

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493041016517

OMB No 1545-0047

Open to Public Inspection

# Form 990

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

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

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

For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016

<b>B</b> Ch	eck if applicabl	C Name of organization			D Emplo	oyer id	entification number
_	ddress change	Peace Development Fund			04-2	73879	94
	lame change	Doing business as					
Ir	nitial return				E Teleph	one nu	mhor
return	/terminated nended return	Number and street (or P O box if mail is 44 N Prospect St PO Box 1280	not delivered to street address) Room/	suite	Е Тегері	ione na	mber
∏Ap	pplication pendi	g City or town, state or province, country, a Amherst, MA 01002	nd ZIP or foreign postal code		<b>G</b> Gross	receipts	s \$ 3,151,591
		<b>F</b> Name and address of principal of	ficer	H(a) I	s this a grou	p retur	n for
				9	subordinates? No	•	⊤ Yes 🗸
	ax-exempt state				Are all subord	linates	Yes No
	ix-exempt stati	s	no ) 4947(a)(1) or 527		ncluded? f "No," attacl	h a list	t (see instructions)
J W	ebsite: ► w	ww peacedevelopmentfund org			Group exemp		,
K For	m of organizati	on 🗸 Corporation Trust Association	Other ►	<b>L</b> Year	of formation 1	981 I	<b>M</b> State of legal domicile MA
Pa	<u> </u>	<b>nmary</b> escribe the organization's mission or n	nost significant activities				
Activities & Governance	organiza	on of Peace and Social Justice Peace I tions and social justice movements to a peaceful world	·				•
Vem							
ō.	2 Check	this box 🕨 🥅 if the organization discon	tinued its operations or dispose	d of more tl	nan 25% of it	s net a	assets
<b>න්</b> ග	3 Numbe	r of voting members of the governing be	ndy (Part VI line 1a)			з	8
ıtıe,		r of independent voting members of the	, ,			4	8
ctiv	5 Total n	umber of individuals employed in calen	dar year 2015 (Part V, line 2a)			5	11
⋖	6 Total n	umber of volunteers (estimate if neces	sary)			6	8
		nrelated business revenue from Part V	* **			7a	0
	<b>b</b> Net unre	lated business taxable income from Fo	orm 990-1, line 34	· · · ·	Prior Year	7b	Current Year
	8 Con	ributions and grants (Part VIII, line 1	٦١		1,834	918	2,954,952
₫:		ram service revenue (Part VIII, line 2		,226	143,051		
Ravenue	1	stment income (Part VIII, column (A),	6,417		6,441		
æ	<b>11</b> Oth	er revenue (Part VIII, column (A), lines	5,6d,8c,9c,10c,and11e)		10	,738	6,310
	<b>12</b> Tota 12)	l revenue—add lines 8 through 11 (mu	st equal Part VIII, column (A), l	ıne	1,954	,299	3,110,754
	·	its and similar amounts paid (Part IX, o	column (A), lines 1-3)		1,504	,774	2,198,511
	<b>14</b> Ben	efits paid to or for members (Part IX, co	olumn (A), line 4)				0
φ	<b>15</b> Sala 5-1	ries, other compensation, employee be n i	nefits (Part IX, column (A), lines	5	330	,491	339,396
Expenses		。, essional fundraising fees (Part IX, colu	ımn (A), lıne 11e)				0
хbе		fundraising expenses (Part IX, column (D), line					
ш	<b>17</b> Oth	er expenses (Part IX, column (A), lines	11a-11d, 11f-24e)		149	,316	167,344
	<b>18</b> Tota	l expenses Add lines 13-17 (must eq	ual Part IX, column (A), line 25)	)	1,984	,581	2,705,251
	<b>19</b> Rev	enue less expenses Subtract line 18 fr	om line 12		-30	,282	405,503
Net Assets or Fund Balances				Beginn	ing of Current	Year	End of Year
sset Bafa	<b>20</b> Tota	l assets (Part X, line 16)			872	,317	1,292,901
P A P	<b>21</b> Tota	l liabilities (Part X, line 26)			8	,400	30,000
		assets or fund balances Subtract line	21 from line 20		863	,917	1,262,901
Unde	er penalties o	nature Block f perjury, I declare that I have examine					
	nowledge an arer has any	d belief, it is true, correct, and complet knowledge	e Declaration of preparer (other	than office	r) is based or	n all in	formation of which
	_ I B	* * * *			2017-01-13		
Sign	י און ח	nature of officer			Date		
Her	1 1 1 1	ul Haible Executive Direc					
		Print/Type preparer's name Pre	parer's signature	Date		PTIN	
Pai	d		bert Calcasola	2017-02-10	Check   ıf self-employed	P002	29178
	parer	Firm's name NolanCalcasola & Co PC			Firm's EIN ► (		_
	Only	Firm's address ► PO Box 625			Phone no (41	3) 525-	4100
		East Longmeadow, MA 0102			<u> </u>		
Мау	the IRS disc	uss this return with the preparer shown	above? (see instructions) .				√Yes No

(Code ) (Expenses \$ 407.690 including grants of \$ 395.000 ) (Revenue \$ 22.888)

The Organizations Artic Community Advised Fund and the Circumpolar Consevation Union are components of an artic-focused climate change initiative which the Organization administers and sponsors, centered around CCUs observer status at the Artic Council We participate in the Artic Council through meetings and through advocacy and support for the indigeneous peoples of the Artic, known as Permanent Participants to the Artic Council We bring science and advocacy to the negotiations regarding resources, indigenous communities and climate change concerns through grants, travel support and leadership development. Total grants

made 7

See Additional Data

Other program services (Describe in Schedule O ) (Expenses \$ including grants of \$ 50,962

6,350 ) (Revenue \$

2,861)

- 4d
  - Total program service expenses ▶

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-19$ ?  If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Pait V 뉯	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<b>11</b> c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11</b> d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	<b>11</b> f		No
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<b>20</b> a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form	990 (2015)			Page <b>4</b>
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current	·		

26

27

28a

28b

**28**c

29

30

31

32

33

34

35a

35b

Νo

Νo

Nο

Νo

Nο

Νo

Νo

Νo

Nο

Nο

Νo

Νo

Νo

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

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

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

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

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

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

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

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

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

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

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

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

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

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

instructions for applicable filing thresholds, conditions, and exceptions)

