Part X

a The public exhibition d Coan or exchange programs Public exhibition d Coan or exchange programs b The Scholarty research Public exhibition d Coan or exchange programs c Preservation for future generations c Preservation for future generations d Public exhibition d Coan or exchange programs c Preservation for future generations d Provide a description of the organizations collections and explain how they further the organization's exempt purpose in Facilities Facilities Provide a description of the organization solicition D Part V Ecorow and Custodial Arrangements. C Preservation Preservation D Part V Ecorow and Custodial Arrangements. D Part V	Par	t III	Organizations Maintaining (continued)	Collections of A	Art, His	stori	cal Tre	easures,	or Oth	ner Simila	r Asse	ets	
Scholarly research C	3			ession, and other rec	ords, c	heck a					t use of	its	
Sectionary research Section for future generations	а	┌ P	ublic exhibition		d	Г	Loan o	exchange	progran	ms			
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII Part XIII	b	Γs	cholarly research		е	Γ	Other						
Solution to the very dut the organization solicit or receive donations of art, instorical treasures or other similar seases to be sold to raise funds rather than to be maintained as part of the organization's collection? Ves No Part ¥V Ecrow and Custodial Arrangements. Complete if the organization an assent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, Jine 21. Is its the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, Jine 21. Is its the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part X, Jine 21, for escrow or custodial account liability? Ves No Additions during the year 1.4 d	С	┌ P	reservation for future generations										
No No No No No No No No	4			s collections and exp	plaın ho	w they	/ further	the organi	zatıon's	exempt purp	ose in		
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21, is the organization an algent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part X? State Part Par	5										Yes	□ No	
b If "Yes," explain the arrangement in Part XIII and complete the following table Beginning balance Distributions during the year Ending balance Tending balance If Ending balance If Ending balance If Sending balance If Ending balance If Sending balance If	Pai	rt IV	Complete if the organization a		ı Form	990,	Part IV	', line 9, (or repo	rted an am	ount o	n Forr	n 990,
1	1a			todian or other inter	mediary	/ for c	ontributi	ons or oth	er asset		Yes	┌ No	
Mary	b	If"	Yes," explain the arrangement in Pa	art XIII and complet	e the fo	llowin	g table		ſ		Amoun	t	
tending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	c	Be	ginning balance						1c				
The Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	d	Αd	ditions during the year						1d				
Description include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	е	Dis	tributions during the year						1e				
B If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	f	End	ding balance						1f				
B If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	2a	Did th	ne organization include an amount o	n Form 990, Part X, I	lıne 21,	fores	crow or	custodial	account	liability?	Yes	No	
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Captive													
Contributions Contribution	b	If"Y∈	s," explain the arrangement in Part	XIII Check here if t	the expl	anatıc	on has b	een provid	ed ın Pa	rt XIII			Г
1a Beginning of year balance	Pa	rt V	Endowment Funds. Comple	te ıf the organızat	ion ans	swere	ed "Yes	" to Form	990, P	art IV, line	10.		
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ Permanent endowment ▶ The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations 5 If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, Ine 11a. See Form 990, Part X, Ine 10. Describe in Part XIII the intended uses of the organization in the possession of the borso (other) Description of property Cost or other basis (other basis (other)) Buildings Cost or other basis (other) Cost o				(a)Current year	(b) P	rior yea	ır b (c) Two years	back (d	I)Three years b	ack (e)Four ye	ars back
c Net investment earnings, gains, and losses d Grants or scholarships	1a												
cosses	Ь	Cont	ributions										
e Other expenditures for facilities and programs f Administrative expenses	c		- · · · · · · · · · · · · · · · · · · ·										
and programs f Administrative expenses	d	Gran	ts or scholarships										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ Crit Temporarily restricted endowment ▶ The percentages on lines 2a, 2b, and 2c should equal 100% A rethere endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	e												
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ Crit Temporarily restricted endowment ▶ The percentages on lines 2a, 2b, and 2c should equal 100% A rethere endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	f	A dmi	nistrative expenses										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ Permanent endowment ▶ C Temporarily restricted endowment ▶ The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	g		•										
Board designated or quasi-endowment ► Permanent endowment ► C Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	2	Provi	de the estimated percentage of the	current vear end bala	ance (lir	ne 1a.	column	(a)) held a	ıs				
Temporarily restricted endowment ► Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations			· -	,	`	3,		· //					
Temporarily restricted endowment F The percentages on lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	ь		-										
The percentages on lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations													
Ves No No No No No No No N		•	•	should equal 100%									
Cost or other basis (investment) Cost or other basis (other) Cost or other	За			ssession of the organ	nızatıon	that a	re held	and admın	stered f	or the			
Cost or other basis (investment) Cost or other basis (other) Cost or other											2-(:)	Yes	No
b If "Yes" on 3a(II), are the related organizations listed as required on Schedule R? 3b Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property (a) (b) (b) Accumulated (c) depreciation (c			-										
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property Cost or other basis (investment) Land Cost or other basis (other) Description of property Cost or other basis (investment) Description of property Cost or other basis (other) Description of property Cost or other basis (other) Description of property Cost or other basis (other) Cost or other bas	ь	• •	_									<u> </u>	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) Cost or other basis (other) (b) Cost or other basis (other) (c) depreciation (d) Book value (e) depreciation (d) Book value (e) depreciation (other) (a) Cost or other basis (other) (b) Cost or other basis (other) (c) depreciation (d) Book value (e) depreciation (f) Book value (f) Book value (g) depreciation (h) Cost or other basis (other) (other	4		-										
Cost or other basis (investment)	Pai	rt VI						_	_				
Land Cost or other basis (investment) Cost or other basis (other) (c) depreciation b Buildings Buildings Support <				inswered 'Yes' to	Form 9								
b Buildings					Co	ost or o	ther basıs	Cost or of	her basıs			(4)500	
c Leasehold improvements					·								
d Equipment			-		∙ -								
			•		·					<u> </u>			
e Other					· -							-	
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)					<u>· · </u> t X. colu	ımn (B							

