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## Form **990**

## Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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 www.irs.gov/form990.

Inspection

A	For the	2015 cale	endar year, or tax year beginning January 1 , 2015, and end	ing Dece	mber 31	, 20 15	
В		applicable	C Name of organization Adventive Cross Cultural Initiatives		D Employ	er identification n	umber
	Address	change	Doing business as		1	72-1588721	
$\bar{\Box}$	Name ch	•	Number and street (or P O box if mail is not delivered to street address) Room/s	suite	E Telepho	ne number	
$\bar{\sqcap}$	Initial retu	•	141 East Main Street		i	704-607-5029	
$\bar{\sqcap}$		n/terminated	170				<del></del>
ī	Amended		Rock Hill, SC 29730-4539		<b>G</b> Gross re	eceipts \$	
$\Box$			F Name and address of principal officer	H(a) is this a		subordinates? Yes	√ No
_	приоди	on ponomy	John March Park			s included? Tes	_
	Tay-even	npt status	✓ 501(c)(3)			a list. (see instruction	
<u>-</u>	Website:		w.adventive.ca	H(c) Grou	p exemption	number ▶	
ĸ			✓ Corporation Trust Association Other L Year of form		<del></del>	of legal domicile	MN
_	art I	Summ		200	, 1 Oldic	or logar dorniono	IAIIA
_			escribe the organization's mission or most significant activities: ACCI	recruits neo	nle who ar	a saaking to sa	no the
Ф		-	us through cross-cultural Christian missions, and equips those people to				
Ë	1		: evangelism, church planting & support, practical social services & gener				
Ĕ			is evangensin, criticin planting a support, practical social services a generalist box ▶ ☐ if the organization discontinued its operations or disposed				u ies.
Governance	1		of voting members of the governing body (Part VI, line 1a)		. 3		
<u>ح</u>	l .		of independent voting members of the governing body (Part VI, line 1a).		. 4		<u>5</u> 5
es	1		mber of individuals employed in calendar year 2015 (Part V, line 2a)	<i>,</i>	. 5		
Ϋ́	1		mber of volunteers (estimate if necessary)		. 6		<u>_</u> 6
Activities &	L .		related business revenue from Part VIII, column (C), line 12		. 7a		0
•			lated business taxable income from Form, 990-T, line 34-2, 15-75	<del>.</del>	. 7b		0
	-	Net une	RECEIVED	Prior \	<del></del>	Current Y	
ine	8	Contribu	itions and grants (Part VIII, line 1h)				A71 EA2
			conting revenue (Port VIII line 2g)	<del>               </del>			471,543
Revenue	1	_	ent income (Part VIII, line 2g)	5			
æ			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<del>                                      </del>	<u>.</u>		250
	1		enue—add lines 8 through 11 (must equal Part VIII,-column-(A), line 12)	<u> </u>			250
			and similar amounts paid (Part IX, column (A), lines 1–3)				471,793
3	1		paid to or for members (Part IX, column (A), line 4)				300,478
j _			other compensation, employee benefits (Part IX, column (A), lines 5–10)				
ses	F		onal fundraising fees (Part IX, column (A), line 11e)				
Expenses				-38401 300 CAN			11.35 A 15.75
ŭ	1		ndraising expenses (Part IX, column (D), line 25) ►4,360 repenses (Part IX, column (A), lines 11a–11d, 11f–24e)	CAST MAKET BUTCHELL	<b>计图77数分</b> 行标	\$ 5.5 48 CO 3" (TO 50 SEC)	Tar create a san
			penses. Add lines 13–17 (must equal Part IX, column (A), line 25)				170,146
					· · · · · ·		470,624
		nevenue	eless expenses. Subtract line 18 from line 12	Beginning of C	Surrent Year	End of Ye	1,169
Net Assets or	20	Total acc	sets (Part X, line 16)				
Asse Rate	21		pilities (Part X, line 26)	<b>—</b>	55,340		56,509
<b>2</b>	22		ets or fund balances. Subtract line 21 from line 20	<u> </u>	55 340		<u>0</u>
	art II		ture Block		55,340	l	56,509
_			ury, I declare that I have examined this return, including accompanying schedules and sta	tements and to	the best of	my knowledge, and	heliaf it is
			olete Declaration of preparer (other than officer) is based on all information of which preparer			my knowledge and	Delier, it is
_	<u></u> .	T N	11:01:1		5/13/		
Si	an	Sign	sture of officer	L	ate	12	·
	ere	_	John Halen President/Executive Director				
		Typ	e or print name and title	·		<del></del>	···-
_		<u> </u>		Date		PTIN	
	aid		(h-	5/13/16	Check self-em	ŔŢŢ	62050
	epare	'		<del></del>		F7  PU19	63058
Us	se Only	y Firm's i			m's EIN ▶	704 500 00	.72
140	v the ID		address > 2618 Bricker Drive, Charlotte, NC 28273 ss this return with the preparer shown above? (see instructions)	Į PI	none no	704-588-39 ✓ Ye	
_				No. 11000Y	• • •	<del></del>	<b>990</b> (2015)
ro	raperw	FUIK MEUL	action Act Notice, see the separate instructions. Cat.	. No 11282Y		FUIIN &	(C(13)