30

31

	organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>990</b>	(20

Pai	rt V	<b>Statements Regarding Other IRS Filings and Tax Complianc</b> Check if Schedule O contains a response or note to any line in this				_
		Check if Schedule o contains a response of note to any line in this	rait v	· ·	Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	<b>1a</b>   13		103	110
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	<b>1b</b> 0			
		e organization comply with backup withholding rules for reportable payments to	o vendors and reportable			
·		g (gambling) winnings to prize winners?	·	1c	Yes	
2a	Enter	the number of employees reported on Form W-3, Transmittal of Wage and				
		tatements, filed for the calendar year ending with or within the year covered	<b>2a</b> 11			
<b>L</b>	•	s return		2b	Yes	
U		if the sum of lines 1a and 2a is greater than 250, you may be required to e-file			103	
3a	Did th	e organization have unrelated business gross income of \$1,000 or more during	g the year?	3a		No
b	If "Ye:	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanati</i>	on ın Schedule O	3b		
4a	Atany	, time during the calendar year, did the organization have an interest in, or a si	ignature or other authority			
		a financial account in a foreign country (such as a bank account, securities ac	count, or other financial	4a		N.a
<b>.</b>		nt) <sup>7</sup>				No
b		s," enter the name of the foreign country ▶	ly and Emanaged Associate			
	(FBAF		k and Financial Accounts			
5a	•	, he organization a party to a prohibited tax shelter transaction at any time durir	ng the tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited i		5b		No
		s," to line 5a or 5b, did the organization file Form 8886-T?		טכ		
٠	11 16	s, to line 3a of 3b, and the organization line form 6000-17		5c		
6a		the organization have annual gross receipts that are normally greater than \$10		6a		No
	_	ization solicit any contributions that were not tax deductible as charitable cont				
D		s," did the organization include with every solicitation an express statement thot tax deductible?	· · · · · ·	6b		
7	Organ	izations that may receive deductible contributions under section 170(c).				
а		e organization receive a payment in excess of \$75 made partly as a contributi		7a	Yes	
<b>.</b>		es provided to the payor?		7b	Yes	
		s," did the organization notify the donor of the value of the goods or services p e organization sell, exchange, or otherwise dispose of tangible personal propei			1 65	
٠		rm 8282?	· · · · · · ·	<b>7</b> c		No
d	If"Ye	s," indicate the number of Forms 8282 filed during the year	7d			
e	Did th	e organization receive any funds, directly or indirectly, to pay premiums on a p	nersonal henefit contract?			
_	2.4	o organization receive any names, anestry or manestry, to pay premium on a p	or of the first of	7e		No
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a perso	onal benefit contract?	7f		No
g	If the requir	organization received a contribution of qualified intellectual property, did the o	organization file Form 8899 as	<b>7</b> g		No
h		organization received a contribution of cars, boats, airplanes, or other vehicles	• • s. did the organization file a	, 9		110
		1098-C?		7h		No
8	-	oring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bu	supers holdings at any time			
		the year?	· · · · · · ·	8		No
9a	Did th	e sponsoring organization make any taxable distributions under section 4966	7	9a		No
		e sponsoring organization make a distribution to a donor, donor advisor, or rela		9b		No
10		on 501(c)(7) organizations. Enter				
а	Initiat	tion fees and capital contributions included on Part VIII, line 12	10a			
b	Gross	receipts, included on Form 990, Part VIII, line 12, for public use of club	10b			
	facılıtı		<b>.</b>			' I
		on 501(c)(12) organizations. Enter	المدا			
		Income from members or shareholders	11a			
U		st amounts due or received from them )	11b			
12a	Section	- <b>on 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990	 ) in lieu of Form 1041?	12a		
		s," enter the amount of tax-exempt interest received or accrued during the				
-	year		12b			
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the	organization licensed to issue qualified health plans in more than one state?	<b>lote.</b> See the instructions for			
		onal information the organization must report on Schedule O		<b>13</b> a		
b		the amount of reserves the organization is required to maintain by the states of the organization is licensed to issue qualified health plans	13b			
r		the amount of reserves on hand	13c			
		e organization receive any payments for indoor tanning services during the tax		14a		l I No
		s," has it filed a Form 720 to report these payments? If "No," provide an explana	•	14b		110
		, , , , , , , , , , , , , , , , , , , ,		_		

orm 990 (	2015)		Ρā
Part VI	Governance, Management, and Disclosure  For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10 describe the circumstances, processes, or changes in Schedule O. See instructions.	)b belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI		
Section	A. Governing Body and Management		
		Yes	ı
1a Enter	the number of voting members of the governing body at the end of the tay		$\Box$

1a						
	Enter the number of voting members of the governing body at the end of the tax year	1a	8	3		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	8	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a bu other officer, director, trustee, or key employee?	siness	relationship with any	2	Yes	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents sincifiled?	e the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?		elect or appoint one or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?		members, stockholders	, <b>7</b> b		No
В	$\operatorname{Did}$ the organization contemporaneously document the meetings held or written active by the following	ions u	ndertaken durıng the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedul</i> .			9		No
Se	ction B. Policies (This Section B requests information about policies not	requ.	ired by the Internal i	Reven	ue Cod	e.)
					Yes	No
)a	Did the organization have local chapters, branches, or affiliates?			10a		No
b	If "Yes," did the organization have written policies and procedures governing the ac affiliates, and branches to ensure their operations are consistent with the organizations.			10b		
La	Has the organization provided a complete copy of this Form 990 to all members of ithe form?	ts gov	erning body before filing	g		
	Describe in Schedule O the process, if any, used by the organization to review this			11a	Yes	
b	describe in Schedule of the process, if any, used by the organization to review this	Form 9	990	11a	Yes	
	Did the organization have a written conflict of interest policy? If "No," go to line 13			11a 12a	Yes	
2a						
2a 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 annual	 Ily inte	erests that could give	12a 12b	Yes	
2a 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 annual rise to conflicts?	 Ily inte	erests that could give	12a	Yes Yes	
2a 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 annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	Ily inte	erests that could give one of the could give olicy? If "Yes," describe	12a 12b	Yes Yes	
2a b c 3	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 annual rise to conflicts?	the p	erests that could give one of the could give	12a 12b 12c 13	Yes Yes Yes	
2a b c 3	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 annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with 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 rev	Ily inte	erests that could give colicy? If "Yes," describe colicy. describe	12a 12b 12c 13	Yes Yes Yes	
2a b c 3 4 5	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 annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the	illy inte the p the p the p the p	erests that could give olicy? If "Yes," describe olicy? If "in the could give olicy? If "yes," describe olicy? olicy? olicy? olicy? olicy? olicy? olicy?	12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
2a b c 3 4 5	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 annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official	illy inte the p the p the p the p	erests that could give olicy? If "Yes," describe olicy? If "in the could give olicy? If "yes," describe olicy? olicy? olicy? olicy? olicy? olicy? olicy?	12a 12b 12c 13 14	Yes Yes Yes Yes Yes	
2a b c 3 4 5	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 annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization	the p	erests that could give colory? If "Yes," describe colory in the color of the color	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No
2a b c 3 4 5 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 annual rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of 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 sim	erests that could give of collections of the could give	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No

