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DLN: 93493100010407

Open to Public

# OMB No 1545-0047

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

Department of the

Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <u>www IRS gov/foim990</u>

Inspection

A F	or the .	<b>2015</b> ca	lendar year, or tax year beg	ginning 07-01-2015 , and ending	06-30-201	6					
3 Che	eck if ap	plicable	C Name of organization	OM			D Emple	yer id	entification number		
Ad	ddress cl	hange	ALLIANCE DEI ENDING I REED				54-1	66045	59		
_		-	Doing business as								
Address change Name change Name change Name change Address change Name change		E Teleph	one nu	mhor							
		ated		ox if mail is not delivered to street address	s) Room/sui	te					
<u>'</u>							(480	) 444-	0020		
Ap	plication	pending		e, country, and ZIP or foreign postal code			<b>G</b> Gross	receints	s \$ 51,537,691		
			F N								
			1	rincipal officer							
			15100 N 90TH ST	_					⊤ Yes <b>√</b>		
. To	v ovom	nt status	,					ınates	□Yes □ No		
L la	x-exemi	pt status	<b>✓</b> 501(c)(3)   501(c) (	) ◀ (insert no )   4947(a)(1) or	527			n a list	(see instructions)		
ı w	ebsite	:► WW	/W ALLIANCEDEFENDING	FREEDOM ORG			·		,		
€ Form	n of ora	ianization	✓ Corporation ☐ Trust ☐	Association Other					M State of legal domicile VA		
<b>X</b> 1 011	ii or org	umzation	To corporation   must   /	Association   Other P		$\dashv$			-		
Pa	rt I	Sum	mary								
						EDOM CA	N ELOUDIC	ш			
71	AL	JF 15 C	OMMITTED TO TRANSFO	RMING LAW AND CULTURE SO T	KUE FREI	EDUM CA	N FLOURIS	П			
<u> </u>											
Ē	_										
o ve	<b>2</b> C	heck th	nis box ▶ ┌ if the organizat	ion discontinued its operations or o	disposed o	of more th	an 25% of it	s net a	assets		
	3 N	lumher (	of voting members of the go	overning body (Part VI line 1a)				з	11		
			-					4	11		
								5	292		
					6	679					
			·		7a	0					
	II.							7b	(		
							Prior Year	<u> </u>	Current Year		
	8	Contributions and grants (Part VIII, line 1h)					46,258	,198	50,007,910		
Ę	9	Progra	am service revenue (Part V	III, line 2g)				0	(		
ΘAc	10	Inves	tment income (Part VIII, c	olumn (A), lines 3, 4, and 7d) .			40	,424	52,122		
α	11	Other	revenue (Part VIII, column	n (A), lines 5, 6d, 8c, 9c, 10c, and	11e)		2,012	,211	1,477,659		
	12		revenue—add lines 8 throug	gh 11 (must equal Part VIII, colun	nn (A), line	9	48,310	,833	51,537,691		
	12		e and cimilar amounts haid	(Part IV column (A) lines 1-3)			5,277	810	7,623,451		
			•				3,217	0	7,025,451		
			·								
8			·	(, , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		21,007	,8 / 8	23,651,174		
£	16a	Profes	ssional fundraising fees (Pa	art IX, column (A), line 11e)			1,782	,379	2,461,012		
ੜੇ	ь	Total fu	undraising expenses (Part IX, colu	mn (D), line 25) ▶ <mark>8,116,898</mark>							
	17	Other	expenses (Part IX, column	(A), lines 11a-11d, 11f-24e) .			20,867	,878	23,910,768		
			•	, , , , , , , , , , , , , , , , , , , ,	•		48,935	,954	57,646,405		
(5	19	Reven	nue less expenses Subtract	t line 18 from line 12			-625	,121	-6,108,714		
2 & Q						Beginni	ng of Current	Year	End of Year		
ser agai	20	Total	assets (Part X. line 16) .				38,683	,986	32,795,628		
A AS							4,523		4,638,805		
ξŞ	22						34,160	,364	28,156,823		
Pai	t II	Sign	ature Block			_		<u>'</u>			
	•				•				•		
		_		a complete. Declaration of prepare	r (otner th	ian omicer	) is based or	ı alı ini	ormation of which		
		·   •									
		****	ature of officer				2017-04-06 Date				
Sign							Date				
Here	=		NE SWINDLER EXEC VP OF OPERA or print name and title	ATIONS, CFO							
		<u> </u>	Print/Type preparer's name	Preparer's signature	In	ate		PTIN			
Paid	4		ACQUELINE ECKMAN	JACQUELINE ECKMAN			Check If self-employed		00648		
	a pare	<b>,</b>   F	Firm's name	NALLEN LLP			Firm's EIN ► 4	1-0746	749		
	pare Onl	1 -						none no (602) 266-2248			