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Adventive Cross Cultural Initiatives ("ACCI") recruits people who are seeking to serve the Lord Jesus through cross-cultural Christian
	missions activities and equips those people to serve out that calling, and assists other Christian ministries as they seek to advance
	the Gospel of Christ around the world.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 190,633 including grants of \$ ) (Revenue \$ )
	ACCI sends contracted missionaries to proclaim the good news of salvation in Jesus throughout the world. These missionaries are in
	many countries, and perform a variety of activities, including evangelism, church planting and support, practical community help and
	relief, training and discipleship, etc. Many of the missionaries work with other like-minded organizations in their area of service. ACCI
	contracted 28 such missionaries who ministered in 10 countries in 2015.
46	(Code: \(\sum_{\text{Cypenses}}\) \(\sum_{\text{Cypenses}}\) \(\sum_{\text{Cypenses}}\) \(\sum_{\text{Cypenses}}\)
4b	(Code:) (Expenses \$ 238,977 including grants of \$) (Revenue \$)
	ACCI works with other organizations to advance the Gospel of Christ throughout the world. Some of those organizations have bases
	of operations in countries where ACCI contracted missionaries serve, and some are local organizations that work in conjunction with
	ACCI contracted missionaries on common goals or projects. In 2015, ACCI provided counsel and some funding to 3 organizations
	that ministered in 3 different countries.
	•••••••••••••••••••••••••••••••••••••••
	•••••••••••••••••••••••••••••••••••••••
4c	(Code: ) (Expenses \$ 17,903 including grants of \$ ) (Revenue \$ )
	ACCI provides spiritual support and encouragement to the missionaries that it contracts with around the world. In 2015, ACCI
	provided such support through ongoing prayer and mentoring, some assistance with donor communications, practical planning, and
	strategic advice, all via Skype, email, telephone calls, and where fiscally possible, personal visits with the missionaries.
	Satisfied dayloof all the oxypor shally coophore early and while this shall be missionales.
4d	Other program services (Describe ın Schedule O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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	-	1
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	-	1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	<del>-</del>		<b>-</b>
5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
	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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	-	<b>√</b>
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		1
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		1
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		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
	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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	✓
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	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	
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	-	1
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		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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		1

Part IV Checklist of Required Schedules (continued)									
			Yes	No					
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓_					
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		✓_					
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1					
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		1					
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		1					
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			<u> </u>					
	\$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		<b>✓</b>					
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<b>✓</b>					
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		1					
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1					
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		1					
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?								
00	If "Yes," complete Schedule L, Part I	25b							
26	current or former officers, directors, trustees, key employees, highest compensated employees, or								
	disqualified persons? If "Yes," complete Schedule L, Part II	26		✓					
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								
00	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>-</b>					
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):								
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	✓						
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	;	1					
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)								
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	✓						
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓_					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,								
00	Part I	31		<b>✓</b>					
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		✓					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>	-	Ť					
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓					
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		1					
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		7					
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1					
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		<b>✓</b>					
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1						
	10. 115.15.1. ari oni oco moro di o roquiros to compiete contesta o .		n 990	(2015)					