17 List the States with which a copy of this Form 990 is required to be filed MA, NY, CA, PA, WA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

 $\overline{\checkmark}$  O wn website  $\overline{\checkmark}$  A nother's website  $\overline{\checkmark}$  U pon request  $\overline{\ }$  O ther (explain in Schedule O)

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

State the name, address, and telephone number of the person who possesses the organization's books and records ▶Paul Haible 44 N Prospect St PO Box 1280 Amherst, MA 01002 (413) 256-8306

Part VII

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	thar son is	one bot rect	not bo: th ar	chec x, unle n offic rustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) Esmeralda V Brown	1 00							_		
Director	0 00	×						0	0	C
(2) Alı El-Issa	1 00									
		×		X				0	0	a
Treasurer	0 00									
(3) Lori Goodman Director	0 00	×						0	0	O
(4) Teresa Juarez	1 00									
President		×		X				0	0	O
	0 00									
(5) Iva Kaufman		×						0	0	0
Director	0 00									
(6) Tina Reynolds	1 00	l x		×				0	0	l o
Secretary	0 00	^		^				0	U	٥
(7) Yı Chun Trıcıa Lın	1 00									
Director		×						0	0	C
	0 00									
(8) Daniel Schreck		×						0	0	o
Director	0 00									
				<u> </u>	_		<u> </u>			
		L	L	L	L		L			
		-	-	$\vdash$	$\vdash$		<u> </u>			

art VII	Section A. Officers,	Directors,	Trustees, Ke	y Employees,	and Highest	Compensated Employees	(continued)

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more t	han o	ne b both	oox, an d	heck unless officer stee)	i	( <b>D)</b> Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
		for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
1b	Sub-Total			•			•				
c d	Total from continuation shee Total (add lines 1b and 1c)	•			•	•			0	0	0
	Total number of individuals (				ne a l	isto	d abov	امد ( ۵			
2	\$100,000 of reportable com						G abov	e, w	no received more tr	iaii	

3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensa

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . .

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the

organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such ındıvıdual . Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person .

	Yes	No
3		No
4		Νo
5		Nο

## Section B. Independent Contractors

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

compensation from the organization. Report compensation for the calendar year ending w	with or within the organization's	s tax year
(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation

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

Form 99								Page <b>9</b>
Part \	/1111	Statement o						
		Check If Schedi	ule O contains a respo	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
's 8	1a	Federated cam	paigns 1a	599				
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership du	es <b>1</b> b	,				
	c	Fundraising eve	ents <b>1</b> 0	:				
ffs. I A	d	Related organiz	ations 1d					
nig.	e	Government grants						
Sin		_						
utic 1er	f	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	2,099,016				
d ja	g	Noncash contribute 1a-1f \$	ons included in lines					
in d	h	Total. Add lines	s 1a-1f		2,954,952			
				Business Code				
Program Service Revenue	2a	Administrative Fee	S	900099	143,051	143,051		
₹ ₹	Ь				,	•		
9 3	c							
₽. ¥	d	-						
S.	e							
grar	f	All other progra	am service revenue					
ď	g	Total Add lines	s 2a-2f	•	143,051			
	3		ome (including divider					
		and other simila	aramounts)	•	7,420			7,420
	4		tment of tax-exempt bond	· · · · ·				
	5	Royalties	(ı) Real	▶ (II) Personal				
	6a	Gross rents	6,310	(II) FEISOIIAI				
	Ь	Less rental expenses						
	C	Rental income or (loss)	6,310					
	d	Net rental inco	me or (loss)	_	6,310			6,310
		Gross amount	(ı) Securities	(II) Other				
	7a	from sales of assets other than inventory	39,858					
	Ь	Less cost or other basis and	40,837					
	c	sales expenses Gain or (loss)	-979					
	d	Net gain or (los			-979			-979
ne			rom fundraising					
Other Revenue		\$of contributions See Part IV , lin						
Не	Ь	Less direction	a penses b					
ō	c		(loss) from fundraising					
			rom gaming activities					
	1		penses <b>b</b> (loss) from gaming act					
	10a	Gross sales of returns and allo						
	ь	Less cost of a	oods sold <b>b</b>					
	c		(loss) from sales of inv	rentory >				
		Miscellaneous		Business Code				
	11a							
	ь							
	c	<u></u>						
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	•				
	12	Total revenue.	See Instructions .		3,110,754	143,051	0	12,751
		_			-,110,701	_ 10,001		Form 000 (2015)

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,118,223	2,118,223		
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	80,288	80,288		
4	Benefits paid to or for members				
5	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	Other salaries and wages	278,974	192,492	44,636	41,846
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)				
9	Other employee benefits	36,314	25,057	5,810	5,447
10	Payroll taxes				
		24,108	16,635	3,857	3,616
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	5,275	3,640	844	791
d	Lobbying				
е	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)	7,453	5,143	1,192	1,118
12	Advertising and promotion	12,361	8,530	1,978	1,853
13	Office expenses	3,165	2,184	506	475
14	Information technology	11,046	7,885	1,720	1,441
15	Royalties				
16	Occupancy	37,239	25,695	5,958	5,586
17	Travel	51,774	35,724	8,284	7,766
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,037	6,926	1,606	1,505
23	Insurance	4,192	2,892	671	629
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	Telephone Expense	11,047	7,621	1,768	1,658
b	Postage	6,935	4,785	1,110	1,040
c	Business Expense	4,576	3,158	732	686
d					
e	All other expenses	2,244	1,187	526	531
25	Total functional expenses. Add lines 1 through 24e	2,705,251	2,548,065	81,198	75,988
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)				

34

Total liabilities and net assets/fund balances  $\dots$   $\dots$  .