	ee Form 990, Part X, line 12. (a) Description of security or category		(h)Pook value	(c)Method of valuation
	(including name of security)		(b) Book value	Cost or end-of-year market value
(1) Fınancıal d (2) Closely-he	erivatives Id equity interests			
(3) Other				
		+		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)) 🕨		
Part VIII	Investments—Program Related.		2 Da 1714 Land 44 a	
	Complete if the organization answer (a) Description of investment	ed 'Yes' on Form 990	0, Part IV, line 11c. _{Se}	ee Form 990, Part X, line 13. (c) Method of valuation
	(a) Description of investment		(b) Book value	Cost or end-of-year market value
	b) must equal Form 990, Part X, col (B) line 13) Ther Assets. Complete if the organiza	ation answered 'Ves' on	Form 990 Part IV line	11d See Form 990 Part V June 15
		scription	Torm 550,1 arc IV, line	(b) Book value
	(b) must equal Form 990, Part X, col.(B) lin		· · · · · · · · · · · · · · · · · · ·	
Part X O	ther Liabilities. Complete if the o ee Form 990, Part X, line 25.	organization answere	d 'Yes' on Form 990,	
Part X O	ther Liabilities. Complete if the o		d 'Yes' on Form 990,	
Part X S	Other Liabilities. Complete if the o ee Form 990, Part X, line 25. (a) Description of liability	organization answere	d 'Yes' on Form 990,	
Part X O S 1. Federal Incom	Other Liabilities. Complete if the o ee Form 990, Part X, line 25. (a) Description of liability	(b) Book value	d 'Yes' on Form 990,	
Part X C S 1. Federal Incom	ether Liabilities. Complete if the of ee Form 990, Part X, line 25. (a) Description of liability e taxes ASE OBLIGATION	(b) Book value	d 'Yes' on Form 990,	
Part X C S 1. Federal Incom	ther Liabilities. Complete if the o ee Form 990, Part X, line 25. (a) Description of liability e taxes	(b) Book value	d 'Yes' on Form 990,	
Part X O S 1. Federal Incom	ether Liabilities. Complete if the of ee Form 990, Part X, line 25. (a) Description of liability e taxes ASE OBLIGATION	(b) Book value	d 'Yes' on Form 990,	
Part X O S 1. Federal Incom	ether Liabilities. Complete if the of ee Form 990, Part X, line 25. (a) Description of liability e taxes ASE OBLIGATION	(b) Book value	d 'Yes' on Form 990,	
Part X O S 1. Federal Incom	ether Liabilities. Complete if the of ee Form 990, Part X, line 25. (a) Description of liability e taxes ASE OBLIGATION	(b) Book value	d 'Yes' on Form 990,	
Part X O S 1. Federal Incom	ether Liabilities. Complete if the of ee Form 990, Part X, line 25. (a) Description of liability e taxes ASE OBLIGATION	(b) Book value	d 'Yes' on Form 990,	
Part X O S 1. Federal Incom	ether Liabilities. Complete if the of ee Form 990, Part X, line 25. (a) Description of liability e taxes ASE OBLIGATION	(b) Book value	d 'Yes' on Form 990,	
Part X O S 1. Federal Incom	ether Liabilities. Complete if the of ee Form 990, Part X, line 25. (a) Description of liability e taxes ASE OBLIGATION	(b) Book value	d 'Yes' on Form 990,	
Part X O S 1. Federal Incom	ether Liabilities. Complete if the of ee Form 990, Part X, line 25. (a) Description of liability e taxes ASE OBLIGATION	(b) Book value	d 'Yes' on Form 990,	