## Part V Statements Regarding Other IRS Filings and Tax Compliance

The Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	• •	<u> </u>
b Enter the number of Forms W-26 included in line 1a. Enter -0- if not applicable.  □ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garming (gambling) winnings to prize winners?  2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax.  Statements, filed for the calendar year ending with or within the year covered by this return.  It at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3b. Did the organization have unrelated business gross income of \$1,000 or more dump the year?  1if Yes, has filled a Form 990-1 for this year? If YmV's is in 85, provide an explanation in Schedule 0  3a. July 1if Yes, has filled a Form 990-1 for this year? If YmV's is in 85, provide an explanation in Schedule 0  1if Yes a filled Form 11 and 1 foreign country: Implementation of the filled provided over, a financial account in a foreign country: Implementation of Foreign Bank and Financial Accounts (FBAR).  1if Yes, enter the name of the foreign country: Implementation of Foreign Bank and Financial Accounts (FBAR).  1if Yes in the filled Form 11 and 1 foreign country: Implementation of Filled Provided				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garming (sambling) winnings to prize winners?  2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  b If at least one is reported on line 2a, did the organization line all required federal employment tax returns?  About If the sum of lines Ia and 2a is greater than 250, you may be required to e-file (see instructions)  3b Did the organization in seminated business gross income of \$1,000 or more during the year?  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; accountly over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization file Form 8866.77  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions and party for goods and services provided to the payor?  7 b If "Yes," did the organization motify the donor of the value of the goods or services provided?  7 c Jorganization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  8 b If "Yes," did the organization mak		· · · · · · · · · · · · · · · · · · ·			
a 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  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  If "Yes," has if filed a Form 990-T for this year? If "No" to file 3b, provide an explanation in Schedulo O.  If "Yes," has if filed a Form 990-T for this year? If "No" to file 3b, provide an explanation in Schedulo O.  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; ▶  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  If "Yes," enter the name of the foreign country: ▶  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  If "Yes," of the organization a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8866-1?  Did any taxable party notify the organization file Form 8866-1?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions to the foreign solicit any contributions for gifts were not tax deductible as charitate contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170c).  Organizations stall, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 88282?  If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization sell, exchange, or otherwise dispose of tangible personal property or which it was r	_	· · · · · · · · · · · · · · · · · · ·			ĺ
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  b if at least one is reported on line 2a, did the organization line all required federal employment tax returns?  3b Did the organization of the more and a last greater than 250, you may be required to e-file (see instructions)  3c Did the organization have unrelated business gross income of \$1,000 or more during the year?  b if "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.  At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountil?  b if "Yes," enter the name of the foreign country. ►  See instructions for filing requirements for FinCEM Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  Was the organization a party to a prohibited tax shelter transaction?  b Did any taxable party notify the organization file form 8886-T?  b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization file form 8886-T?  b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7a   View organization seems organization endities of the value of the goods or services provided?  b If "Yes," did the organization include with every solicitation an express statement that such contributions organization endities of the payor?  b If "Yes," did the organization endities the payor?  c Did the organization seems organization endities of the solicitation	С				_ +
Statements, filed for the calendar year ending with or within the year covered by this return    b If at least one is reported on line 2d, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions)  John the organization have unrelated business gross income of \$1,000 or more dump the year?  John the real rise of the see see that the see tha	0-		1C	<b>✓</b>	<b></b>
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines is and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0  4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts)?  5b If "Yes," enter the name of the foreign country: Image:	Za				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-rife (see instructions)  3 Did the organization have unrelated business gross income of \$1,000 or more dumpt the year?  5 If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.  44 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts over, a financial account in a foreign country (such as a bank account, securities account, or other financial because the financial accounts over, a financial accounts over a financial accounts (FBAR).  5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 Was the organization aparty to a prohibited tax shelter transaction?  6 If "Yes" to line 5 aor 5b, did the organization file form 8886-17  6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization selle, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822?  8 If "Yes," indicate the number of Forms 8282 filed during the year  9 Did the organization sell, exchange, or otherwise dispose of tangible personal benefit contract?  10 Did the organization selle, exchange, or otherwise dispose of tangible personal benefit contract?  11 Did the organization selle, exchange, or otherwise dispose of tangible personal benefit contract?  12 Did the organization selle variation in directly or indirectly, to pay premiums on a personal benefit c	_		:		
3a	D		2b		<u></u>
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule Q .  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country: ▶  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6f 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 organization solicit any contributions that were not tax deductibles as charitable contributions? or gifts were not tax deductibles?  7b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  9c Did the organization state may receive deductible as contributions under section 170(c).  9c If "Yes," indicate the number of Forms 8282 filed during the year  9c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9c If "Yes," indicate the number of Forms 8282 filed during the year  9c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9c The organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9c The organization received any funds	2-		-		
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Did the sponsoring organization make any taxable distributions under section 4966?	^		8		<b>-</b>
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . 14b			140		
					├ <u>▼</u>
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	Governance, Management, and Disclosure For each "Yes" response to lines 2 th	_							
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change								
^ L:	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u> </u>	<u> </u>					
Secti	on A. Governing Body and Management	<u> </u>		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 5		162	-140				
ıa	If there are material differences in voting rights among members of the governing body, or	10 5							
	if the governing body delegated broad authority to an executive committee or similar								
	committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent	1b 5							
2	Did any officer, director, trustee, or key employee have a family relationship or a business in	elationship with							
	any other officer, director, trustee, or key employee?		2	✓	1				
3	Did the organization delegate control over management duties customarily performed by or								
	supervision of officers, directors, or trustees, or key employees to a management company or other	•	3		✓				
4	Did the organization make any significant changes to its governing documents since the prior Form 99		4		✓_				
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		<b>✓</b>				
6	Did the organization have members or stockholders?		6	-	<b>✓</b>				
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?	• •	7.		,				
b	Are any governance decisions of the organization reserved to (or subject to approva		7a		<b>✓</b>				
U	stockholders, or persons other than the governing body?	• •	7b		1				
8	Did the organization contemporaneously document the meetings held or written actions un		76		_				
	the year by the following:	donarion daming			·				
а	The governing body?		8a	1					
b	Each committee with authority to act on behalf of the governing body?		8b						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot								
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		✓				
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Co									
			r	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	fauch chantem	10a		<b>✓</b>				
b	affiliates, and branches to ensure their operations are consistent with the organization's exem		10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	• • •	טטו						
	The time of garages provided a complete copy of time for the an incomplete of the governing body boton	e filing the form?	112	1					
D	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	-	11a	✓					
12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13	-		<b>√</b>					
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		11a 12a 12b	<b>V V</b>					
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Did the organization regularly and consistently monitor and enforce compliance with the	e nse to conflicts?	12a	<b>&gt; &gt; &gt;</b>					
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e nse to conflicts?	12a 12b 12c	<b>&gt; &gt; &gt; &gt;</b>					
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Did the organization regularly and consistently monitor and enforce compliance with the indescribe in Schedule O how this was done	e nse to conflicts?	12a 12b 12c 13	<b>y y y</b>	<b>✓</b>				
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12a b c	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Did the organization regularly and consistently monitor and enforce compliance with the process in Schedule O how this was done	e rise to conflicts?  coolicy? If "Yes,"	12a 12b 12c 13	✓ ✓ ✓	<b>✓</b>				
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12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Did the organization regularly and consistently monitor and enforce compliance with the process in Schedule O how this was done	e nse to conflicts?  policy? If "Yes,"  and approval by and decision?	12a 12b 12c 13 14	<b>&gt; &gt; &gt; &gt; -</b>	<b>✓</b>				
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12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13	e rise to conflicts?  policy? If "Yes,"   and approval by and decision?	12a 12b 12c 13 14	<b>V V V</b>	<b>✓</b>				
12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13	e nse to conflicts?  policy? If "Yes,"   and approval by and decision?   lar arrangement	12a 12b 12c 13 14	✓ ✓ ✓	<b>✓</b>				
12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13	e nse to conflicts?  policy? If "Yes,"   and approval by and decision?   lar arrangement   n to evaluate its	12a 12b 12c 13 14 15a 15b	✓ ✓ ✓	✓ ✓				
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	e nse to conflicts?  policy? If "Yes,"  and approval by and decision?  lar arrangement  to evaluate its o safeguard the	12a 12b 12c 13 14 15a 15b	✓ ✓ ✓	✓ ✓				
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	e nse to conflicts?  policy? If "Yes,"  and approval by and decision?  lar arrangement  to evaluate its o safeguard the	12a 12b 12c 13 14 15a 15b	✓ ✓ ✓	✓ ✓				
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	e nse to conflicts?  policy? If "Yes,"  and approval by and decision?  lar arrangement  to evaluate its o safeguard the	12a 12b 12c 13 14 15a 15b	✓ ✓ ✓	<b>√</b>				
12a b c 13 14 15 a b 16a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	e rise to conflicts?  policy? If "Yes,"  and approval by and decision?  lar arrangement  to evaluate its o safeguard the	12a 12b 12c 13 14 15a 15b	-	V				
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Did the organization regularly and consistently monitor and enforce compliance with the process in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?  on C. Disclosure  List the states with which a copy of this Form 990 is required to be filed None  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	e rise to conflicts?  policy? If "Yes,"  and approval by and decision?  lar arrangement  to evaluate its o safeguard the	12a 12b 12c 13 14 15a 15b	-	V				
12a b c 13 14 15 a b 16a b	Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Did the organization regularly and consistently monitor and enforce compliance with the process in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or simil with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?  On C. Disclosure  List the states with which a copy of this Form 990 is required to be filed None  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply.	e nse to conflicts?  policy? If "Yes,"  and approval by and decision?  lar arrangement  to evaluate its o safeguard the  nd 990-T (Section	12a 12b 12c 13 14 15a 15b	-	V				
12a b c 13 14 15 a b 16a b	Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Did the organization regularly and consistently monitor and enforce compliance with the process in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or simil with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?  On C. Disclosure  List the states with which a copy of this Form 990 is required to be filed None  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a 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).	e rise to conflicts?  policy? If "Yes,"  and approval by and decision?  and arrangement  to evaluate its o safeguard the  and 990-T (Section the dule O)	12a 12b 12c 13 14 15a 15b	c)(3)s	√ only)				
12a b c 13 14 15 a b 16a b	Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Did the organization regularly and consistently monitor and enforce compliance with the process in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or simil with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?  On C. Disclosure  List the states with which a copy of this Form 990 is required to be filed None  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply.	e rise to conflicts?  policy? If "Yes,"  and approval by and decision?  and arrangement  to evaluate its o safeguard the  and 990-T (Section the dule O)	12a 12b 12c 13 14 15a 15b	c)(3)s	√ only)				
12a b c 13 14 15 a b 16a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	e rise to conflicts?  policy? If "Yes,"  and approval by and decision?  lar arrangement  to evaluate its o safeguard the  and 990-T (Section the dule O)  ints, conflict of interesting the section of th	12a 12b 12c 13 14 15a 15b	c)(3)s	√ only)				