PHOENIX, AZ 85012

Form	990 (2015) Page	e <b>2</b>
Par	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<b>√</b>
1	Briefly describe the organization's mission	
	EP THE DOORS OPEN FOR THE GOSPEL BY ADVOCATING FOR RELIGIOUS FREEDOM, SANCTITY OF LIFE, AND MARRIAGE THE FAMILY	
AND	THE FAMILE	_
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
	the prior Form 990 or 990-EZ?	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
3	services?	
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
-	expenses Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported	
	/C	
<b>4</b> a	(Code ) (Expenses \$ 15,747,966 including grants of \$ 2,572,350 ) (Revenue \$ 0 )	
	LEGAL ADVOCACY ALLIANCE DEFENDING FREEDOM (ADF) IS AN ALLIANCE-BUILDING LEGAL ORGANIZATION THAT ADVOCATES FOR THE RIGHT OF PEOPLE TO FREELY LIVE OUT THEIR FAITH ADF CHAMPIONS GOD-GIVEN FREEDOMS THAT ALLOW FOR HUMAN FLOURISHING WHILE AFFIRMING THE DIGNITY OF EVERY	
	PERSON ADF EXISTS TO SERVE AN ALLIANCE OF LIKE-MINDED PROFESSIONALS, RALLYING ATTORNEYS AND INFLUENCERS FROM ALL SPHERES OF CULTURE TO	
	DEFEND AND PROMOTE THE CORE ISSUES OF RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND MARRIAGE AND FAMILY ADF OFFERS EXCEPTIONAL LEGAL ADVOCACY AND EXPERTISE FROM OUR 58 STAFF ATTORNEYS BASED AT OUR ADF HEADQUARTERS IN ARIZONA AND AT OFFICES AROUND THE WORLD, INCLUDIN	۷G
	THE UNITED NATIONS IN NEW YORK CITY ADF ALSO WORKS WITH OUR MORE-THAN-3, 100-STRONG NETWORK OF ALLIED ATTORNEYS AND HAS A 77% WIN RA	TΕ
	IN OUR CASES, PLAYING IMPORTANT ROLES IN 49 SUPREME COURT VICTORIES ADF AND ITS ALLIED PARTNERS WORK TOGETHER TO DEVELOP AND IMPLEMENT EFFECTIVE STRATEGIES TO ESTABLISH CRITICAL LEGAL PRECEDENTS AFFIRMING RELIGIOUS LIBERTY IN STATE COURTS, FEDERAL COURTS, THE U.S. SUPREME	
	COURT, AND INTERNATIONAL COURTS AND GOVERNING BODIES ADF EXISTS TO SERVE ALLIED INDIVIDUALS AND GROUPS BY PROVIDING TRAINING,	
	COORDINATION, AND FUNDING FOR THEIR EFFORTS, ALONG WITH OUR OWN LEGAL EXPERTISE FOR EXAMPLE, ADF PROVIDES FUNDING AND TRAINING TO ALLI ATTORNEYS TO HELP THEM MAXIMIZE THEIR OWN LEGAL ADVOCACY WORK, AND SUPPORTS ALLIED ATTORNEYS, CHURCH AND PARACHURCH ORGANIZATION	.ED
	LEADERS, LEGISLATORS AND LEGISLATIVE STAFF MEMBERS, BUSINESS LEADERS, CLIENTS, STUDENT LEADERS, AND OTHER KEY ALLIES WITH NETWORKING,	
	STRATEGY, TRAINING, AND FUNDING REQUESTS FOR LEGAL ADVOCACY IN DEFENSE OF RELIGIOUS LIBERTY CONTINUE TO INCREASE, INDICATING AN OVERWHELMING NEED FOR THE ALLIANCE IN THE PUBLIC SQUARE	
		_
4b	(Code ) (Expenses \$ 13,859,844 including grants of \$ 1,617,192 ) (Revenue \$ 0 )	
	PUBLIC EDUCATION ADF PROVIDES EDUCATION TO THE PUBLIC ABOUT THE SIGNIFICANCE AND STATE OF RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND	
	MARRIAGE AND FAMILY IN AMERICA AND AROUND THE WORLD THIS IS DONE THROUGH PRINTED MATERIALS, MAILINGS, WEBINARS, SOCIAL MEDIA, WEBSITES, EMAIL ALERTS, NEWSLETTERS, MEDIA AND PERSONAL APPEARANCES, BLOGS, OP-EDS, AND EVENTS ADF PUBLIC EDUCATION EFFORTS FOCUS ON INFORMING THE	
	PUBLIC AND RAISING AWARENESS OF THE FOLLOWING THE FRAMERS ORIGINAL INTENT FOR THE CONSTITUTION OF THE UNITED STATES AND THE BILL OF	
	RIGHTS TO REFLECT NATURAL LAW, ENTITIES THAT SEEK TO RE-DIRECT AND DISTORT THE CONSTITUTION'S ORIGINAL PURPOSE, AND U.S. AND INTERNATION, CHALLENGES TO RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND FAMILY VALUES ADF PROVIDES REAL-LIFE EXAMPLES OF SITUATIONS AND COURT CASES	ΔL
	WHERE JUSTICE AND CIVIL LIBERTIES HAVE BEEN THWARTED, AND HOW THE LEGAL ADVOCACY EFFORTS OF ADF AND ITS ALLIED PARTNERS HAVE HELPED OBTA	ΑIN
	JUSTICE THROUGH THESE PUBLIC EDUCATION EFFORTS, ADF CAN SERVE AS THE FIRST LINE OF DEFENSE FOR INDIVIDUALS AND GROUPS WHOSE RELIGIOUS FREEDOM IS IN JEOPARDY WE ALSO USE THIS PUBLIC EDUCATION WORK TO RECRUIT POTENTIAL ALLIES, SUCH AS ATTORNEYS INTERESTED IN ATTENDING TH	E
	ADF RELIGIOUS LIBERTY SUMMIT AND LAW STUDENTS CONSIDERING THE BLACKSTONE LEGAL FELLOWSHIP PROGRAM ADF ALSO REQUESTS THAT THE RECIPIEN	
	OF THESE EDUCATIONAL COMMUNICATIONS REMEMBER ITS ACTIVITIES IN PRAYER AND PROVIDES INFORMATION AND DETAILS TO ASSIST THEM IN PRAYING INTELLIGENTLY, SPECIFICALLY, AND WITH PURPOSE	
4c	(Code ) (Expenses \$ 11,976,844 including grants of \$ 1,028,828 ) (Revenue \$ 0 )	_
	ALLIED SUPPORT AND TRAINING AS AN ALLIANCE-BUILDING LEGAL ORGANIZATION THAT ADVOCATES FOR THE RIGHT OF PEOPLE TO FREELY LIVE OUT THEIR	
	FAITH, ALLIANCE DEFENDING FREEDOM (ADF) IS COMMITTED TO EQUIPPING ALLIES TO DEFEND AND PROMOTE RELIGIOUS LIBERTY TO THE BEST OF THEIR ABILITY, AND TO TRANSFORM LAW AND CULTURE SO TRUE FREEDOM CAN FLOURISH TO THIS END, ADF OFFERS WORLD-CLASS TRAINING FOR CHRISTIAN	
	ATTORNEYS AND PROFESSIONALS, FOR LAW STUDENTS, AND FOR COLLEGE STUDENTS INTERESTED IN PURSUING A CAREER IN LAW, PUBLIC POLICY,	
	GOVERNMENT, BUSINESS, AND OTHER CULTURE-SHAPING FIELDS THROUGH THE ADF RELIGIOUS LIBERTY SUMMITS, PRACTICING ATTORNEYS, LEGAL ADVOCAT BUSINESS LEADERS, ENTREPRENEURS, CLERGY, POLICY LEADERS, AND MEDIA LEADERS ARE INVITED TO PARTICIPATE IN WORLD-CLASS TRAINING, STRATEGY,	ES,
	AND NETWORKING SESSIONS AROUND THE WORLD TO DATE, MORE THAN 1,923 U.S. AND INTERNATIONAL ATTORNEYS HAVE COMPLETED THE ADF RELIGIOUS	
	LIBERTY SUMMIT TRAINING 3,151 ADF ALLIED ATTORNEYS HAVE VOLUNTEERED PRO BONO LEGAL ADVOCACY SERVICES TO LOCAL AND INTERNATIONAL COMMUNITIES VALUED AT OVER \$202 MILLION THIS AMOUNT IS FAR IN EXCESS OF THE COST OF THE PROGRAM MOST U S STATE BARS ACCEPT ACCREDITATION.	ION
	FOR PORTIONS OF THE LEGAL ADVOCACY TRAINING WITH CONTINUING LEGAL EDUCATION CREDIT THROUGH THE BLACKSTONE LEGAL FELLOWSHIP, ADF	<b>О</b> Г
	PROVIDES TRAINING TO TOP CHRISTIAN LAW STUDENTS FROM AROUND THE WORLD ON NATURAL LAW, CONSTITUTIONAL JURISPRUDENCE, AND THE HISTORY OF RELIGIOUS LIBERTY IN AMERICAN LAW AND GOVERNMENT AND GOVERNMENTS ACROSS THE GLOBE THESE SUBJECTS ARE OFTEN SORELY NEGLECTED AND EVER	
	BLATANTLY MISTAUGHT IN PROMINENT LAW SCHOOLS THE BLACKSTONE LEGAL FELLOWSHIP ALSO FOCUSES ON EQUIPPING THESE STUDENTS TO INTEGRATE	
	THEIR FAITH INTO THEIR WORK IN A CAREER THAT IS OFTEN HOSTILE TO CHRISTIANITY IN ADDITION TO PROVIDING COURSES TAUGHT FROM PROMINENT GUEST LECTURERS, THE PROGRAM INCLUDES SUMMER INTERNSHIPS WITH ALLIED PARTNERS LOCATED THROUGHOUT THE WORLD TO DATE, OVER 1,800	
	STUDENTS REPRESENTING 227 LAW SCHOOLS HAVE GRADUATED FROM THE BLACKSTONE LEGAL FELLOWSHIP THROUGH THE ARETE ACADEMY, ADF OFFERS A SIMILAR TRAINING TO COLLEGE AND UNIVERSITY STUDENTS WHO SENSE A CALLING TO LIVE OUT THEIR FAITH IN THE FIELDS OF LAW, GOVERNMENT, PUBLIC	
	POLICY, OR BUSINESS TO DATE OVER 650 YOUNG PEOPLE FROM THE TOP UNIVERSITIES IN AMERICA, AND THE WORLD HAVE PARTICIPATED IN ARETE ACADEM	
	MANY OF THEM GO ON TO ATTEND THE BLACKSTONE LEGAL FELLOWSHIP DURING LAW SCHOOL ADER RECENTLY BEGAN OFFERING ARETE ACADEMY SESSIONS IN LATIN AMERICA AND IN EUROPE TO SUPPORT THE FINEST CHRISTIAN COLLEGE STUDENTS AROUND THE WORLD, EQUIPPING THEM WITH THE CHARACTER,	I
	COMPETENCE, AND CREDENTIALS TO EXCEL IN THEIR CHOSEN FIELD	
	See Additional Data	_
		_
4d	Other program services (Describe in Schedule O )	
	(Expenses \$ 3,545,566 including grants of \$ 2,405,081 ) (Revenue \$ 0 )	_
4e	Total program service expenses ► 45,130,220	