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per F	Return
1	Total revenue, gains, and other support per audited financial statements	1	79,524,636
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	2,189,678
3	Subtract line 2e from line 1	3	77,334,958
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	-24,579
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	77,310,379
Part	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s pei	Return.
1	Total expenses and losses per audited financial statements	1	79,208,813
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a 2,189,678		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	2,214,257
3	Subtract line 2e from line 1	3	76,994,556
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII) 4b		
c	Add lines 4a and 4b	4c	

Part XIII Supplemental Information

5

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

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

Return Reference	Explanation						
PART X, LINE 2	EXPLANATION THE COMPANY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE, EXCEPT FOR ANY UNRELATED BUSINESS INCOME THERE WAS NO UNRELATED BUSINESS INCOME EARNED DURING THE YEARS ENDED DECEMBER 31, 2015 AND 2014, AND THUS, NO PROVISION FOR INCOME TAXES HAS BEEN MADE THE COMPANY ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES USING A RECOGNITION THRESHOLD OF MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPROPRIATE TAXING AUTHORITY MEASUREMENT OF UNCERTAINTY OCCURS IF THE RECOGNITION THRESHOLD HAS BEEN MET MANAGEMENT BELIEVES THAT THERE WERE NO UNCERTAIN TAX POSITIONS THAT MET THE RECOGNITION THRESHOLD IN 2015 OR 2014 THE COMPANY'S TAX RETURNS ARE OPEN FOR EXAMINATION FOR YEARS 2012 THROUGH 2014						
PART XI, LINE 4B - OTHER ADJUSTMENTS	LOSS ON DISPOSAL OF FIXED ASSETS -24,579						
PART XII, LINE 2D - OTHER ADJUSTMENTS	LOSS ON DISPOSAL OF FIXED ASSETS 24,579						

76,994,556

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

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DLN: 93493218002486

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public Inspection

	e of the organization				Employer identi	ification number
COT.	TON INCORPORATED				62.0706010	
					62-0786018	
Pa	rt I General Informatio Complete if the organ				14b.	
1	For grantmakers. Does the					
	and other assistance, the gra	antees' eligibil	ity for the grai	nts or assistance, and	the selection criteria	
	used to award the grants or	assistance? .				┌ Yes ┌ No
2	For grantmakers. Describe i assistance outside the Unite		ganızatıon's p	rocedures for monitor	ing the use of its grant	s and other
3	Activites per Region (The follow	ving Part I, line	3 table can be d	uplicated if additional sp	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	East Asia and the Pacific	3	16	Program Services	TECH & INFO SUPPORT	5,471,539
(2)	North America	1	4	Program Services	TECH & INFO SUPPORT	1,033,259
(3)	Europe (Including Iceland and Greenland)	0	0	Program Services	TECH & INFO SUPPORT	1,546,78
(4)	Middle East and North Africa	0	0	Program Services	TECH & INFO SUPPORT	16,39
(5)	Central America and the Caribbean	0	1	1 2	A GRICULTURAL RESEARCH	72,069
3a	Sub-total	4	21			8,140,05
	Total from continuation sheets to Part I					
_	Totale (add lines 2a and 2h)	ا ۸ ا	2.1	1		9 1 4 0 0 5