Form	990	(201	5)

Page 7

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) (B)  Name and Title Average hours per week (list ar		(do n box, i	ot ch unles	Pos neck ss pe d a d	tion more rson irect	than our trust	one an tee)	(D)  Reportable compensation from	(E)  Reportable compensation from related	(F) Estimated
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Justin Arnot										
Director, Secretary/Treasurer	1.0	✓		1				0	0	0
(2) John Haley										
Director, President and Executive Director	10.0	1		✓				0	0	0
(3) Mark Peterkins	ļ									
Director	1.0	<b>✓</b>	<u></u>	ļ				0	0	0
(4) Ken Roth	ļ	_								
Director	1.0	<b>✓</b>	_					0	0	0
(5) Cathy Murray	ļ									
Director	1.0	<b>✓</b>				ļ .		0	0	0
(6)	<del> </del>									
(7)							_			
(8)										
(9)							_			
(10)										
(11)										
(12)										
(13)										
(14)										

(A) Name and title		(B) Average hours per	box, ı	unles	Pos eck s pe	more rson	than out	n an	(D)  Reportable compensation	(E) Reportable compensation	(F) imated ount of			
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatior (W-2/1099-MI		comp fro orga and	other bensation om the inizatio related nization	on d
(15) N/	A													
(16)														•
(17)		L						-						
(18)	•		_											<del>_</del>
(19)											-			
(20)											_			
												<del></del>		
(21)														
(22)														
(23)														_
(24)							-							
(25)														
1b c	Sub-total	VII, Sectio			-		-	<b>&gt;</b>	0		0			0
2	Total (add lines 1b and 1c)	not limited			-			e) w	<u> </u>	ore than \$10	0,000	of		0
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5	ficer, dırec						 emp	oloyee, or high	est comper	nsated	3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual											4		
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or indi	vidual	5		<del>                                     </del>
Section	on B. Independent Contractors	, , , , , ,										<u> </u>	<u> </u>	1 4
1	Complete this table for your five highest compensation from the organization. Repyear.													tax
	(A) Name and business add	ress							(B) Description of s	ervices	C	(C) Compen		
None		····						N/A	Α		•			0
										-				
					-	<u>-</u>		-						

Form **990** (2015)

Part VIII		Statement of Revenue	<del></del>			·	
		Check if Schedule O contains a re	sponse or note to	(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
ts	1a	Federated campaigns 1a	1192		function revenue	revenue	under sections 512-514
iran	b	Membership dues 1b					
s, G	С	Fundraising events 10					
Gift lar	d	Related organizations 1d					
ns,	е	Government grants (contributions) 1e	•				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above					
ont	g	Noncash contributions included in lines 1a-1f. \$					
	h	Total. Add lines 1a-1f	Business Code	471543			····
Program Service Revenue	20		Business code			- ·	
Šě	2a b		-			,	
9	C		·				
Š	d						
Š	e		-		<u></u>	<del></del>	
<u>Ja</u>	f	All other program service revenue.	·		·· ·		··· <del>···</del>
ē	g	Total. Add lines 2a–2f					
	3	Investment income (including divi	dends, interest,				
		, ,	▶				
	4	Income from investment of tax-exempt	bond proceeds▶				<del></del>
	5	Royalties			• • •		
		(i) Real	(ii) Personal				
	6a	Gross rents					
	ь	Less: rental expenses					,
	С	Rental income or (loss)					
	d	Net rental income or (loss)	▶		· ~-		
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					1
	b	Less: cost or other basis					
		and sales expenses .					
	С	Gain or (loss)	<u> </u>				ا ا ـــــــــــــــــــــــــــــــــــ
	d	Net gain or (loss)	•				
Other Revenue	8a	Gross income from fundraising events (not including \$					,
er Re		of contributions reported on line 1c). See Part IV, line 18	a				
돌			b	_		_	
•		Net income or (loss) from fundraising					
	9a	Gross income from gaming activities.					'
		See Part IV, line 19	a				
	b	The state of the s	b			+	
	С	Net income or (loss) from gaming ac					
	10a	Gross sales of inventory, less					
	]	returns and allowances					
		•	b				
	<u> </u>	Net income or (loss) from sales of in					
		Miscellaneous Revenue	Business Code				
	11a	Application process fees	900099	250			
	b						
	C	All other reserve	<u> </u>				
	d	All other revenue	•			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	12	Total revenue. See instructions		250	····	-	
	14	i otal levellue, dec l'Ibli utilitib		471793			