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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔰	10	Yes	
	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			
	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	
	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	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<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? If "Yes," complete Schedule D, Part IX 2	<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	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?  If "Yes," complete Schedule D, Part X	<b>11</b> f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
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	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24</b> c		
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, Pait 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 or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	<b>28</b> a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	<b>28</b> c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part $I$ .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V. line 1	34	Yes	

35a

35b

36

37

38

Yes

Yes

Yes

Form **990** (2015)

Νo

Νo

37

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

Note. All Form 990 filers are required to complete Schedule O

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

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

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🔧 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Pai	t V	Statements Regarding Other IRS Filings and Tax Compliance					_
		Check if Schedule O contains a response or note to any line in this	Part	<u>V</u>		 Yes	. ✓ No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	306		165	140
		the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
c	Did th	e organization comply with backup withholding rules for reportable payments to	vend	l dors and reportable			
Č		g (gambling) winnings to prize winners?		· · · · · ·	<b>1</b> c		
2a		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 s return	2a	292			
ь	,	east one is reported on line 2a, did the organization file all required federal emp	loym	ent tax returns?	2b	Yes	
	Note.	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file	(see	instructions)			
		e organization have unrelated business gross income of \$1,000 or more during	•	•	3a		No
		s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanatio</i>			3b		
4a		, time during the calendar year, did the organization have an interest in, or a sig a financial account in a foreign country (such as a bank account, securities acc					
		nt)?		,	4a	Yes	
b	If"Ye	s," enter the name of the foreign country ▶CJ,AU,BE,SZ,FR					
	See in	structions for filing requirements for FinCEN Form 114, Report of Foreign Bank	and	Financial Accounts			
E-	(FBAR		a tho	tay year?	En.		N.o.
		he organization a party to a prohibited tax shelter transaction at any time durin ny taxable party notify the organization that it was or is a party to a prohibited t	-	•	5a		No No
			ax 311	ierter transaction.	5b		110
С	IT Ye	s," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a		the organization have annual gross receipts that are normally greater than \$10			6a		No
ь	_	zation solicit any contributions that were not tax deductible as charitable cont s," did the organization include with every solicitation an express statement th					
b		not 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 contribution es provided to the payor?	on an	d partly for goods and	7a		No
b	If"Ye	s," did the organization notify the donor of the value of the goods or services pr	ovide	ed?	7b		
c		e organization sell, exchange, or otherwise dispose of tangible personal proper rm 8282?	ty for	which it was required to	<b>7</b> c		No
d		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	erson	nal henefit contract?			
					7e		No
		e organization, during the year, pay premiums, directly or indirectly, on a perso			<b>7</b> f		No
g	If the require	organization received a contribution of qualified intellectual property, did the oi	rganız 	zation file Form 8899 as	7g		
h	•	organization received a contribution of cars, boats, airplanes, or other vehicles	, dıd	the organization file a			
_		1098-C?	•		7h		
8	Did a	oring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bus	ines	s holdings at any time			
		the year?	•		8		
		e sponsoring organization make any taxable distributions under section 49667			9a		
D LO		e sponsoring organization make a distribution to a donor, donor advisor, or rela on <b>501(c)(7) organizations.</b> Enter	iteu p	C15UII'	9b		
		1	10a				
			10b				
	faciliti						' I
		on 501(c)(12) organizations. Enter	11a	I			
		Income from members or shareholders	TIA				
			<b>11</b> b				
L2a	Section	on <b>4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990	ın lıe	eu of Form 1041?	12a		
b	If "Ye: year	s," enter the amount of tax-exempt interest received or accrued during the	12b				
L3	•	n 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>			
a	Is the	organization licensed to issue qualified health plans in more than one state? <b>N</b>	ote. S	See the instructions for			
		onal information the organization must report on Schedule O	~	1	<b>13</b> a		
b		the amount of reserves the organization is required to maintain by the states chithe organization is licensed to issue qualified health plans	13b				
c		the amount of reserves on hand	13c				
L4a	Dıd th	L e organization receive any payments for indoor tanning services during the tax		?	14a		No
b	If"Ye	s," has it filed a Form 720 to report these payments? If "No," provide an explanat	tion ir	Schedule O	14b		

orm	990 (2015)			Page
Par	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, describe the circumstances, processes, or changes in Schedule O. See instructions.	or 10	)b belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI			🔽
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  11			
	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 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	<b>10</b> a		No
_	The state of the s			

**b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10h affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . . . . **12**a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes Did the organization have a written whistleblower policy? . . . 13 13 Yes 14 Did the organization have a written document retention and destruction policy? . . . Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official . . . 15a Yes Other officers or key employees of the organization . . . . . . . . . . . . 15b Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Nο **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

## 7 List the States with which a copy of this Form 990 is required to be filed▶

Section C. Disclosure

AR , CA , CT , FL , GA , HI , IL , KS , KY , MA , MD , MI , MN , MS , NC , NH , NY , NJ , OK , OR , PA , RI , SC , TN , UT , VA , WI , WV , NM , AZ

16b

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

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

organization's exempt status with respect to such arrangements? . . . . . . . . . . . . . . . . . .

- 19 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
  ►WAYNE SWINDLER 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260 (480) 444-0020

Part VII

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (B) (C) (D) (F) (A) (E) Name and Title Average Position (do not check Reportable Reportable Estimated hours per more than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations from the (W-2/1099for related 2/1099-MISC) organization and Former Highest compensat employee Individual trustee É organizations MISC) related ũ stitutional below organizations employee 勇含 dotted line) Trustee See Additional Data Table

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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					5	( <b>D)</b> Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former Highest compensated emptoxee	2/1099-MISC)	2,1033 11100)	organization and related organizations
See Additional Data Table										
1b Sub-Total	eets to Part VII, S		·			. •				
d Total (add lines 1b and 1c)						▶		3,467,403	0	361,354

3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	·	No

#### **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
ALANIZ METRO GROUP	PRINTING	1,742,209
1805 E WASHINGTON ST		
MOUNT PLEASANT, IA 52641		
MASTERWORKS	CONSULTING	1,598,756
19462 POWDER HILL PL NE		
POULSBO, WA 98370		
SIGNALCSK BRAND PARTNERS	CREATIVE AND DESIGN	306,300
1900 WAZEE ST SUITE 311		
DENVER, CO 80202		
BLACKBAUD	SOFTWARE DEVELOPMENT	261,742
2000 DANIEL ISLAND DR		
CHARLESTON, SC 29492		
JAZEPRO MEDIA LLC	WEB PAGE DESIGN	241,950
39506 N DAISY MOUNTAIN DR 112-167		
ANTHEM, AZ 85086		