Schedule F (Form 990) 2015

_		(b) IRS code		(d) Purpose of	t IV, line 15, for an	(f) Manner of	(g) A mount	(h) Description	(i) Method of
	organization	section and EIN (if applicable)	(e) region	grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, othe
(1)								
(2)								
(3)								
(4)								
2					recognized as charit ovided a section 501				
3	Enter total nu	mber of other or	ganızatıons or ent	ities					

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

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

Part IV Foreign Forms

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

Schedule F (Form 990) 2015

Additional Data

Software ID: Software Version:

EIN: 62-0786018

Name: COTTON INCORPORATED

Schedule F (Form 990) 2015

Page 5

Dowl V Commiss

Part V Supplemental Information

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

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Schedule I

(Form 990)

Department of the

Internal Revenue Service

Treasury

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

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

Attach to Form 990.

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

DLN: 93493218002486OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization						Employer identification	on number
COTTON INCORPORATED						62-0786018	
Part I General Information	n on Grants and	d Assistance				•	
 Does the organization maintain in the selection criteria used to aw Describe in Part IV the organization 	ard the grants or as	sıstance [?]				tance, and	ΓYes Γ
Part II Grants and Other Assista that received more than \$				plete if the organization	answered "Yes" on Fo	orm 990, Part IV, line 21	., for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grad or assistance
2 Enter total number of section 50	1(c)(3) and govern	ment organizations lis	sted in the line 1 table	1	<u> </u>	<u> </u>	
3 Enter total number of other organ						_	
2 Enter total hamber of other organ	meanons naced in th	io iiiio I tabic I	<u> </u>			<u> </u>	

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) RESEARCH	10	466,000			
Part IV Supplemental Informat	tion Broude the info	rmation required in D	art I lino 2 Dart III	column (h) and any other	additional information

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

Return Reference	Explanation
· · · · · · · - · · · · · · ·	EXPLANATION GRANTS ARE OVERSEEN BY OUR AGRICULTURAL AND ENVIRONMENTAL RESEARCH EMPLOYEES THESE EMPLOYEES MONITOR THE PROGRESS OF THOSE RECEIVING GRANTS, INCLUDING ROUIRED COMMUNICATIONS OF THEIR PROGRESS AND SITE
	VISITS

Schedule I (Form 990) 2015

DLN: 93493218002486

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Compensation Information

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

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

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

2015

Open to Public Inspection

Internal Revenue Service Name of the organization COTTON INCORPORATED

Employer identification number

62-0786018

Pai	rt I Questions Regarding Compensation	on			
				Yes	No
1a		rovided any of the following to or for a person listed on Form II to provide any relevant information regarding these items			
	First-class or charter travel	✓ Housing allowance or residence for personal use	l		
	Travel for companions	Payments for business use of personal residence	l		
	▼ Tax idemnification and gross-up payments	Health or social club dues or initiation fees	l		
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	•	organization follow a written policy regarding payment or described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe	reimbursing or allowing expenses incurred by all ecutive Director, regarding the items checked in line 1a?	2	Yes	
				165	
3	organization's CEO/Executive Director Check all	anization used to establish the compensation of the that apply Do not check any boxes for methods asation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee	Written employment contract	l		
	✓ Independent compensation consultant	Compensation survey or study	l		
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990 or a related organization), Part VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol payment?	4a		No
b	Participate in, or receive payment from, a supplem	ental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-		4c		No
		provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organize	ations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section compensation contingent on the revenues of \ensuremath{I}	A, line 1a, did the organization pay or accrue any			
а	The organization?		5a		
b	Any related organization?		5b		
	If "Yes," on line 5a or 5b, describe in Part III				
6	For persons listed on Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a, did the organization pay or accrue any			
а	The organization?		6a		
b	Any related organization?		6b		
	If "Yes," on line 6a or 6b, describe in Part III				
7		A, line 1a, did the organization provide any non-fixed describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII		8		
9	If "Yes" on line 8, did the organization also follow t section 53 4958-6(c)?	the rebuttable presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation						• •
	Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2015