Day	t X	Polonee Cheek					1 age 11
Par	ιχ	Balance Sheet Check if Schedule O contains a response or note to any line i	n this	Part X			· · · · <u>· · </u>
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing			392,254	1	488,513
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			5,000	3	28,150
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers					
		key employees, and highest compensated employees Comp Schedule L				5	
Assets	6	Loans and other receivables from other disqualified persons section 4958(f)(1)), persons described in section 4958(c)(contributing employers and sponsoring organizations of sec voluntary employees' beneficiary organizations (see instruction of Schedule L	and 01(c)(9)		6		
\$8	7	Notes and loans receivable, net				7	
Ø	8	·				8	
	9	Inventories for sale or use				9	
	_	Land, buildings, and equipment cost or other basis				9	
	10a		10a	635,296			
	ь	Less accumulated depreciation	10b	363,473	281,860	<b>10</b> c	271,823
	11	Investments—publicly traded securities			192,746	11	503,685
	12	Investments—other securities See Part IV, line 11		ŀ		12	
	13	Investments—program-related See Part IV, line 11		ŀ		13	
	14	Intangible assets		- 1		14	
	15	Other assets See Part IV, line 11		l l	457	15	730
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .		- I	872,317	16	1,292,901
	17	Accounts payable and accrued expenses			8,400	17	30,000
	18	Grants payable			i	18	<u>·</u>
	19	Deferred revenue		ŀ		19	.,
	20	Tax-exempt bond liabilities		l		20	
	21	Escrow or custodial account liability Complete Part IV of S				21	
bilities	22	Loans and other payables to current and former officers, direkey employees, highest compensated employees, and disqu	ectors	trustees,			
<u>.</u>		persons Complete Part II of Schedule L				22	
<u>.e</u>	23	Secured mortgages and notes payable to unrelated third pai	rties			23	
_	24	Unsecured notes and loans payable to unrelated third partie	es .			24	
	25	Other liabilities (including federal income tax, payables to r and other liabilities not included on lines 17-24) Complete Part X of Schedule D	elated	I third parties,		25	
	26	Total liabilities. Add lines 17 through 25		·	8,400	26	30,000
		Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.					
anc	27	Unrestricted net assets			414,585	27	322,762
Net Assets or Fund Balances			449,332		<u> </u>		
Э Б	28	Temporarily restricted net assets	•		449,332	28 29	940,139
٥	29	Permanently restricted net assets		: '_' .		29	
or F		Organizations that do not follow SFAS 117 (ASC 958), chec complete lines 30 through 34.		'			
ets	30	Capital stock or trust principal, or current funds		ŀ		30	
155	31	Paid-in or capital surplus, or land, building or equipment fun	ıd .			31	
) t (	32	Retained earnings, endowment, accumulated income, or oth	er fun	ds		32	
ž	33	Total net assets or fund balances			863,917	33	1,262,901

1,292,901

872,317

34

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

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

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

Cash ✓ Accrual COther

Both consolidated and separate basis

Yes

Yes

Yes

2a

2b

2c

3a

3b

No

Νo

Nο

Form 990 (2015)

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis

1 Accounting method used to prepare the Form 990

**b** Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

basis, consolidated basis, or both

Schedule O

Separate basis

✓ Consolidated basis c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

Single Audit Act and OMB Circular A-133?

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

### **Additional Data**

Software ID:

Software Version:

**EIN:** 04-2738794

Name: Peace Development Fund

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code ) (Expenses \$ 50,962 including grants of \$ 6,350 ) (Revenue \$ 2,861 )
PDF sponsors educational events and programs that support community-based work, working with low income and communities of color, supporting international peace and justice, affirming principles of human rights and international law and operating in an international as well as domestic framework. A total of 7 grants were made

efile GRAPHIC print - DO NOT PROCESS SCHEDULE A

hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

described in section 170(b)(1)(A)(vi). (Complete Part II)

As Filed Data -

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)

**Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

DLN: 93493041016517 OMB No 1545-0047

**Employer identification number** 

Treasury Internal Revenue Service Name of the organization Peace Development Fund

(Form 990 or

990EZ)

Part I

1

2 3

Department of the

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

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization that normally receives a substantial part of its support from a governmental unit or from the general public

An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

04-2738794

Tota	<u> </u>							
					Yes	No		
				instructions))		Т		
				organization (described on lines 1-9 above (see	listed in your docume		monetary support (see instructions)	support (see Instructions)
Nan	ne of s	(i) supported organization	(ii)EIN	(iii) Type of	(iv) Is the orga	nızatıon	(v) A mount of	(vi) A mount of other
g		Provide the following i	nformation ab	out the supported orga	inization(s)			
f	Ente	r the number of support					· · · · · · · ·	
-	I	integrated, or Type III					15 a 1 , pc 1, 1 , pc 11, 1	, pe III lunctionally
e	_	(see instructions) You					ıs a Type I, Type II, T	vne III functionally
u	I	not functionally integra	ated The orga	anızatıon generally mu	st satisfy a dis	trıbutıon requi	rement and an attentiv	
d		supported organization					<b>), and E.</b> n with its supported org	anization(s) that is
c		Type III functionally i	integrated. A	supporting organizatio			n, and functionally integ	grated with, its
ט	I		pporting organ	nization vested in the s			manage the supported	
b	_	organization You mus	t complete Pa	rt IV, Sections A and I	В.	•	orted organization(s), b	2
a	$\Gamma$	Type I. A supporting o	rganization op	perated, supervised, oi	r controlled by	its supported	d complete lines 11e, 1 organization(s), typical tors or trustees of the	ly by giving the
11	l	one or more publicly s	upported orga	nizations described in	section 509(a	)(1) or section	nctions of, or to carry on 509(a)(2) See <b>sectio</b>	<b>n 509(a)(3).</b> Check
10	Г	An organization organi	e 30, 1975 S ized and opera	eesection 509(a)(2). ated exclusively to tes	(Complete Part t for public safe	III) ety See <b>sectio</b>	on 509(a)(4).	,
		C						

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support

(or	Calendar year fiscal year beginning in) ▶	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
1		1,413,572	1,124,996	1,999,968	1,834,918	2,954,952	9,328,406
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,413,572	1,124,996	1,999,968	1,834,918	2,954,952	9,328,406
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						562,495
6	Public support. Subtract line 5						8,765,911
	from line 4						0,, 00,511
S	ection B. Total Support						
	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
•	fiscal year beginning in) ▶	` '			` ,		• •
7	Amounts from line 4	1,413,572	1,124,996	1,999,968	1,834,918	2,954,952	9,328,406
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	97,671	12,301	11,475	14,375	13,730	149,552
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	<b>Total support.</b> Add lines 7 through 10						9,477,958
12	Gross receipts from related activit	ries, etc (see inst	ructions)	I		12	143,051
13	First five years.If the Form 990 is			third, fourth, or fi	fth tax year as a	section 501(c)(3)	
	check this box and <b>stop here</b>					▶ ┌	<u> </u>

	Section	C.	Computation	OT	Public	Support P	rercentage
--	---------	----	-------------	----	--------	-----------	------------

supported organization

14	Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	92 490 %
15	Public support percentage for 2014 Schedule A, Part II, line 14	15	91 000 %