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 22

Yes

No

Form 99								Page <b>9</b>
Part V	* 🕶 1	Statement o						
		Check if Schedu	ile O contains a respon	se 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	1a	Federated camp	paigns 1a					
Grants Amounts	ь	Membership du	es <b>1b</b>					
ج آ	c	Fundraising eve	ents <b>1</b> c					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organiz	ations <b>1d</b>	119,501				
⊒ ⊒ €	e	Government grants	s (contributions) 1e					
ons Si	f	All other contribution	ons, gifts, grants, and <b>1f</b>	49,888,409				
tributio Other	-	sımılar amounts no	t included above					
	g	1a-1f \$	ons included in lines	561,576				
Cont and	h	Total. Add lines	s 1a-1f	· · · •	50,007,910			
ı				Business Code				
JI (	2a							
æ	Ь							
Program Service Revenue	C							
	d							
ran	e f	All other progra	ım service revenue					
Jog.	'							
<u> </u>	g 3		2a-2f					
	•		ome (including dividend ar amounts)		52,122			52,122
	4	Income from inves	tment of tax-exempt bond p	proceeds				
	5	Royalties	(1) D	(v) Para anal				
	6a	Gross rents	(I) Real 186,660	(II) Personal				
	ь	Less rental	0					
	<sub>c</sub>	expenses Rental income	186,660					
	d	or (loss)	me or (loss)		186,660			186,660
			(i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	.,	,				
	b c	Less cost or other basis and sales expenses Gain or (loss)						
	d		s)					
Other Revenue	8a	Gross income frevents (not incl   f contributions  See Part IV, lin	luding reported on line 1c)					
her	_	1 oo a dun	a					
ō	°		penses <b>b</b>   loss)from fundraising e	events •				
	9a		rom gaming activities	·				
	ь	Less direct exp	penses <b>b</b>					
	С	Net income or (	loss) from gaming activ	vities				
	10a	Gross sales of i	ınventory, less	-				
		returns and allo						
	ь	Less cost of go	oods sold <b>b</b>					
	С		loss) from sales of inve					
	11-	Miscellaneous		Business Code 900099	979,457			979,457
	11a b		DED LEES	900099	245,736			245,736
	c	HONORARIA MISCELLANEC		900099	65,806			65,806
	d	All other revenu	<del></del>	-	, -			,
	e	Total. Add lines	l	🕨	1,290,999			
	12	Total revenue.	See Instructions			_		1 500 751
					51,537,691	0	(	1,529,781

### Part IX Statement of Functional Expenses

			·	
Section $501(c)(3)$ and $501(c)(4)$	) organizations must co	molete all columns A	II other organizations mus	t complete column (A )

Check of Cabadula O contains a response or note to any line in this Part IV

	Check if Schedule O contains a response or note to any line in t	this Part IX			
	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	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	3,686,177	3,686,177		
2	Grants and other assistance to domestic individuals See Part IV, line 22	831,600	831,600		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	3,105,674	3,105,674		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,608,782	1,778,100	391,530	439,152
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	164,925		164,925	
7	Other salaries and wages	16,330,308	13,063,526	1,430,144	1,836,638
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	463,318	379,658	40,627	43,033
9	Other employee benefits	2,705,419	2,011,047	338,258	356,114
10	Payroll taxes	1,378,422	1,071,774	142,477	164,171
11	Fees for services (non-employees)	1,370,122	1,0,1,,,1	112,177	101,171
а	Management	741,381	442,939	127,705	170,737
b	Legal	47,016	18,124	19,387	9,505
С	Accounting	56,612	60	56,423	129
d	Lobbying	,		,	
е	Professional fundraising services See Part IV, line 17	2,461,012			2,461,012
f	Investment management fees	66,092	2,485	62,084	1,523
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	929,927	665,701	29,871	234,355
12	Advertising and promotion	6,545,283	5,237,911	381,969	925,403
13	Office expenses	1,594,287	1,286,989	126,641	180,657
14	Information technology	535,447	400,605	66,020	68,822
15	Royalties				
16	Occupancy	2,199,380	1,668,086	250,246	281,048
17	Travel	4,454,926	4,017,837	96,069	341,020
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,415,734	3,161,740	60,004	193,990
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,333,564	1,734,927	276,375	322,262
23 24	Insurance	148,515	111,989	14,534	21,992
	Schedule O )				
а	RESOURCE MATERIALS	285,538	243,742	25,869	15,927
b	RECEIPTS PROCESSING	214,816	173,899	16,057	24,860
c	FINANCIAL SERVICES	203,998	582	202,310	1,106
d	FOREIGN CURRENCY TRANSL	46,130	0	46,130	0
е	All other expenses	92,122	35,048	33,632	23,442
25	<b>Total functional expenses.</b> Add lines 1 through 24e	57,646,405	45,130,220	4,399,287	8,116,898
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 ▶	6,571,589	5,511,602	316,499	743,488

6,571,589

5,511,602

743,488

OIIII		·					Page 11
Par	t X	Balance Sheet Check if Schedule O contains a response or note to any I	ıne ın th	ue Dart Y			_
		Check if Schedule O contains a response of note to any i	ine in th	iis rait A	(A)	· ·	(B)
					Beginning of year		End of year
	1	Cash-non-interest-bearing			2,239,934	1	1,596,947
	2	Savings and temporary cash investments			13,874,094	2	8,977,108
	3	Pledges and grants receivable, net			445,503	3	233,047
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former off key employees, and highest compensated employees (Schedule L	Complet	e Part II of			
ts	6	Loans and other receivables from other disqualified persection 4958(f)(1)), persons described in section 4958 contributing employers and sponsoring organizations of voluntary employees' beneficiary organizations (see ins	3 (c)(3)(l f sectior	B), and n 501(c)(9)		5	
Assets						6	
As	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			21,042	8	23,240
	9	Prepaid expenses and deferred charges			2,615,122	9	1,165,151
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	28,104,440			
	b	Less accumulated depreciation	10b	11,516,450	17,316,569	<b>10</b> c	16,587,990
	11	Investments—publicly traded securities			7,904	11	2,135,954
	12	Investments—other securities See Part IV, line 11 .			1,805,526	12	1,771,983
	13	Investments—program-related See Part IV, line 11 .				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			358,292	15	304,208
	16	Total assets.Add lines 1 through 15 (must equal line 34	4)		38,683,986	16	32,795,628
	17	Accounts payable and accrued expenses			4,115,464	17	3,865,412
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV	of Sche	dule D		21	
bilities	22	Loans and other payables to current and former officers key employees, highest compensated employees, and o					
		persons Complete Part II of Schedule L				22	
<u>L</u> ia	23	Secured mortgages and notes payable to unrelated thir	d parties	s		23	
	24	Unsecured notes and loans payable to unrelated third p	arties			24	
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24) Complete Part X of Schedule D	to relat	ed third parties,			
					408,158	25	773,393
	26	Total liabilities. Add lines 17 through 25			4,523,622	26	4,638,805
ces		Organizations that follow SFAS 117 (ASC 958), check h lines 27 through 29, and lines 33 and 34.	ere ►	<b></b> and complete			
lar	27	Unrestricted net assets			31,683,165	27	25,909,128
ထိ	28	Temporarily restricted net assets			2,477,199	28	2,247,695
ы	29	Permanently restricted net assets				29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), complete lines 30 through 34.	check he	ere ▶   and			
	30	Capital stock or trust principal, or current funds				30	
Net Assets	31	Paid-in or capital surplus, or land, building or equipmen	t fund			31	
Ă	32	Retained earnings, endowment, accumulated income, or				32	
Net	33	Total net assets or fund balances			34,160,364	33	28,156,823
_	34	Total liabilities and net assets/fund balances			38,683,986	34	32,795,628
							Form 900 (2015)

Investment expenses

column (B))

Prior period adjustments .

Net unrealized gains (losses) on investments .

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Separate basis

Schedule O

Donated services and use of facilities .