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respon	se or note to any lin		<del></del>	
	t include amounts reported on lines 6b, 7b, , 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				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	300,478	300,478		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	9,627		9,627	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	-			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
40	· · ·	147,125	147,125		
12	Advertising and promotion				
13 14	Office expenses	623		623	
15	Royalties				
16	Occupancy				
17	Travel	364	264		
18	Payments of travel or entertainment expenses	304	364		<del></del>
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	1,568		1,568	
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	Bank fees and PayPal fees	5,675	1,195	120	4,360
b	Member Care Visits	5,164	5,164	120	4,300
c		9,104	3,104		
ď					<del></del>
e	All other expenses				·
25	Total functional expenses. Add lines 1 through 24e	470,624	454,326	11,938	4,360
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)		10 1/020	.,,,,,,	7,300

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	tX		<u>.</u> 🔲
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	55,340	1	56,509
	2	Savings and temporary cash investments	0		0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,		1	
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and	·		l t
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ets	_	organizations (see instructions). Complete Part II of Schedule L	<u>O</u>	-	0
Assets	7	Notes and loans receivable, net	<u>0</u>		0
•	8	Inventories for sale or use	0		0
	9 10a	Prepaid expenses and deferred charges	0	9	0
	iva	other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		10c	0
	11	Investments—publicly traded securities	0		0
	12	Investments—other securities. See Part IV, line 11	. 0	_	0
	13	Investments—program-related. See Part IV, line 11	. 0		0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11		15	Ō
	16	Total assets. Add lines 1 through 15 (must equal line 34)	55,340	16	56,509
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	0		0
	20	Tax-exempt bond liabilities	0	_	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
ies	22	Loans and other payables to current and former officers, directors,			
iji		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			<u> </u>
Liabilities	00	·	. 0		0
_	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	0	<del></del>	0
	25	Other liabilities (including federal income tax, payables to related third	<u> </u>	24	0
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	0		0
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
Ses		complete lines 27 through 29, and lines 33 and 34.			
aŭ	27	Unrestricted net assets	55,340	27	56,509
Bal	28	Temporarily restricted net assets	0	28	0
힏	29	Permanently restricted net assets	0	29	0
Ī		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			i
ō	_	complete lines 30 through 34.			ļ i
ets	30	Capital stock or trust principal, or current funds	0		0
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund	0		0
t te	32	Retained earnings, endowment, accumulated income, or other funds .	0		0
ž	33 34	Total net assets or fund balances	55,340		56,509
	34	TOTAL HADHILLES AND HEL ASSETS/TUND DAIGHCES	55,340	<u> </u>	56,509

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Part	XI Reconciliation 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			71,793
2	Total expenses (must equal Part IX, column (A), line 25)	2		4	70,624
3	Revenue less expenses. Subtract line 2 from line 1	3			1,169
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			55,340
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			56,509
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. 🗅</u>
				Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other		_		1
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain i	n	ľ	
	Schedule O.			1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				✓
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled o	or		
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	<b>-</b>	✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a		]
	separate basis, consolidated basis, or both:			1	į
	Separate basis Consolidated basis Both consolidated and separate basis		.   .		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account				
				╂	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	piain i	n		
ο-		fauth :			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	iortn I			,
<b>.</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	 .aa.+L	- 3a	<del> </del>	<b>├</b>
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		e   3b	1	
	required addit or addits, explain with in ochequie of and describe any steps taken to undergo such a	JU115.		<u> </u> m <b>99</b> (	1 (004 =
			Fo	mn サザし	」(2015)

#### SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2015

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

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

Open to Public

Inspection

Name	of the organization					Employer identification	number		
	ntive Cross Cultural Initiatives (ACC		<del></del>			72-15			
Par			<del></del>			<del></del>	ns.		
1 ne c	organization is not a private foundate or Church convention of church		•		•	•			
2									
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:								
5									
6 7	<ul> <li>☐ A federal, state, or local govern</li> <li>☑ An organization that normally described in section 170(b)(1)</li> </ul>	receives a subs	stantial part of its sup				the general public		
8	☐ A community trust described i	n section 170(b	)(1)(A)(vi). (Complete	Part II.)					
9	An organization that normally receipts from activities related support from gross investme acquired by the organization a	to its exempt int income and	functions—subject to unrelated business	certain taxable i	exceptio ncome (l	ns, and (2) no more	than 331/3% of its		
	☐ An organization organized and ☐ An organization organized and one or more publicly supported the box in lines 11a through 11a	operated exclusions d	ively for the benefit of, lescribed in <b>section 5</b>	to perfor <b>09(a)(1)</b> o	m the fur r <b>section</b>	ections of, or to carry 509(a)(2). See secti	on 509(a)(3). Check		
а	☐ Type I. A supporting organize the supported organization(sorganization. You must continuous	) the power to re	egularly appoint or ele	•		• • • •			
b	☐ Type II. A supporting organization(s). You must ce	e supporting org	ganization vested in th						
c	Type III functionally integra its supported organization(s)						y integrated with,		
d	☐ Type III non-functionally in that is not functionally integr requirement (see instructions	ated. The organi	ization generally must	satisfy a	distributi	ion requirement and			
е	Control Abraham Caller	ation received a	written determination	from the	IRS that	ıt is a Type I, Type I	I, Type III		
f	Enter the number of supported of	_							
<u> </u>	Provide the following information		ported organization(s).	<del></del>	<u>.                                      </u>				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
				Yes	No				
(A)									
(B)									
(C)									
(D)									
(E)									
Tota	1			4					