16a 33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 

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

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

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

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

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

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

Se	ction A. Public Support						
	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
•	iscal year beginning in) ▶	(-)	(-)	(0)_00	(-)	(-)	(1)
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished						
	in any activity that is related to						
	the organization's tax-exempt						
_	purpose						
3	Gross receipts from activities that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit						
	to the organization without charge <b>Total.</b> Add lines 1 through 5						
6	Amounts included on lines 1, 2,						
/a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and						
	3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of						
_	the amount on line 13 for the year Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
٥	from line 6)						
Se	ction B. Total Support		•		•		•
	Calendar year						757
(or f	iscal year beginning in) ▶	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> Total
9	Amounts from line 6						
0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
b	and income from similar sources Unrelated business taxable						
U	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
C	Add lines 10a and 10b						
L1	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
L3	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
L4	First five years.If the Form 990 is	cor the organizati	n's first, second	, third, fourth, or	I fifth tax vear as a	section 501(c	)(3) organization
	check this box and <b>stop here</b>		,	,,,	,		<b>▶</b> □
Se	ction C. Computation of Pub	lic Support P	ercentage				-
15	Public support percentage for 2015			13 column (f))		45	
		•		15, column (1))		15	
L6	Public support percentage from 20		<u> </u>			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge			
L7	Investment income percentage for	<b>2015</b> (line 10c, c	olumn (f) dıvıded	by line 13, colun	nn (f))	17	
18	Investment income percentage from	n <b>2014</b> Schedule	A, Part III, line	17		18	
L9a	33 1/3% support tests—2015.If the				l line 15 is more t		nd line 17 is not
-	more than 33 1/3%, check this box	=					<b>▶</b> □
b	33 1/3% support tests—2014.If the					-	•
_	18 is not more than 33 1/3%, check	-					
20	Private foundation If the organizat						

#### Part IV Supporting Organizations

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

	I, complete Sections A and D, and complete Part V )			
Se	ction A. All Supporting Organizations			
			Yes	No
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		
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	2		
3a	509(a)(1) or (2)  Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?  If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?  If "Yes," describe in <b>Part VI</b> when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?  If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	<b>3</b> c		
<b>4</b> a	Was any supported organization not organized in the United States ("foreign supported organization")?  If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?	4b		
_	If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations  Did the organization support any foreign supported organization that does not have an IRS determination under	15		 
C	organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year?  If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?  If "Yes," complete Part II of Schedule L (Form 990)	8		
<b>9</b> a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	<b>9</b> c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	<b>10</b> a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	<b>10</b> b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_	A 3.5% controlled entity of a person described in (a) or (b) above 2.16 "Vee" to a bioric provide detail in Part VI	116		1

each of the supported organizations? Provide details in Part VI

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

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

3a

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
i	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
,	Other expenses (see instructions)	7		
;	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	1		
_	instructions for short tax year or assets held for part of year)	<b>—</b>		
a L	A verage monthly value of securities	1a 1b		
b	A verage monthly cash balances			
C	Fair market value of other non-exempt-use assets	1c 1d		+
d	Total (add lines 1a, 1b, and 1c)  Discount claimed for blockage or other factors	La		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	quired)		
6 Other distributions (describe in Part VI) See instru	ictions		
· · · · · · · · · · · · · · · · · · ·	20010115		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		T	T
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015			
a			
b			
<u>c</u>			
d From 2013			
e From 2014			
f Total of lines 3a through e  g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7 Excess distributions carryover to 2016.</b> Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
<b>c</b> Excess from 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			
			(F 000 000 F7) /2.01 F

#### DLN: 93493041016517

Employer identification number

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

Department of the Treasury Internal Revenue

Name of the organization

Service

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

<u>www.irs.gov/form990</u>.

2015
Open to Public Inspection

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

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

• Section 501(c)(4), (5), or (6) organizations Complete Part III

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Pea	ace Development Fund			04-2738794	
Par	t I-A Complete if the or	ganization is exempt unde	r section 501(	c) or is a section 527	7 organization.
1 2 3	Provide a description of the or Political expenditures Volunteer hours	ganization's direct and indirect poli	tical campaign act	ivities in Part IV ▶	\$
Par	t I-B Complete if the or	ganization is exempt unde	r section 501(	c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization t	ınder section 4955	•	\$
2	Enter the amount of any excise	e tax incurred by organization man	agers under section	1 4955	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 4	720 for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
	· · · · · · · · · · · · · · · · · · ·	ganization is exempt unde			
1	• •	ended by the filing organization for			\$
2	exempt function activities	organization's funds contributed to	otner organizations	For section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter her	e and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file <b>F</b>	form 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	nd employer identification number of For each organization listed, enter ns received that were promptly and political action committee (PAC)	the amount paid fro directly delivered	m the filing organization's to a separate political orga	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
2					
3					
4					
5					
6					
For I	Paperwork Reduction Act Notice, s	 ee the instructions for Form 990 or 9	90-EZ.	at No 50084S <b>Schedule C</b>	(Form 990 or 990-EZ) 2015

Grassroots ceiling amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

## Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A	Check	<b>&gt;</b>	 — If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN
			expenses, and share of excess lobbying expenditures)

	oying Expenditures means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
Total lobbying expenditures to influence public lobbying)	opinion (grass roots	500	
Total lobbying expenditures to influence a legi	slative body (direct lobbying)		
Total lobbying expenditures (add lines 1a and	1 b)	500	
Other exempt purpose expenditures		2,704,751	
Total exempt purpose expenditures (add lines	2,705,251		
Lobbying nontaxable amount Enter the amoun	t from the following table in both columns	285,263	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		

☐ Yes	No	
If there is an amount other than zero on either line $1h$ or line $1\iota$ , did the organization file Form $4720$ reporting section $4911$ tax for this year?		
Subtract line 1f from line 1c If zero or less, enter -0-		
Subtract line 1g from line 1a If zero or less, enter -0-		

i i	Subtract line 1f from line 1c If zero or less, enter -0- If there is an amount other than zero on either line 1h		organization file	Form 4720		
•	reporting section 4911 tax for this year?		Г	Yes ∏ No		
4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a)2012	<b>(b)</b> 2013	(c)2014	<b>(d)</b> 2015	<b>(e)</b> ⊤otal
2a	Lobbying nontaxable amount	201,521	233,615	249,229	285,263	969,628
b —	Lobbying ceiling amount (150% of line 2a, column(e))					1,454,442

	J ······· J ··· /					
2a	Lobbying nontaxable amount	201,521	233,615	249,229	285,263	969,628
ь	Lobbying ceiling amount (150% of line 2a, column(e))					1,454,442
_с	Total lobbying expenditures	12,828			500	13,328
d	Grassroots nontaxable amount	50,380	58,404	62,307	71,316	242,407

12,828

363,611

Return Reference

	filed Form 5768 (election under section 501(h)).				<b>/</b> b>
or e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(	a)		(b)
ctiv	ıty	Yes	No	An	nount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	163			
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				
а	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	<b>01</b> (c	)(5), c	or sec	ction
			_		Yes N
L	Were substantially all (90% or more) dues received nondeductible by members?		_	1	
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
3					
3	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				III-A,
ar	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "				III-A,
ar 1	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."	No" C			III-A
ar 1	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	1 2a			III-A
a L 2	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	No" C			III-A
ar L a b	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	1 2a 2b 2c			III-A
ar 1 2 a b c	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	1 2a 2b			111-A,
1 2 a	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	2a 2b 2c 3			111-A,
3 Par 1 2 a b c	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	1 2a 2b 2c			III-A,