Total revenue (must equal Part VIII, column (A), line 12)				
Total expenses (must equal Part IX, column (A), line 25)				
Revenue less expenses Subtract line 2 from line 1				

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

✓ Consolidated basis

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

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

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

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

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

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

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

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

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

	Schedule O							
2a	<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant?							
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes					

Cash ✓ Accrual Other\_

Both consolidated and separate basis

Page **12** 

51,537,691

57,646,405

-6,108,714

34,160,364

10,697

128,971

-34,495

No

28,156,823

Yes

2c

3a

3b

Yes

Nο

Form 990 (2015)

1

2

3

4

5

6

7

8

9

10

#### **Additional Data**

Software ID:

Software Version:

**EIN:** 54-1660459

Name: ALLIANCE DEFENDING FREEDOM

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

(Code	) (Expenses \$	3,545,566	including grants of \$	2,405,081 ) (Revenue \$	0)
GRANTS	AND FUNDING ADF PROVIDES GRANT	FUNDING	FOR LEGAL CASES AN	ID PROGRAMS THAT KEEP THE DOOR	OPEN FOR
THE GOS	PEL BY ADVOCATING FOR RELIGIOUS	LIBERTY,	THE SANCTITY OF LIF	E, AND MARRIAGE AND FAMILY THIS	S GRANT
FUNDING	COVERS EXPENSES FOR LITIGATION	, INCLUDI	ING TRAINING FOR EXF	PERT WITNESSES AND ACQUIRING ST	TRONG
AMICUS	BRIEF SUPPORT FOR OUR CASES TO E	NSURE TH	HE BEST POSSIBILITY (	OF SUCCESS GRANT REQUESTS ARE	REVIEWED
AND REC	OMMENDED BY AN INDEPENDENT GRA	ANTSAND	REVIEW COMMITTEE,	WHICH IS COMPOSED OF EXPERT AT	TORNEYS
WHO VOL	UNTEER THEIR TIME TO ADF FOR TH	SPURPOS	SE UNDER THE GOVERI	NING BOARD OF DIRECTOR'S POLICY	Y, NO
GRANT IS	AWARDED UNTIL IT IS FULLY FUNDE	D AND SE	T ASIDE IN SELF-DESIG	GNATED ACCOUNTS GRANTS ARE DI	SBURSED
UPON PE	RFORMANCE AND IN ACCORDANCE W	ITH THE T	ERMS OF THE GRANT A	AGREEMENTS AS OF THIS WRITING,	ADFHAS
ISSUED A	LMOST 3,400 GRANTS TOTALING OV	ER \$46 MI	LLION		

# Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde	pendent Co	ntrac	tor	ŝ						
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	unles	ore tl ss pe offi direct	than ersoi icer tor/t	not one on is and trust		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations to below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	MISC)	MISC)	organization and related organizations
TERRY SCHLOSSBERG	8 00					ļ				<u> </u>
CHAIRMAN/DIRECTOR	0 00	×	'	X	'	'	'	0	0	
TOM MINNERY	2 00	×		x			\[ \]	0	0	
VICE CHAIRMAN/DIRECTOR	0 00		L_'	L^'	<u> </u>	'	<u> </u>	<u> </u>	J	
C BRADLEY KEIRNES TREASURER/DIRECTOR	5 00	x	_   	x				0	0	c
MARK MADDOUX SECRETARY/DIRECTOR	5 00	×		×				0	0	C
ALFONSO AGUILAR DIRECTOR	2 00	x						0	0	C
EDWARD CHRISTIE JR  DIRECTOR (LEFT 10/2015)	2 00	×						О	0	
CHAPMAN COX	2 00			$\vdash$		<del></del>	$\vdash$			
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DIRECTOR (LEFT 5/2016)

MARJORIE DANNENFELSER

DIRECTOR

DIRECTOR

ALLEN M GINSBORG

RICHARD KORPAN DIRECTOR

# Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

25,356

9,203

31,250

31,560

17,001

ol

225,003

107,223

225,883

226,283

202,570

Compensated Employees, and Inde					rus	stee	S, F	tey Employed	es, nignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	,	,	and related organizations
SETH MORGAN	2 00	x						0	0	0
DIRECTOR	0 00	<u>                                     </u>	'	<u> </u>	_	'				
CHARLES W PICKERING SR	2 00	x	 					0	0	C
DIRECTOR	0 00	!	, '	'		'				
JOHN ROGERS	2 00		$\neg$							
DIRECTOR	0 00	X						0	0	C
ALAN SEARS	60 00	$\vdash$	$\overline{}$	$\vdash$	$\vdash$	+-	$\vdash$			
ALAN SEARS			, '	l x		'		389,598	0	31,650
PRESIDENT & CEO	1 00	!	ı'			!				
BENJAMIN BULL	50 00		$\overline{}$							
	······	!	, '	×		'		295,659	0	31,650
CHIEF COUNSEL, EVP OF ADF PROGRAMS	0 00	<u>                                     </u>	'	<u> </u>		<u> </u>				
MARK FEDDERN LEFT 2016	55 00	ļ	, '			'				

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0 00 55 00

1 00 55 00

0 00 50 00

0 00

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CFO & SECURITY DIRECTOR

TONY JOHNSON

WAYNE SWINDLER

GARY MCCALEB

EVP OPERATIONS, CFO

JEFFERY VENTRELLA

SR COUNSEL, SVP OF TRAINING

SR COUNSEL, VP OF ADVOCACY & RESEARCH

C00

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization
	below dotted line)	Individual trustee or director	Institutional Trust⊭ë	Officer	ey employee	Highest compensated employee	Former			and related organizations
MARK CROZET SVP DEVELOPMENT	55 00				×			230,462	0	16,061
KRISTEN WAGGONER SR COUNSEL, SVP U S LEGAL ADV	50 00				x			203,267	0	24,110
GLEN LAVY CORPORATE COUNSEL	50 00				×			182,103	0	31,009
TIM CHANDLER SR CNSL SVP OF ALLIANCE ADV	50 00				×			174,436	0	13,674
CHARLES BOLTE LEFT 2016	50 00					х		197,191	0	25,650
DOUG NAPIER SVP OF ALLIANCE RELATIONS	55 00 0 00					х		208,083	0	21,540
JORDAN LORENCE SR COUNSEL	50 00					х		208,911	0	16,205
DAVID CORTMAN SR COUNSEL, VP U S LITIGATION	50 00					х		196,907	0	14,669

193,824

20,766

50 00

0 00

KEVIN THERIOT

SR COUNSEL, VP CENTER FOR LIFE

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

hospital's name, city, and state

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

D. I. I. O. I. O. I. D. I. O.

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section

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

Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

OMB No 1545-0047
2015
Open to Public

Inspection

DLN: 93493100010407

**Employer identification number** 

54-1660459

Department of the Treasury Internal Revenue Service

990EZ)

1

2 3

SCHEDULE A

Name of the organization

ALLIANCE DEFENDING FREEDOM

(Form 990 or

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 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))

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

<b>Tota</b>				1- 9 above (see instructions))	Yes	No		
				,	Yes	No		
				,	Yes	No		
				,		T		
				,				
				(described on lines	docume	, , , ,		instructions)
N a n	ne or s	upported organization		Type of organization	Is the orga listed in your		A mount of monetary support	Amount of other support (see
NI	6-	(i)	(ii)EIN	(iii)	(iv)		(v)	(vi)
g g	LIICE	Provide the following i	-					
f	Enter	integrated, or Type III r the number of support		, , , , , , , , , , , , , , , , , , , ,				
e			_				is a Type I, Type II, T	ype III functionally
		(see instructions) <b>Yo</b>					irement and an attentiv	eness requirement
d							n with its supported org irement and an attentiv	
•	I	supported organization	n(s) (see instr	uctions) You must co	mplete Part IV	, Sections A ,	D, and E.	
c	_	must complete Part IV  Type III functionally i			n operated in c	onnection wit	h, and functionally inted	irated with, its
	1	3			same persons t	hat control o	manage the supported	organization(s) <b>You</b>
b						n with its supp	oorted organization(s), b	y having control or
	•	supported organization organization You mus				ty of the dire	ctors or trustees of the	supporting
а		Type I. A supporting o	rganization op	perated, supervised, oi	controlled by	its supported	organization(s), typical	ly by giving the
							n 509(a)(2)  See <b>sectio</b> d complete lines 11e, 1	
L1							nctions of, or to carry o	
0	Г	An organization organ					on 509(a)(4).	
				unrelated business ta: ee <b>section 509(a)(2).</b>			11 tax) from businesse	s acquired by the
	1	receipts from activitie	es related to it	s exempt functions—s	ubject to certa	in exceptions	, and (2) no more than :	331/3% of its suppor
_		An organization that i	normally recei	ves (1) more than 33	1/3% of its sun	nort from con	tributions, membership	fees and oross
9		A community trust des		:ion 1/0(D)(1)(A)(VI)	•	(11)		