Part	• • • • • • • • • • • • • • • • • • • •						
	(Complete only if you checked th						alify under
Casti	Part III. If the organization fails to	quality unde	er the tests lis	sted below, pi	ease comple	te Part III.)	
	on A. Public Support				4		
	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	(d) 2014	<b>(e)</b> 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants.")	271,191	250,409	179,516	195,624	471,543	1,368,283
2	Tax revenues levied for the					,	
	organization's benefit and either paid						
	to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities					•	
	furnished by a governmental unit to the			1		·	
	organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	271,191	250,409	179,516	195,624	471,543	1,368,283
5	The portion of total contributions by			}			
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount	ļ					
	shown on line 11, column (f)		:				56,672
6	Public support. Subtract line 5 from line 4.						1,311,611
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	271,191	250,409	179,516	195,624	471,543	1,368,283
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						· · · · · · · · · · · · · · · · · · ·
	loss from the sale of capital assets						
	(Explain in Part VI.)	75	75	125	2,155	250	2 600
11	Total support. Add lines 7 through 10		13	123	2,133	250	2,680
12	Gross receipts from related activities, etc.	(see instruction	ons)			12	1,370,963
13	First five years. If the Form 990 is for th	•	•	d. third. fourth	or fifth tax ve		501(c)(3)
	organization, check this box and stop her	•			•		` ' ' '
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2015 (line 6	<del>-</del>		1 column (fl)	<del></del>	14	95.67 %
15	Public support percentage from 2014 Sch	•	•	. ,,,		15	93.71 %
16a	331/3% support test—2015. If the organiz						neck this
	box and <b>stop here.</b> The organization qual						
b	331/3% support test-2014. If the organ	-		-			
	check this box and stop here. The organi	zation qualifies	s as a publicly	supported org	anization .		. • 🗆
17a	10%-facts-and-circumstances test – 20						
	10% or more, and if the organization mee						
	Part VI how the organization meets the "fa			_	•	•	ıpported
	organization						. ▶ 🗆
b	10%-facts-and-circumstances test-20	14. If the orga	ınization did no	ot check a box	on line 13, 16	a, 16b, or 17a.	and line
	15 is 10% or more, and if the organizat						
	Explain in Part VI how the organization m						
	supported organization						`. <b>▶</b> □
18	Private foundation. If the organization did	d not check a l	box on line 13,	, 16a, 16b, 17a	, or 17b, checl	k this box and	see

Part III	Support Schedule for	Organizat	tions De	scribed	in Section 509(a)(2)

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

Secti	on A. Public Support	under the te	sts listed bei	Jw, piease co	omplete i art	··· <i>)</i>	<del></del>
	dar year (or fiscal year beginning in) ▶	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees	(-,			(4)	(0, =0.10	(7)
	received. (Do not include any "unusual grants.")			1			
2	Gross receipts from admissions, merchandise						<del> </del>
	sold or services performed, or facilities furnished in any activity that is related to the				1		
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an		•				
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	. <del></del>					
	Amounts included on lines 1, 2, and 3		-				<del> </del>
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						†
	received from other than disqualified		1				
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						<u> </u>
	on B. Total Support			···			<del>,</del>
	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						<del> </del>
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						<u> </u>
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carried on						<b> </b>
12	Other income. Do not include gain or loss from the sale of capital assets				1		
	(Explain in Part VI.)				]		
13	Total support. (Add lines 9, 10c, 11,		-	<del></del>			<del> </del>
	and 12.)	<del></del>			550		
14	First five years. If the Form 990 is for the organization, check this box and stop he	re	<u> </u>		-		` ' : '
	on C. Computation of Public Suppor					<del></del>	
15	Public support percentage for 2015 (line 8						%
16	Public support percentage from 2014 Sch			<u> </u>	· · · · ·	16	
	on D. Computation of Investment In					T .= T	<del></del>
17	Investment income percentage for 2015 (						%
18	Investment income percentage from 2014						%
19a	331/3% support tests – 2015. If the organ						·
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2014. If the organize line 18 is not more than 331/3%, check this line 18 is not more than 331/3%, check this line 18 is not more than 331/3%.						
00	<b>Private foundation.</b> If the organization di	=	_	•			
20		- not onson a	200 OH III 6 14	, , , , , , , , , , , , , , , , , , , ,	STOCK GIIS DOX	with see instit	

## Part IV Supporting Organizations

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

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete P	art V	(.)	
Secti	on A. All Supporting Organizations		125	
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Yes	No
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	<b>-</b>	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and If you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control?  Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to	1	1	1

determine whether the organization had excess business holdings.)

10b

Part I	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
L	below, the governing body of a supported organization?	11a 11b		ļ
	A family member of a person described in (a) above?  A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		<del>                                     </del>
	on B. Type I Supporting Organizations	1110	L	L
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	Ì		
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,		i I	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		-
2	Did the organization operate for the benefit of any supported organization other than the supported	1	-	<u> </u>
~	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>	Ì		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	-	
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed			ł
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations	<u> </u>	L	L
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
•		1		ļ
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how	ì	İ	'
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	-	ا ا
3	By reason of the relationship described in (2), did the organization's supported organizations have a	<del></del> -		ļ
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		_	
	supported organizations played in this regard.	3	<u> </u>	<u> </u>
Section	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ction	<b>s</b> ):
а	The organization satisfied the Activities Test. Complete line 2 below.			
Ь	The organization is the parent of each of its supported organizations. Complete line 3 below.			. ,
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	iee ins	structi	ons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			1
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			'
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	-	-
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	-	<del>                                     </del>	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		[	
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	-		
•	trustees of each of the supported organizations? Provide details in Part VI.	3a	<u> </u>	ļ
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard	3h	-	