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information						
Return Reference	Explanation					
·	A U S employee worked in China during 2015 and received housing as well as tax indemnification from the company during his assignment. The company also provides for business class tickets for all employees on all international trips, which include first-class tickets when domestic travel is involved on those itineraries.					
PART I, LINE 4	J Berrye Worsham participates in a SERP and had contributions of \$100,000 to the Plan in 2015					

Schedule J (Form 990) 2015

Software ID: Software Version:

EIN: 62-0786018

Name: COTTON INCORPORATED

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1) Berrye Worsham President & CEO	470,528	46,000	94,612	113,043	44,587	768,770	
(1	0	- 0	-	- 0	- - 0		
1David ByrdSr VP & CFO (217,781	22,961	6,482	59,673	27,740	334,637	C
(1	1)		[]				
2 John Morgans	176,780	0	0	0	0	0	C
2John Morgans VP Administration (I		18,613	5,686	45,290	35,730 	282,099	0
	<u> </u>	<u> </u>	0	0	0	0	d
3Richmond Hendee SR VP Consumer MKTG		18,209	15,248	59,168	38,639	351,198	0
(1	0	 0	-	0	0	0	0
4 Kater Hake VP Agricultural/Env Research	217,938	20,660	9,750	74,985	44,120	367,453	0
(1			- 0		0	0	
5Mark Messura SR VP Global Supply Chain	232,026	24,357	9,329	64,136	40,824	370,672	0
(1	- O	0	-	- 0	0	_ 0	c
6 Robert Tyndall VP Prod Dev & Implem	160,737	14,936	8,846	46,413	23,281	254,213	c
(1	- o		-	-0		_ 	
7 Michael Watson VP Fiber Competition	162,115	11,537	5,420	46,338	34,642	260,052	0
(1	- o		-	- 0		_ 	
8 Kımberly S Kıtchıngs VP , Corp Strategy	144,090	15,782	1,631	33,941	40,479	235,923	C
(1	- O		-	-		_ 	C
9 Wentao ZhengManager, EFS (75,691	3,342	72,432	20,545	14,425	186,435	
(1	-l 0	-	-	-	-	-	
10Katsuro Ishida VP Marketing Asia	140,790	32,946	111,664	6,518	9,901	301,819	
(1				-			
	0	0.	01	' UI			
11John ChiavacciCTO (135,880	11,195	2,241	39,695	26,232	215,243	

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE O Supplementa

(Form 990 or 990-EZ)

Name of the organization

OTHER PROGRAM SERVICES

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493218002486

Employer identification number

2015

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

• Attach to Form 990 or 990-EZ.