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 50,007,910 36,379,373 38,913,749 41,527,309 46,258,198 213,086,539 membership fees received (Do not include any unusual grants ) 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 36,379,373 38,913,749 41,527,309 46,258,198 50,007,910 213,086,539 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 213,086,539 from line 4 Section B. Total Support

10)	Calendar year fiscal 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
7	A mounts from line 4	36,379,373	38,913,749	41,527,309	46,258,198	50,007,910	213,086,539
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	420,641	385,237	312,971	343,061	238,782	1,700,692
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)	1,634,885	890,634	1,059,666	1,708,631	1,290,999	6,584,815
11	<b>Total support.</b> Add lines 7 through 10						221,372,046
12	Gross receipts from related activ	ities, etc (see ins	structions)			12	
13	First five years. If the Form 990 i	s for the organizat	ion's first, secon	d. third. fourth. or	fifth tax year as a	section 501(c)(	3) organization.

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						
0	from line 6)						
Se	ction B. Total Support		•		•		•
	Calendar year						7.5.
(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	110		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		
	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 Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)	1		
а	A verage monthly value of securities	1a		
b	A verage monthly cash balances	1b 1c		
C	Fair market value of other non-exempt-use assets	1d		
d	Total (add lines 1a, 1b, and 1c)  Discount claimed for blockage or other factors	Id		
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 A mount.</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			
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	I
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 0 1 F

Part IV, Section C, line 1: Part IV, Section D, lines 2 and 3: Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

# Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10,	MISCELLANEOUS INCOME - 2011 AMOUNT \$ 239,985 2012 AMOUNT \$ 439,610 2013
EXPLANATION OF OTHER	AMOUNT \$ 3,860 2014 AMOUNT \$ 212,132 2015 AMOUNT \$ 65,806 COURT AWARDED
INCOME	FEES - 2011 AMOUNT & 1 394 900 2012 AMOUNT & 451 024 2013 AMOUNT & 574 537

\$ 1,394,900 2012 AMOUNT \$ 451,024 2013 AMOUNT \$ 5/4,53/ THUCHE 481,269 2014 AMOUNT \$ 302,118 2015 AMOUNT \$ 245,736

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

**SCHEDULE D** (Form 990)

**Supplemental Financial Statements** 

▶ Complete if the organization answered "Yes," on Form 990,

Open to Public

Inspection

Department of the Treasury Internal Revenue Service 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="www.irs.gov/form990">www.irs.gov/form990</a>.

DLN: 93493100010407 OMB No 1545-0047

	me of the organization IANCE DEFENDING FREEDOM		E	mployer identification numl	ber
ALL	ANCE DELENDING FREEDOM		5	4-1660459	
Pa	rt I Organizations Maintaining Dono			ls or Accounts.	
	Complete if the organization answer	ed "Yes" on Form 990, Part IV, l	ine 6.		
		(a) Donor advised funds	1	<b>(b)</b> Funds and other accoun	ts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor funds are the organization's property, subject to			dvised <b>Yes</b>	∏ No
5	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				□No
Pa	rt III Conservation Easements. Comple	ete if the organization answered	"Yes" on F		
1	Purpose(s) of conservation easements held by th	-		onn bboy raite try into ri	
•	Preservation of land for public use (e.g., recr	3 ( 11 //	'		
	education)		ation of an his	storically important land are	·a
	Protection of natural habitat	Preserva	ation of a cer	tified historic structure	
	Preservation of open space	·			
2	Complete lines 2a through 2d if the organization	held a qualified conservation contrib	ution in the f	orm of a conservation	
-	easement on the last day of the tax year	mera a quamirea conscituation continu	acion in the i	om or a conservation	
				Held at the End of the	ne Year
а	Total number of conservation easements		2	a	
b	Total acreage restricted by conservation easeme	ents	2	b	
c	Number of conservation easements on a certified	historic structure included in (a)	2	с	
d	Number of conservation easements included in ( historic structure listed in the National Register	c) acquired after 8/17/06, and not or		d	
3	Number of conservation easements modified, tra	nsferred released extinguished or t	erminated by	the organization during the	2
•	tax year >	nsierreu, reieuseu, extinguisneu, or e	terminated by	the organization during the	•
4	Number of states where property subject to cons	ervation easement is located <b>&gt;</b>			
5	Does the organization have a written policy regai			ı of	
	violations, and enforcement of the conservation of		crom, mananing		No
6	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, an	nd enforcing o	conservation easements dui	ing the
	A mount of expenses incurred in monitoring, inspi	acting bandling of welstions, and onf	forcing conc.	arvation casamonts during t	havoor
7	► \$	ecting, handing of violations, and em	lorening conse	ervacion easements during t	ne year
В	Does each conservation easement reported on li	ne 2(d) above satisfy the requiremen	nts of section	170(h)(4)	
	(B)(I) and section 170(h)(4)(B)(II)?			· ·	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		•	
Par	t III Organizations Maintaining Collectory Complete if the organization answer			Other Similar Assets.	
1a	If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	assets held for public exhibition, ed	ucation, or re	esearch in furtherance of pu	
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, ed			blic
(	(i) Revenue included on Form 990, Part VIII, line	1	▶ \$	·	
(i	ii) Assets included in Form 990, Part X		▶ \$		
2	If the organization received or held works of art, following amounts required to be reported under S	·		nancial gain, provide the	
а	Revenue included on Form 990, Part VIII, line 1			<b>▶</b> \$	
b	Assets included in Form 990, Part X			<b>&gt;</b> \$	