Explanation

SCHEDULE D (Form 990)

Department of the

Treasury

## **Supplemental Financial Statements**

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

Information about Schedule D (Form 990) and its instructions is at <a href="mailto:www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2015

DLN: 93493041016517

Open to Public Inspection

Interr	nal Revenue Service	` '		znopedaon
Na	me of the organization Ice Development Fund		Empl	oyer identification number
			04-2	738794
Pa		Advised Funds or Other Similar Fu	ınds c	or Accounts.
	Complete if the organization answere	ed "Yes" on Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year	21		
2	Aggregate value of contributions to (during year)	1,045,068		
3	Aggregate value of grants from (during year)	638,158		
4	Aggregate value at end of year	815,801		
5	Did the organization inform all donors and donor a funds are the organization's property, subject to		or advis	sed ✓ Yes No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?	3 3		purpose ✓ Yes No
Pa		ete if the organization answered "Yes" o	n Forn	
1	Purpose(s) of conservation easements held by th			
_	Preservation of land for public use (e.g., recr			
	education)		histor	ically important land area
	Protection of natural habitat	Preservation of a	certifie	d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution in t	he form	of a conservation
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easeme	ents	2b	
c	Number of conservation easements on a certified	` '	<b>2</b> c	
d	Number of conservation easements included in (on historic structure listed in the National Register	c) acquired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, tra	nsferred, released, extinguished, or terminate	d by the	e organization during the
	tax year ▶			
4	Number of states where property subject to cons	ervation easement is located <b>&gt;</b>		
5	Does the organization have a written policy regar violations, and enforcement of the conservation e		lling of	┌ Yes
6	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforci	ng cons	ervation easements during the
	<b>&gt;</b>			
7	A mount of expenses incurred in monitoring, insperior \$	ecting, handling of violations, and enforcing co	onserva	tion easements during the year
8	Does each conservation easement reported on Ii (B)(I) and section 170(h)(4)(B)(II)?	ne 2(d) above satisfy the requirements of sec	tion 17	0(h)(4) Yes No
9	In Part XIII, describe how the organization repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financial sements	statem	ents that describes
Par		ctions of Art, Historical Treasures, or a "Yes" on Form 990, Part IV, line 8.	or Oth	er Similar Assets.
<b>1</b> a	If the organization elected, as permitted under SI works of art, historical treasures, or other similar	FAS 116 (ASC 958), not to report in its reven		

(i) Revenue included on Form 990, Part VIII, line 1

▶ \$ \_\_\_

(ii) Assets included in Form 990, Part X

▶ \$ \_\_\_

service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

service, provide the following amounts relating to these items

Part	3111	Organizations Maintaining (continued)	Collections of A	rt, Historical	Trea	sures, or (	Other Sim	ilar As	sets
3	_	the organization's acquisition, acce tion items (check all that apply)	ssion, and other rec	ords, check any o	of the f	ollowing that	are a signific	cant use	ofits
а		Public exhibition		d ┌ ∟o	an or e	exchange prog	grams		
b	_ :	Scholarly research		<b>e</b>	her				
c		Preservation for future generations							
4	Provide Part >	de a description of the organization's (III	collections and exp	plain how they furt	her th	e organizatioi	n's exempt p	urpose i	n
5		g the year, did the organization solic is to be sold to raise funds rather tha						┌Yes	☐ No
Par	t IV	Escrow and Custodial Arrage Complete if the organization a Part X, line 21.	ngements.	· ·					<u>'</u>
1a		e organization an agent, trustee, cus ded on Form 990, Part X?	todian or other inter	mediary for contri	bution	s or other ass	sets not	☐ Yes	☐ No
ь	T # "	Yes," explain the arrangement in Pa	rt VIII and complet	a tha fallowing tak	alo			A mo	unt
C		-	it XIII and complet	e the following tal	ЛС	1c		Aiio	
_		ginning balance							
d		ditions during the year				1d			
e		tributions during the year				1e			
f		ding balance				1f			
2a	Did th	ne organization include an amount or	Form 990, Part X,	ine 21, for escrov	worcu	stodial accou	ınt lıabılıty?	☐ Yes	☐ No
b	If"Ye	es," explain the arrangement in Part :	XIII Check here ıf t	he explanation ha	as beei	n provided in	Part XIII   .		
Pai	rt V	Endowment Funds. Complet							
			(a)Current year	(b)Pnor year	b (c)	Two years back	(d)Three yea	rs back	(e)Four years back
<b>1</b> a	Begir	nning of year balance	27,034						
b	C ont	ributions • • • • • • •	32,966	27,034	l				
С	Net II losse	nvestment earnings, gains, and	431						
d	Grant	ts or scholarships	500						
e		r expenditures for facilities irograms							
f	Δdmi	nistrative expenses	20						
		of year balance	59,911	27,034	1				
9	·	· · · · ·							
2	Provi	- de the estimated percentage of the c	urrent year end bala	ance (line 1g, colu	ımn (a	)) held as			
а	Board	designated or quasi-endowment <b>&gt;</b>							
ь		anent endowment ► 100 000 %							
c		orarily restricted endowment >							
		ercentages on lines 2a, 2b, and 2c s	should equal 100%						
<b>3</b> a	A re th	nere endowment funds not in the pos ization by	•	iization that are h	eld and	d admınıstere	d for the		Yes No
	_	related organizations						3a(	
		lated organizations						3a(	<del></del>
b		es" on 3a(II), are the related organiza		red on Schedule	R?.			. 3l	<del>-</del>
4	Desc	ribe in Part XIII the intended uses o	f the organization's	endowment funds					
Par	t VI	Land, Buildings, and Equip							
		Complete if the organization a	nswered 'Yes' to		IV, lır				
		Description of property		(a) Cost or other (investme		<b>(b)</b> Cost or other ba (other)		mulated reciation	(d)Book value
1a	Land								
b	Buildin	gs				175,0	000	52,85	7 122,143
c	Leaseh	nold improvements				248,9	963	100,31	9 148,644
٦	Eaunn	aant				211.2	22	210.20	1 036