 \blacktriangleright Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

COTTON INCORPORATED 62-0786018 990 Schedule O, Supplemental Information Return Reference **Explanation** FORM 990, PART I, LINE 1 COTTON INCORPORATED, FUNDED BY U.S. GROWERS OF UPLAND COTTON AND IMPORTERS OF COTTON AND COTTON TEXTILE PRODUCTS. IS THE RESEARCH AND MARKETING COMPANY REPRESENTING UPLAND DESCRIPTION OF ORGANIZATION MISSION COTTON THE PROGRAM IS DESIGNED AND OPERATED TO IMPROVE THE DEMAND FOR AND PROFITABILITY OF COTTON EXPLANATION THE FORM 990 IS REVIEWED IN DETAIL WITH THE COMPANY'S AUDIT COMMITTEE AFTER C FORM 990, PART VI, SECTION **B. LINE 11** OMPLETION AT THE AUGUST BOARD OF DIRECTORS MEETING FOR APPROVAL PRIOR TO FILING SUBSEQUEN T TO REVIEW. THE CHAIRMAN OF THE AUDIT COMMITTEE WILL INFORM THE COMPLETE BOARD OF DIRECTO RS OF THE PROCEEDINGS AND OUTCOME. FORM 990, PART VI, SECTION EXPLANATION ALL DIRECTORS ARE REQUIRED TO ATTEST THAT THEY ARE FREE OF ANY CONFLICTS OF B. LINE 12C INTEREST FORM 990, PART VI, SECTION EXPLANATION An independent compensation committee determines compensation for all employe **B, LINE 15** es of the Company The compensation committee engages an outside consultant to provide rec ommendations based on comparable pay information as well. Minutes of their meetings are ma intained FORM 990, PART VI, SECTION EXPLANATION THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, C. LINE 19 AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST BY AN APPROPRIATE PARTY FORM 990, PART XII, LINE 2C EXPLANATION THERE HAVE BEEN NO CHANGES DURING THE YEAR IN THE PROCESS FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS FORM 990, PART III, LINE 4D OTHER PROGRAM SERVICES INCLUDE research and development AND CORPORATE SERVICES

DLN: 93493218002486

2015

OMB No 1545-0047

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

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

► Attach to Form 990.

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

Open to Public Inspection

Name of the organization COTTON INCORPORATED				Employer i 62-07860		tion number		
Part I Identification of Disregarded Entities Complete	ıf the organızatıor	ı answered "Yes" oı	n Form 990, Part	•	,10			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Ei	(e) nd-of-year assets	(f) Direct controlling entity			
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the		the organization an	swered "Yes" on	Form 990, Pa	rt IV, lır	ne 34 because it	had on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity (if section 501)		(f) Direct controlling entity	Section (13) co	(g) n 512(b ontrolle itity?
(1)Trolinder Trust Fund	Cotton biotec	NC	501(c)(3)	11c	N	IA	Yes	No No
Cary, NC 27513 30-6017258								
								_

Schedule R (Form 990) 2015												Page 2
Part III Identification of Related Organizations Taxable a because it had one or more related organizations treate					ation answ	ered "Yes	s" on l	Form	990, Part I'	V, lın	ie 34	ŀ
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h Disprop alloca		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man		(k) Percentag ownershij
				314)			Yes	No		Yes	No	

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

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

Part V	Transactions With Related Organizations Complete if the organization answer	ered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			
Not	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During	the tax year, did the organization engage in any of the following transactions with one or more re	elated organizations li	sted in Parts II-IV?				
a Red	eipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
b Giff	, grant, or capital contribution to related organization(s)				1b		No
c Gıft	grant, or capital contribution from related organization(s)				1 c		No
d Loa	ns or loan guarantees to or for related organization(s)				1d		No
e Loa	ns or loan guarantees by related organization(s)				1e		No
f Div	dends from related organization(s)				1f		No
g Sal	e of assets to related organization(s)				1g		No
h Pur	chase of assets from related organization(s)				1h		No
i Exc	nange of assets with related organization(s)				1 i		No
j Lea	se of facilities, equipment, or other assets to related organization(s)				1j		No
k Lea	se of facilities, equipment, or other assets from related organization(s)				1k		No
I Peri	ormance of services or membership or fundraising solicitations for related organization(s)				11		No
m Peri	ormance of services or membership or fundraising solicitations by related organization(s)				1m	Yes	
n Sha	ing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o Sha	ring of paid employees with related organization(s)				10		No
n Rai	mbursement paid to related organization(s) for expenses				1 p		No
	mbursement paid by related organization(s) for expenses				1q		No
q itel	industrient paid by related organization(5) for expenses 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				•		
r Oth	er transfer of cash or property to related organization(s)				1r		No
s Oth	er transfer of cash or property from related organization(s)				1s		No
2 If th	e answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds			
	(a)	(b)	(c)	(d)			
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amo	ount in	volved	

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

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

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

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2015