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

Part		) Supporting Organi	zations (continued)	
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe	rted		
	organizations, in excess of income from activity	·		
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets	<del></del>		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2015 from Section C, line 6	<del>-</del>		
10	Line 8 amount divided by Line 9 amount	<del></del>		
	Eine o amount divided by Eine o amount		(ii)	(iii)
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)		·	
3_	Excess distributions carryover, if any, to 2015:		·	
a			<u> </u>	
b			· · · · · · · · · · · · · · · · · · ·	
С	·		·	
<u>d</u>	From 2013		·	
e	From 2014		· · · · · · · · · · · · · · · · · · ·	
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2015 distributable amount			<del></del>
<u> </u>	Carryover from 2010 not applied (see instructions)			'
J	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			· · · · · · · · · · · · · · · · · · ·
b	Applied to 2015 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
•	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			· · · ·
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а				
b				
C	Excess from 2013	<u> </u>		
d	Excess from 2014			
е	Excess from 2015			

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)							
Part II, Line	Part II, Line 10: 2011, 2012, 2013 and 2015 other income was funds received for Program Service Application Fees. 2014 income was from							
team memb	pers and missionaries participating in ACCI Gathering in Italy.							
	·							

# SCHEDULE F (Form 990)

## **Statement of Activities Outside the United States**

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

► Attach to Form 990.

lepartment of the Treasury Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

	ntive Cross Cultural Initiatives					2-1588721
Par	General Information Form 990, Part IV, line		es Outside t	the United States. Com	plete if the organization and	swered "Yes" on
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?	gibility for the	e grants or as	sistance, and the selection		
	•					_
2	For grantmakers. Describe assistance outside the Unite		the organization	on's procedures for moni	toring the use of its gran	its and other
3	Activities per Region. (The fo	llowing Part	l, line 3 table o	can be duplicated if addition	nal space 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)	North America	0	1	Program services	See Part V below	30,808
(2)	South America	0	3	Program services	See Part V below	212,231
(3)	Europe	0	4	Program services	See Part V below	34,760
(4)	Sub-Saharan Africa	0	2	Program services	See Part V below	8,267
(5)	East Asia & Pacific	0	4	Program services	See Part V below	14,412
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)	Cub total					
3a b						
c	Totals (add lines 3a and 3b)					300 478

Page 2

Schedule F (Form 990) 2015

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			South America	Orphanage Support	193,757	193,757 Wire Transfer	0	0 in/a	n/a
(2)			North America	See Part V Below	30,808	30,808 Electronic	0	0 n/a	. e/u
(3)			East Asia Pacific	See Part V Below	14,412 Check	Check	0	0 n/a	n/a
3									
(2)									
(9)									
3									
<u>(8</u>									
(6)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
c	- 1 - 4 - 4 - 4 - F				-	•			

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

Enter total number of other organizations or entities . . .

က

Schedule F (Form 990) 2015

Page 3

Schedule F (Form 990) 2015

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part III

				7.	7 4 4 7 7 7 7 7 7		(h) Machaga of
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) mainer or cash disbursement	(i) Amount or non-cash assistance	(g) Description of non-cash assistance	(u) valuation valuation (book, FMV, appraisal, other)
(1)							•
(2)							•
(6)							:
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
					i	Sch	Schedule F (Form 990) 2015

_	4
Page	4

Part	V 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)	✓ Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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)	☐ 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)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	☑ 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)	☐ Yes	<b>☑</b> No
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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	☐ Yes	<b>☑</b> No

#### 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).

Part 1, Line 2: Adventive Cross Cultural Initiatives ("ACCI") provides funds to other Christian organizations in order to help expand ACCI's ministry goals around the world. ACCI only provides funds to organizations that demonstrate a common belief in Jesus and a common appproach to ministry, as evidenced by those organizations' statements of faith and published ministry objectives. ACCI only provides funds to organizations that are registered nonprofit organizations under their home countries' laws. ACCI only provides funds to organizations with which it enters into written agreements specifying the expectations and duties of both parties. Those agreements contain requirements that the receiving organizations must report to ACCI how all funds are used, and in those agreements, ACCI maintains the right to discontinue the relationship at any time the receiving organization does not comply with the reporting requirements or if the funds are not used according to ACCI's exempt purposes. ACCI monitors the reports, and when possible, it sends representatives to visit the receiving organizations and report on how funds are being used. Part 1, Line 3, Region 1, Column (e) and Part II, Line 1, Section (1), Column (d): ACCI is a friend of a Canadian organization that is also called Adventive Cross Cultural Initiatives. The organizations are separate, and each has an independent board of directors, but the organizations work together in many ways. Both send contracted missionaries throughout the world to promote the Gospel of Jesus Christ, & both support similar Christian organizations that share the same beliefs and ministry objectives. Both boards try to meet together, and where possible, the organizations try to utilize resources in the most efficient manner possible. ACCI-Canada sends money to ACCI-US throughout the year to support ACCI-US ministries and ACCI-US sends money to ACCI-Canada to support its ministries. (As reported elsewhere in this Form 990 & its Schedules in 2015 ACCI-Canada donated \$42,578 for its ministry projects, and ACCI-US donated \$30,808 to ACCI-Canada for its ministry projects.) These ministry projects include world-wide evangelism, church planting and support, practical physical support and relief for the poor, and support of other Christian ministries doing similar work in other countries. Part 1, Line 3, Region 2, Column (e): In South/Central America, there are two projects in Belize and one in Ecuador. In the first Belize project, an ACCI contracted missionary pastors a church that reaches out to evangelize and disciple the Garifuna people group. Usually at least once per year, ACCI sends staff and short-term teams to assist the church in reaching the Garifuna people in the local Belizean community. The second project in Belize is the "Belize Micro Finance Project." This project utilizes small "microloans" to assist members of the church described above to start and support small businesses. These businesses help the church members earn a living and thereby support the church through contributions. The micro loans are paid back to the project, and the project can then use the repayments to fund additional businesses, thereby reducing poverty in the local (cont'd on next page)