271,823

Part VII		Complete if the org	janization answered 'Yes	s' on Form 990, Part IV, line 11b.
	See Form 990, Part X, line 12.  (a) Description of security or catego (including name of security)	ry	(b)Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financia	il derivatives			Sost of the of year market variat
(2)Closely-	held equity interests			
<b>(3)</b> 0 ther				
T-1-1 (C-1:::	(h)			
Part VIII	Investments—Program Related.	<u>F</u>		
. art viii	Complete if the organization answer	ed 'Yes' on Form 9	990, Part IV, line 11c. <sub>Se</sub> ,	e Form 990, Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation
				Cost or end-of-year market value
	nn (b) must equal Form 990, Part X, col (B) line 13 )	<u> </u>		
Part IX	Other Assets. Complete if the organiza  (a) Des	tion answered 'Yes' ( scription	on Form 990, Part IV, line 1	(b) Book value
(1) Prepaid		,		730
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) lin	e 15 )		
Part X	Other Liabilities. Complete if the o	rganızatıon answei	red 'Yes' on Form 990, P	art IV, line 11e or 11f.
	See Form 990, Part X, line 25.  (a) Description of liability	(b) Book val	110	
1.	(a) Description of Hability	(D) DOOK Val		
Federal inc	ome taxes			
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25 )	<b>•</b>		
	fan	vide the text of the fe	otnoto to the organization's	financial statements that reports the

Schedule D (Form 990) 2015

2,705,251

Schedule D (Form 990) 2015

1	Total revenue, gains, and other support per audited financial statements	1	3,104,235
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a -6,519		
b	Donated services and use of facilities	1	
c	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII )	1	
e	Add lines <b>2a</b> through <b>2d</b>	2e	-6,519
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,110,754
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	3,110,754
Par	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s pe	Return.
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	1	
1	Total expenses and losses per audited financial statements	1	2,705,251
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,705,251
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		

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

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

Add lines 4a and 4b .

Return Reference

Other (Describe in Part XIII ) . .

b

c

information

V, line 4)

humanitarian crises or technical assistance. It is designed to make funds available for guick shortterm delivery to hot spots of opportunity for organizing in marginalized urban and rural communities

4c

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

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

Explanation

Endowment funds intended uses (Part The endowment (De Colores) is a rapid response grantmaking endowment. The endowments objective is impact positive, dynamic-shifting opportunities, rather than provide emergency response for

Schedule D (Form 990) 2015		Page <b>5</b>		
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
		_		

efile GRAPHIC print - DO NO	T PROCESS	As Filed Da	ta -	DLN:	93493041016517
SCHEDULE F (Form 990)	atement of	Activities (	Outside the Unit	ed States	OMB No 1545-0047
Denartment of the Treasury	·	Part IV, line ► Attach t	n answered "Yes" to Form 14b, 15, or 16. to Form 990. and its instructions is at wi	,	2015 Open to Public Inspection
Name of the organization Peace Development Fund				<b>Employer iden</b> 04-2738794	tification number
Part I General Informati Complete if the orga			he United States. orm 990, Part IV, line		
1 For grantmakers. Does the and other assistance, the gused to award the grants o	ırantees' eligibi			-	「✓ Yes  No
2 For grantmakers. Describe assistance outside the Unit		rganızatıon's p	rocedures for monitori	ng the use of its gran	nts and other
3 Activites per Region (The following	owing Part I, line	3 table can be d	uplicated if additional spa	ace is needed )	
(a) Region	<b>(b)</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 program service, describe specific type of service(s) in region	a <b>(f)</b> Total expenditures for and investments in region
( 1) Central America and the Caribbean			Grant making		21,000
( 2) South America			Grant making		9,639
(3) North America Not the United States			Grant making		21,649
(4) Europe including Iceland and Greenland			Grant making		21,000
(5) East Asia and the Pacific			Grant making		7,000
3a Sub-total b Total from continuation sheets to Part I	6				80,288
c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, se	ee the Instructions	for Form 990.	Cat	No 50082W <b>Sche</b> e	80,288 dule F (Form 990) 2015

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

	tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter $\blacktriangleright$	·
3	Enter total number of other organizations or entities	•

	ther Assistance duplicated if addit			ed States. Complete	if the organization a	nswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
( 2)							
(3)							
(4)							
( 5)							
(6)							

(2)				
(3)				
(4)				
( 5)				
(6)				
(7)				
(8)				
(9)				
( 10)				
(11)				
( 12)				
(42)				

(4)				
( 5)				
(6)				
(7)				
(8)				
(9)				
( 10)				
( 11)				
( 12)				
( 13)				
( 14)				
( 15)				
( 16)				
( 17)				
( 18)				
			Schedu	lle F (Form 990) 2015

(9)				
( 10)				
(11)				
( 12)				
( 13)				
( 14)				
( 15)				
(16)				,
( 17)				
( 18)				
			Schedu	ıle F (Form 990) 2015

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 ▼ No

Old the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form

5713, do not file with Form 990)

Yes **▼** No

#### **Additional Data**

Software ID: Software Version:

**EIN:** 04-2738794

Name: Peace Development Fund

Schedule F (Form 990) 2015

Page **5** 

(i) Method of

## Supplemental Information

(h) IRS code

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).

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

(a) Name of organization	section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Community Organizing	7,000				
		Central America and the Caribbean	Womens Issues	7,000				
		Central America and the Caribbean	International Solidarity	7,000				
		South America	Health	6,639				

(b) IRS code (i) Method of (g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) North America Not Community 15,000 the United States O rganizing North America Not Womens Issues 6,649

3,000

10,000

the United States

Europe including

Economic Justice &

Development

Environment

South America

Iceland and Greenland

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

(b) IRS code (i) Method of (g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash cash disbursement and EIN(if cash grant (book, FMV, organization assistance assistance applicable) appraisal, other) Europe including Immigrant and 1.000 Iceland and Refugee Organizing Greenland Fast Asia and the Womens Issues 7,000

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

Pacific

Europe including

Iceland and Greenland

lE nvironment

efile GRAPHIC print - DO NOT PROCESS As Filed Data -Schedule I (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Peace Development Fund

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

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

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

2015

DLN: 93493041016517 OMB No 1545-0047

> Open to Public Inspection

Employer identification number

						04-2/38/94	
Part I General Information	n on Grants and	d Assistance					
<ul> <li>Does the organization maintain rethe selection criteria used to awa</li> <li>Describe in Part IV the organization</li> </ul>	ard the grants or as	sıstance?				stance, and	√ Yes No
Part III Grants and Other Assistant that received more than \$				plete if the organization	answered "Yes" on F	form 990, Part IV, line 21	., for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
		+					
		1					
2 Enter total number of section 50		=					10
3 Enter total number of other organ			<u> </u>				25
For Paperwork Reduction Act Notice, see	the Instructions for	Form 990.		Cat No 50055P		Schedu	le I (Form 990) 2015

## **Additional Data**

organization

or government

Ocean Conservancy Inc

1300 19th St NW 8th Floor Washington, DC 20036

23-7245152

Software ID: Software Version:

**EIN:** 04-2738794

Name: Peace Development Fund

grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of ıf applıcable (book, FMV, appraisal,

501c3

or government			assistance	otner)	
Insight-Out PO Box 888 Woodacre,CA 94973	45-1271795	264,061			Criminal Justice
The Prison Birth Project 400 Dwight St Holyoke, MA 01040	04-2738794	202,644			Criminal Justice

197,000

cash

accietance

athar)

(h) Purpose of grant

or assistance

Environmental

non-cash assistance

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) Partnership for Peace 47-4032068 164,365 International Solidarity 40 Taunton Rd

Anti-War Organizing

Scarsdale, NY 10583				
BAY-Peace Better Alternatives for 610 16th St Room 322 Oakland,CA 94612	13-4365913	138,214		Antı-War Organızıng

130,018

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

Womens International League

for Pe

11 Arlington St Boston, MA 02116

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Women De-Militarize the Zone 46-4502325 129,376 Anti-War Organizing 1909Aleo Place Handulu HT 06822 l Justice

1101101010,111 90022					
Reentry Solutions Group 855 Meadow Drive San Pablo, CA 94806	46-2809243		94,992		Criminal Justice
Natural Resources Defense	13-2654926	501c3	000,88		Environmental

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

Council

40 West 20th St New York, NY 10011

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) East Point Peace Academy 46-3621830 80,306 Violence PO Box 30652 PreventionConflict 0-11--1 04 04604

Oakland, CA 94604					Resolution
Cırcumpolar Conservatıon Union	05-0595291	501c3	76,000		Environmental
1615 M St					
Washington DC 20036	1				

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

PO Box 3070

Half Moon Bay, CA 94019

washington, DC 20036

Heart and Hand Fund 54-2168697 64,598 International Solidarity

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Earthjustice 94-1730465 501c3 34.000 Environmental 50 California St Ste 500 San Francisco CA 94111 46-5306373 32,375 Youth Organizing ning

Community Organizing

27,199

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

Juli Flancisco, CA Jaila
Youth Outreach and Learni
Institu
15240 La Alameda Drive (
Morgan Hill, CA 95037

Friends of Golden Gateway

4005 Davis Court 703 San Francisco, CA 94111

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Art Forces 47-3911222 24,268 Cultural Activism 1801 Bush Street 211

San Francisco, CA 94109				
American Indian Prison Project Work 500 Robert St N Unit 701	46-3599384	15,725		Indigend IssuesC

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

524 Newbridge Rd Sylvania, GA 30467

American Indian Prison	46-3599384	15,725		Indigenous
Project Work				IssuesCriminal Justice
500 Robert St N Unit 701				
Saint Paul, MN 55101				

Saint Paul, MN 55101				
Positive Action Committee	58-2181115	15,000		Community Organizing

Saint Paul, Min 55101				
Positive Action Committee	58-2181115	15,000		Community Ord

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Unity Foundation 94-2386901 12,924 Community Organizing 2110 23rd St San Francisco, CA 94107 11.751 Economic Justice &

Development

Cultural Activism

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

Cambodian Water Project of	20-2750591	
Massachu		
124 Logtown Rd		
Amherst, MA 01002		

81-1653121

Leonard Peltier Statue Project

218 N Orchard Dr Burbank, CA 91506

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Justice Committee 36-4576355 501c3 10,000 Racial Justice 666 Broadway Ste 550

Development

New York, NY 10012					
National Priorities Project 243 King St Ste 246 Northampton, MA 01060	04-3070112	501c3	10,000		Other
Community Partnership of	27-4975882		8,133		Economic Justice &

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

Akuapım So

PO Box 30293 Charleston, SC 29407

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Changing Worlds 36-4340874 501c3 7.500 Education Reform 329 W 18th St Ste 506 Chicago II 60616

Cilicago, IL 00010					
Community Involved in Sustaining Ag	04-3416862	501c3	7,500		Economic Justice & Development
1 Sugarloaf St					•
South Deerfield, MA 01373					

Indiaenous

I s s u e s C u l t u r a l

Preservations

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

Muier Uwa

2930 Shattuck Ave

Berkeley, CA 94705

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Freedom Summer Palestine 04-3235656 7.000 Cultural DialoguesSharing 67 Pleasant St 5 

Violence

Cambridge, MA 02139					
Mobile Expressive Therapies	04-3562295	501c3	7,000		Human Rights
Program					
55 Jamaica St					
Jamaica Plain, MA 02130					

46-1430434 7,000 Project Hajra

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

Jamaica, NY 11435

Womens PO Box 350884 IssuesDomestic

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Columbia River Education -93-1151710 6.500 Indigenous Issues Economic

Economic Justice &

Development

PO Box 782 The Dalles, OR 97058				
Safe Kids Now 3 Darnby Crt Orinda, CA 94563	04-2738794	5,781		Youth Organizing

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

Just Global Partners

2645 Monaco Pkwy

Denver, CO 80207

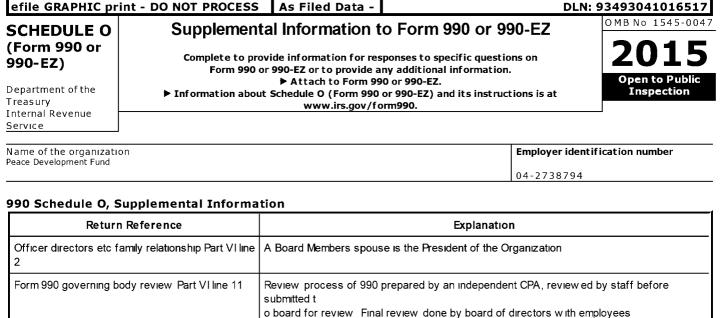
(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) Southern Diaspora Research 11-3311936 501c3 5,500 Economic Justice & and Deve Development

Brooklyn, NY 11216

East Bay Community Solar 47-1375690 5,088 Environmental Project

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

2827 Regent St Berkeley, CA 94705



Return Reference Explanation Conflict of interest policy compliance Part VI line 12c Each board member is required to disclose potential conflicts annually and on going

990 Schedule O, Supplemental Information

' ' '	basis
CEO executive director top management comp Part VI	Salary structure reviewed by the board based on an annual performance review and
line 15a	benchmark

s of other similar organizations and in compliance with current operating budget

990 Schedule O, Supplemental Information Return Reference Explanation

request and reviewed on a case by case basis

Other officer or key employee	The Executive Director reviews the work plan of other employees and submits recommendations to the
compensation Part VI line 15b	Board for approval The process is driven by the budget approved by the board
Governing documents etc available to	Financial Statements and Governing documents are available on our wiebsite and upon a written

public Part VI line 19