Par	t III	Organizations Maintaining (continued)	Collections of A	rt, Hi	storio	cal '	Treasur	es, or (	Oth	er Similar A	SSE	ts	
3		g the organization's acquisition, acc ction items (check all that apply)	ession, and other rec	ords, d	heck a	ny o	f the follo	wing that	are	a significant us	se of	ıts	
а		Public exhibition		d		Loa	n or exch	ange pro	gran	าร			
b	Г	Scholarly research		e	Γ	Otl	ner						
c		Preservation for future generations											
4	Provi Part )	de a description of the organization XIII	's collections and exp	olain ho	ow they	furt	her the or	ganızatıo	n's e	xempt purpose	e in		
5		g the year, did the organization soli ts to be sold to raise funds rather th								milar <b>Ye</b>	s	∏ No	,
Pa	rt IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990,	Part	: IV, line	9, or re	port	ted an amoui	nt o	n Forn	n 990,
1a		e organization an agent, trustee, cu ded on Form 990, Part X?	stodian or other interi	medıar	y for co	ontril	outions or	other as	sets	not <b>Y</b> e	:S	∏ No	1
b	If'	"Yes," explain the arrangement in P	art XIII and complete	e the fo	ollowing	g tab	le			An	noun	t	
c	Ве	ginning balance						10	: [				
d	A d	ditions during the year						10	ı				
e		stributions during the year						16	,				
f		ding balance						1f					
<b>2</b> a		ne organization include an amount o	n Form 990, Part X, I	ıne 21	, for es	crow	orcusto	ـــــا Iial accou	ınt lı	ability? <b>Ye</b>	:5	□ No	)
										,		•	
b	If"Ye	es," explain the arrangement in Part  Endowment Funds. Comple											
	ii C V	Lindowine it i dinds: Comple	(a)Current year		nor year		<b>b (c)</b> Two y		_	Three years back	_	Four ve	ars back
1a	Bearr	nning of year balance	4,869,735	(-)-	4,285,	-		2,789,582	χ,-	1,441,460	\ \ -	, , , , ,	1,919
b	_	ributions	1,636,049		770,	652		1,530,503		1,404,708		:	1,439,541
c	Netı losse	· · · · · · · · · · · · · · · · · · ·	175,336		57,	995		88,296		5,414			
d		ts or scholarships			180,	484		90,000		62,000			
e	O the	r expenditures for facilities programs						2,015					
f	A dmı	inistrative expenses	353,826		63,	973		30,821					
g	End o	of year balance	6,327,294		4,869,	.735		4,285,545		2,789,582		-	1,441,460
2	Provi	de the estimated percentage of the	current year end bala	nce (l	ine 1g,	colu	mn (a)) he	eld as					
а	Board	d designated or quasi-endowment 🕨	88 010 %										
b	Perm	anent endowment ▶ 5 150 %											
c		oorarily restricted endowment ► percentages on lines 2a, 2b, and 2c	6 840 % should equal 100%										
За		here endowment funds not in the po nization by	ssession of the organ	ızatıor	that a	re he	eld and ad	mınıstere	ed fo	rthe		Yes	No
	(i) ur	nrelated organizations								3:	a(i)		No
		elated organizations								<del>                                     </del>	ı(ii)	Yes	
ь 4		es" on 3a(II), are the related organiz ribe in Part XIII the intended uses					ξ?				3b	Yes	
	rt VI	Land, Buildings, and Equip											
		Complete if the organization	answered 'Yes' to F	orm			IV, line 1		For		K, lir		
		Description of property		C	<b>a)</b> Ost or ot (Invest)	her b		(b) or other ba (other)	sıs	Accumulated (c) depreciation		(d)Book	k value
1a	Land				•			2,000,0	000			:	2,000,000
	Buildir							·			$\top$		
								15,239,0	-	5,170,63	_	10	0,068,391
		hold improvements		·  _				659,3		151,41	_		507,927
		nent		•				10,206,0	)76	6,194,40	14		1,011,672
е	Other						- 1				1		

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

16,587,990

See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)  (1)Financial derivatives  (2)Closely-held equity interests  (3)Other  (A) RABBI TRUST	(b)Book value 1,391,648 380,335	(c)Method of valuation Cost or end-of-year market value F
(2)Closely-held equity interests (3)Other		
(3)O ther		
	300,333	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>▶</b> 1,771,983	
Part VIII Investments—Program Related.	1,,,1,503	
Complete if the organization answered 'Yes' on Fo  (a) Description of investment	(b) Book value	e Form 990, Part X, line 13.
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. Complete if the organization answered '	Yes' on Form 990. Part IV. line 1	d See Form 990. Part X. line 15
(a) Description		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X  Other Liabilities. Complete if the organization ar		
See Form 990, Part X, line 25.	ok value	
1. (a) Description of Hability (b) Box	ok value	
Federal Income taxes		
DEFERRED RENT PAYABLE	773,393	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	773,393	
2. Liability for uncertain tax positions In Part XIII, provide the text of organization's liability for uncertain tax positions under FIN 48 (ASC XIII		

1

2

а

Part XII

1

2

Schedule D (Form 990) 2015

59,157,683

51,537,691

63,832,634

Add lines <b>2a</b> through <b>2d</b>					2e	9,084,033
Subtract line <b>2e</b> from line <b>1</b>					3	50,073,650
Amounts included on Form 990, Part VIII, line 12, but not on line 1						
Investment expenses not included on Form 990, Part VIII, line 7b .	4a					
Other (Describe in Part XIII )	4b		1,4	64,041		
Add lines <b>4a</b> and <b>4b</b>			_		4c	1.464.041

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

2a

2b

2c

2d

2a

10,697

7,157,063

1,916,273

7,157,063

1

2b b Prior year adjustments . . 2c 2d 373,706 d Other (Describe in Part XIII) . Add lines 2a through 2d . 2e 7,530,769

3 Subtract line 2e from line 1 . 3 56,301,865 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. Other (Describe in Part XIII ) . . . . . . 1,344,540 b Add lines 4a and 4b . . . . c 4c 1,344,540

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

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

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

Net unrealized gains (losses) on investments . . . .

Total expenses and losses per audited financial statements

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

Donated services and use of facilities . .

Recoveries of prior year grants . . .

Donated services and use of facilities .

Other (Describe in Part XIII)

57,646,405

## Part XIII

Return Reference

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

Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12) . . . . . .

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

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

PART V, LINE 4 ADF FOUNDATION. A RELATED ORGANIZATION MAINTAINS THE ENDOWMENT TO SUPPORT ALLIANCE DEFENDING FREEDOM Schedule D (Form 990) 2015

Explanation

Schedule D (Form 990) 2015		Page <b>5</b>
Part XIII Supplemental :	Information (continued)	
Return Reference	Explanation	
PART XI, LINE 2D - OTHER ADJUSTMENTS	ADF FOUNDATION REVENUE 1,811,385 15100 SOLAR REVENUE 104,888	
PART XI, LINE 4B - OTHER ADJUSTMENTS	INTERCOMPANY ELIMINATIONS 1,464,041	
PART XII, LINE 2D - OTHER ADJUSTMENTS	15100 SOLAR EXPENSES 139,383 ADF FOUNDATION EXPENSES 234,323	
PART XII, LINE 4B - OTHER ADJUSTMENTS	INTERCOMPANY ELIMINATIONS 1,344,540	

Schedule D (Form 990) 2015

efile GRAPHIC print - DO N	IOT PROCESS	As Filed Dat	a -	DLN:	93493100010407
SCHEDULE F (Form 990)	tatement of	Activities C	outside the Unit	ed States	OMB No 1545-0047
Denartment of the Treasury		Part IV, line 1 ► Attach to	i answered "Yes" to Form 4b, 15, or 16. b Form 990. nd its instructions is at wi		2015 Open to Public Inspection
Name of the organization ALLIANCE DEFENDING FREEDOI	М			<b>Employer iden</b> 54-1660459	tification number
<b>Part I General Informa</b> Complete if the org			e United States. rm 990, Part IV, line	L	
1 For grantmakers. Does the and other assistance, the used to award the grants	grantees' eligibil			-	√ Yes  No
<ul> <li>For grantmakers. Describ assistance outside the Un</li> <li>Activites per Region (The fo</li> </ul>	e in Part V the or ited States				1.
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a <b>(f)</b> Total expenditures for and investments in region
(1) See Add'l Data		region	regiony		
(2)					
(3)					
(4)					
( 5)					
3a Sub-total b Total from continuation shee to Part I	8 8 0	0			3,044,805 31,500
c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice,	see the Instructions	-1	Cat	No 50082W <b>Sche</b> o	3,076,305 Jule F (Form 990) 2015