### 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).

Part 1, Line 3, Region 2, Column (e) cont'd: community while assisting the local church through increased financial involvement by its
members. The Belize Micro Finance Project is overseen by an advisory board made up of Belizeans and North Americans,
including an ACCI Board member, and assisted by an ACCI staff member.
In Ecuador ACCI is a "friend" of orphanage and children's center. Several ACCI contracted missionaries have worked with this organization,
which provides love, housing, medical assistance, education and care to orphaned, abandoned and disabled children.
•
Part 1, Line 3, Region 3, Column (e): In Europe/Italy ACCI has 4 different individuals managing 4 separate ministerial projects. All serve in an
aspect to evangelize in their perspective communities (1 in Assisi, 2 in Parma and 1 Levanto) to promote the Gospel of Jesus Christ, offer
discipleship training, and any practical physical support or relief as a means of encouragement and showing God's love through their
support.
Part 1, Line 3, Region 4, Column (e): In Sub-Saharan Africa, ACCI has a contracted missionary who pastors a local church and leads a soccer
ministry. The church ministers to local believers and reaches out to the community with the hope of the Gospel of Jesus Christ. The soccer
ministry uses this popular sport to share the Gospel with people who might otherwise not attend the local church.
In Kenya a missionary leads a ministry that also promotes the Gospel of Christ, mentoring those in his community and offers support where
needed.
······
Part 1, Line 3, Region 5, Column (e) and Part II, Line 3: ACCI is a "friend" of a New Zealand nonprofit organization that operates a Christian
health club that is used to promote the Gospel of Jesus Christ to its members, and that uses its facilities and staff to provide Christian
seminars and discipleship training in the community. Several ACCI contracted missionaries work with this organization, including
serving on its board directors.

#### **SCHEDULE L** (Form 990 or 990-EZ)

### **Transactions With Interested Persons**

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

(7) (8) (9) (10)

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

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Adve	ntive Cross Cultural In	itatives								72-	15887	21		
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	(Form 990 or 990-EZ) 2015		···,		P	age 2
Part IV		olving Interested Persons. answered "Yes" on Form 990	), Part IV, line 28a, 2	28b, or 28c.		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	ation's
(4)					Yes	No
	hony ("Tony") Hedrick	See Part V below		Payment of contracted services		<b>√</b>
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Part V	Supplemental Information Provide additional information	on for responses to questions	on Schedule L (see	instructions).		
				Code and Initiation		
Part IV, L	ine (1), Columns (b) and (c): Tony	Hedrick was a founding member	er of Adventive Cross	Cultural Initiatives		
	ine (1), Columns (b) and (c): Tony in the US and in Canada. (ACCI-U					
("ACCI")		S) and ACCI-Canada are separa	te organizations, eac	h with an independent board of		
("ACCI") directors	in the US and in Canada. (ACCI-U	5) and ACCI-Canada are separa il October of 2007, and he serve	te organizations, eac	h with an independent board of stor and as a missionary		
("ACCI") directors with both	in the US and in Canada. (ACCI-U	S) and ACCI-Canada are separa il October of 2007, and he serve 07. Tony currently serves as an	te organizations, eaced as Executive Direct	h with an independent board of stor and as a missionary missionary, promoting and		
("ACCI") directors with both working	in the US and in Canada. (ACCI-US ) Tony served on both boards unto	5) and ACCI-Canada are separa il October of 2007, and he serve 07. Tony currently serves as an ada, England, Norway, Italy and	te organizations, eaced as Executive Direct ACCI-US contracted	h with an independent board of stor and as a missionary missionary, promoting and pays Tony for his contracted		

Part IV, Line (2), Columns (b), (c), and (d): As noted above and in various other parts of the Form 990 and its Schedules

ACCI-US and ACCI-Canada share a common history, and cooperate together in many ways, including combined ministry
objectives and projects and cooperative planning and fellowship. As noted elsewhere, the two organizations financially
support each others' ministries. As noted above, Tony Hedrick was a founding member of both organizations, and served on
both boards as Executive Director of both organizations. Currently John Haley serves as the Executive Director of both
organizations. Each organization's relationship with the other is outlined in their affiliate ministries contract, and
that contract also governs transactions between the organizations. Generally, those transactions occur monthly, and
involve the transfer of funds between the two organizations for ministry project support. The organizations use a bookrecognition system, where donations between the two are offset, with the organization donating the greater amount
actually sending the difference to the other organization, but with both organizations recording the total transfers on
their books. All transactions, per the contract, must be for ministry purposes, and must be reported to each

organization's respective boards.

Schedule O (Form 990 or 990-EZ) (2015)		Page Z
Name of the organization	Employer identification number	
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#### SCHEDULE O (Form 990 or 990-EZ)

## 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.

OMB No 1545-0047

\_\_\_\_\_ Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Employer identification number

Adventive Cross Cultural Initiatives	72-1588721
Part VI, section A, Line2: Justin Arnot (Director and Secretary) and John Haley, (Director and Chairman	n, President and Executive Director) are
both members of the law firm Arnot and Haley, PLLC. The law firm has no dealings with Adventive Cro	ss Cultural Initiatives ("ACCI") and
neither Mr. Arnot or Mr. Haley receive any funds from ACCI.	
Part VI, Section B, Line 11b: Each member of the Board of Directors receives a draft copy of the Form	990 and its applicable schedules. Each
member of the board must then either make comments or suggested changes, or approve the draft. Or	nce the draft is in a form that is
approved by all Directors, then it is signed and sent to IRS.	
Part VI, Section B, Line 15b: None of the questions in 15a-b apply to ACCI because it has no employee	s and none of its executives or officers
	s, und hone of its exceditives of officers
or directors receive any compensation. ACCI does review all project payments made to its missionary	contractors to make sure that such
payments are reasonable and in line with what other missionaries working in similar geographic region	ns receive.
Part VI, Section B, Line 12c: Forms were sent to Board Members to sign and return confirming no conf	lict of interest.
Part VI, Section C, Line 19: Although no one has ever asked to see ACCI's governing documents, confi	ict of interest policy, or financial
statements, ACCI has all of these documents in forms ready to be sent to anyone requesting them, eith	ner in electronic format or in paper
format.	
Part IX, Line 11g: Other Expenses - Project payments to ACCI contracted missionaries paid in 2015 - \$	147,035.
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