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Short Form Return of Organization Exempt From Income Tax

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

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the 2016 calendar year, or tax year beginning <u>1/1/2016</u> , and ending <u>3/31/2016</u>	
B	<input type="checkbox"/> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	
	C Name of organization <u>Indians for Civic Action</u>	D Employer identification number <u>38-3884600</u>
	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite <u>1001 Bella Vista Avenue</u>	E Telephone number <u>510-393-4549</u>
	City or town State ZIP code <u>Oakland CA 94610</u>	F Group Exemption Number ▶
	Foreign country name Foreign province/state/county Foreign postal code	

G Accounting Method: Cash Accrual Other (specify) ▶ _____

I Website: ▶ N/A

J Tax-exempt status (check only one) — 501(c)(3) 501(c) (4) ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 26,972

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I

	Description	Line	Amount
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	26,932
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c Less: direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	0	
7a Gross sales of inventory, less returns and allowances	7a		
b Less: cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0	
8 Other revenue (describe in Schedule O)	8	40	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	26,972	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	9,025
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	10
	16 Other expenses (describe in Schedule O)	16	5,326
	17 Total expenses. Add lines 10 through 16	17	14,361
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	12,611
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	97,118
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	100,425
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	210,154

For Paperwork Reduction Act Notice, see the separate instructions.

4 G7



Part II Balance Sheets. (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II.

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	89,686	81,770
23 Land and buildings		23
24 Other assets (describe in Schedule O)	10,329	131,200
25 Total assets	100,015	212,970
26 Total liabilities (describe in Schedule O)	2,897	2,816
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	97,118	210,154

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III.

What is the organization's primary exempt purpose? Advocating for social and environmental justice in India

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28 <u>Advocating for social and environmental justice in India - See attached narrative for 2016 accomplishments</u>		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	15,782
29		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses. (add lines 28a through 31a)	32	15,782

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Sharanya Krishna Prasad Secretary	Hr/WK 2.00	0	0	0
Stefanie Faucher Treasurer	Hr/WK 2.00	0	0	0
Caroline Howe President	Hr/WK 5.00	0	0	0
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V.

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name.
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities...
35 b If "Yes," to line 35a, has the organization filed a Form 990-T for the year?
35 c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice...
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions.
37 b Did the organization file Form 1120-POL for this year?
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38 b If "Yes," complete Schedule L, Part II and enter the total amount involved.
39 Section 501(c)(7) organizations. Enter:
39 a Initiation fees and capital contributions included on line 9.
39 b Gross receipts, included on line 9, for public use of club facilities.
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
40 b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year...
40 c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year...
40 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.
40 e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed.
42 a The organization's books are in care of Stefanie Faucher Telephone no. 510-393-4549
Located at 1001 Bella Vista Avenue City Oakland ST CA ZIP + 4 94610
42 b 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...
42 c At any time during the calendar year, did the organization maintain an office outside the United States?
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year.
44 a Did the organization maintain any donor advised funds during the year?
44 b Did the organization operate one or more hospital facilities during the year?
44 c Did the organization receive any payments for indoor tanning services during the year?
44 d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments?
45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45 b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.

Table with 3 columns: Yes, No, and a numerical column. Row 46: Yes (), No (), 46.

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 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.
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
49 a Did the organization make any transfers to an exempt non-charitable related organization?
b If "Yes," was the related organization a section 527 organization?

Table with 3 columns: Yes, No, and a numerical column. Rows 47-49b.

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation, (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation.

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer Stefanie Faucher Treasurer Date

Paid Preparer Use Only Print/Type preparer's name Robin Braverman Preparer's signature Robin Braverman Date 2/9/2017 Check [X] if self-employed PTIN P01279892 Firm's name Robin Braverman Associates Firm's address 1900 Aspenridge Court, Walnut Creek, CA 94597 Firm's EIN Phone no 925-979-1998

May the IRS discuss this return with the preparer shown above? See instructions

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.

▶ 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.

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Indians for Civic Action

Employer identification number

38-3884600

Form 990-EZ, Part I, Line 8, Other Revenue: Gain on Currency Exchange: 40

Form 990-EZ, Part I, Line 16, Other Expenses: Travel: 793

Form 990-EZ, Part I, Line 16, Other Expenses: Supplies: 208

Form 990-EZ, Part I, Line 16, Other Expenses: Telephone: 104

Form 990-EZ, Part I, Line 16, Other Expenses: Bank Fees, On-line fees, and Filing fees: 218

Form 990-EZ, Part I, Line 16, Other Expenses: Information Technology: 3,811

Form 990-EZ, Part I, Line 16, Other Expenses: Volunteer Recruitment Advertising: 121

Form 990-EZ, Part I, Line 16, Other Expenses: Volunteer Appreciation: 71

Form 990-EZ, Part I, Line 20, Net Assets: Grants Awarded in 2015 were not accrued into the

2015 year before the tax filing: 100,000

Form 990-EZ, Part I, Line 20, Net Assets: Contributions to open second bank account not

recorded in 2015 before tax filing: 425

Form 990-EZ, Part II, Line 24, Other Assets: Grants Receivable: Beginning of year: 0, End of

year: 100,000

Form 990-EZ, Part II, Line 24, Other Assets: Pledges Receivable: Beginning of year: 0, End of

year: 25,636

Form 990-EZ, Part II, Line 24, Other Assets: Prepaid Expenses: Beginning of year: 10,329, End

of year: 5,564

Form 990-EZ, Part II, Line 26, Liabilities: Accounts Payable: Beginning of year: 2,897, End of

year: 2,816

Name of the organization

Employer identification number

Indians for Civic Action

38-3884600

Area with horizontal dashed lines for additional information.