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

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

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

19

(18)

			ed States. Complete i	f the organization a	nswered "Yes" to For	Page ? m 990, Part IV, line 16
(b) Region	(c) Number of recipients	eded.  (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)
SOUTH AMERICA	3	18,900	WIRE TRANSFER	0	N/A	N/A
EUROPE	2	12,600	WIRE TRANSFER	0	N/A	N/A
CENTRAL AMERICA AND THE CARIBBEAN	1	6,300	WIRE TRANSFER	0	N/A	N/A
NORTH AMERICA	2	11,300	WIRE TRANSFER	0	N/A	N/A
	s duplicated if addition (b) Region  SOUTH AMERICA  EUROPE  CENTRAL AMERICA AND THE CARIBBEAN	c duplicated if additional space is ne  (b) Region (c) Number of recipients  SOUTH AMERICA 3  EUROPE 2  CENTRAL AMERICA AND THE CARIBBEAN	duplicated if additional space is needed.  (b) Region (c) Number of recipients (d) Amount of cash grant  SOUTH AMERICA 3 18,900  EUROPE 2 12,600  CENTRAL AMERICA 1 6,300 AND THE CARIBBEAN	duplicated if additional space is needed.  (b) Region (c) Number of recipients (d) Amount of cash grant (e) Manner of cash disbursement  SOUTH AMERICA 3 18,900 WIRE TRANSFER  EUROPE 2 12,600 WIRE TRANSFER  CENTRAL AMERICA 1 6,300 WIRE TRANSFER  AND THE CARIBBEAN	duplicated if additional space is needed.  (b) Region (c) Number of recipients (d) Amount of disbursement (f) Amount of non-cash assistance  SOUTH AMERICA 3 18,900 WIRE TRANSFER 0  EUROPE 2 12,600 WIRE TRANSFER 0  CENTRAL AMERICA AND THE CARIBBEAN	(b) Region       (c) Number of recipients       (d) Amount of cash grant       (e) Manner of cash disbursement       (f) Amount of non-cash assistance       (g) Description of non-cash assistance         SOUTH AMERICA       3       18,900 WIRE TRANSFER       0 N/A         EUROPE       2       12,600 WIRE TRANSFER       0 N/A         CENTRAL AMERICA AND THE CARIBBEAN       1       6,300 WIRE TRANSFER       0 N/A

# 8621) Yes ✓ No 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)

Schedule F (Form 990) 2015

Νo

Yes

Page 5

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).

#### 990 Schedule F. Supplemental Information

Schedule F (Form 990) 2015

Joe Schiculate 17 Supplemental Information	
Return Reference	Explanation
PART I, LINE 2	WHEN ALLIANCE DEFENDING FREEDOM APPROVES A GRANT, THE FUNDS ARE RETAINED BY ALLIANCE DEFENDING FREEDOM AND SET ASIDE TO BE USED EXCLUSIVELY IN FURTHERANCE OF THE GRANT REQUEST. DISTRIBUTIONS ARE MADE PURSUANT TO A WRITTEN INVOICE AND REPORT DEMONSTRATING EVIDENCE OF EXPENSES ACTUALLY INCURRED, TIME ACTUALLY INVESTED IN FURTHERANCE OF THE GOALS SUPPORTED BY THE GRANT, AND A REPORT AS TO THE ACTIVITIES PERFORMED AND GOALS ACHIEVED

990 Schedule F, Supplemental Information

Return Reference Explanation

ACCRUAL METHOD

PART I. LINE 3

PART III COL (C) THE SETIMATED AN IMPER OF RECIDENTS IS DETERMINED BY THE NUMBER OF A PRODUCTO SCHOLARSHIP.

PART III, COL (C)
THE ESTIMATED NUMBER OF RECIPIENTS IS DETERMINED BY THE NUMBER OF APPROVED SCHOLARSHIP
APPLICATIONS

### **Additional Data**

Software ID: Software Version:

**EIN:** 54-1660459

Name: ALLIANCE DEFENDING FREEDOM

(e) If activity listed in

(f) Total expenditures

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region (b) Number of (c) Number of (d) Activities

	offices in the region	employees or agents in region	conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(d) is a program service, describe specific type of service (s) in region	for region
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,	1	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	92,258
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	5	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	2,464,529
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	1	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	382,119
i					

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, service, describe region agents in specific type of service region program services, grants to recipients (s) in region located in the region) SOUTH AMERICA -0 GRANTS TO IN/A 5,000

56,970

ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	v	RECIPIENTS LOCATED IN REGION		
EAST ASIA AND THE	0	GRANTS TO	N/A	

Form 990 Schedule F Part I - Activities Outside The United States

FASO,

PACIFIC	Ü		RECIPIENTS LOCATED IN REGION		
SUB-SAHARAN AFRICA -	0	0	GRANTS TO	N/A	2

		IN REGION		
SUB-SAHARAN AFRICA -	0	GRANTS TO	N/A	

SUB-SAHARAN AFRICA - ANGOLA, BENIN,	0	-	GRANTS TO RECIPIENTS LOCATED	N/A	26,329

SUB-SAHARAN AFRICA -	0	0	GRANTS TO	N/A	2
NGOLA, BENIN,	•		RECIPIENTS LOCATED		
OTCHANA DUDICTNIA			ITAL DECTON		

JOB SKIIKKKII KI KICK	ı U	· ·	1010/11/15/10	[ <sup>1</sup> ], <sup>1</sup> , <sup>1</sup>	
ANGOLA, BENIN,			RECIPIENTS LOCATED		
BOTSWANA, BURKINA			IN REGION		

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, service, describe region agents in specific type of service region program services, grants to recipients (s) in region located in the region) CENTRAL AMERICA AND OTHER ACTIVITES IN/A 6,300 THE CARIBBEAN -ANTIGUA & BARBUDA, 11.300

18,900

ARUBA, BAHAMAS,					
NORTH AMERICA -	1	0	OTHER ACTIVITES	N/A	
CANADA AND MEXICO,	_				
BUT NOT THE UNITED					
STATES					

SOUTH AMERICA -IOTHER ACTIVITES IN/A

Form 990 Schedule F Part I - Activities Outside The United States

COLUMBIA, ECUADOR,

ARGENTINA, BOLIVIA, BRAZIL, CHILE,

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) A ctivities offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, agents in service, describe region specific type of service region program services, grants to recipients (s) in region located in the region) EUROPE (INCLUDING OTHER ACTIVITES IN/A 12,600 ICELAND & GREENLAND) -ALBANIA, ANDORRA,

Form 990 Schedule F Part I - Activities Outside The United States

AUSTRIA, BELGIUM

(b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (d) Purpose of grant (c) Region non-cash cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) **IEUROPE** HUMAN RIGHTS 951.625 WIRE TRANSFERS 0 N/A N/A LEGAL WORK

505,982 WIRE TRANSFERS

0 N/A

IN/A

	EUROPE	HUMAN RIGHTS LEGAL WORK	578,007	WIRE TRANSFERS	0 N/A	N/A
	ELLBORE	HIIMAN DICHTS	220.910	WIDE TOANSEEDS	0 N / A	N /A

		LEGAL WORK					,
	EUROPE	HUMAN RIGHTS	339,819	WIRE TRANSFERS	0	N/A	N/A

HUMAN RIGHTS

LEGAL WORK

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

EUROPE

		LEGAL WORK					
	EUROPE	HUMAN RIGHTS LEGAL WORK	339,819	WIRE TRANSFERS	0	N/A	N/A

(b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (d) Purpose of grant (c) Region non-cash cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) **IEUROPE** HUMAN RIGHTS 12.602 WIRE TRANSFERS Oln/A IN/A LEGAL WORK LULINA NI DICUTO 240 000 WIDE TRANSFERO alar /a 1 . . . . INCORTU A MEDICA

163,395 WIRE TRANSFERS

O N/A

IN/A

NORTH AMERICA	LEGAL WORK	210,888	WIRE TRANSFERS	0	N/A	N/A
SOUTH ASIA	HUMAN RIGHTS LEGAL WORK	88,210	WIRE TRANSFERS	0	N/A	N/A

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

**INORTH AMERICA** 

HUMAN RIGHTS

LEGAL WORK

(b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (d) Purpose of grant (c) Region cash non-cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) **IEUROPE** HUMAN RIGHTS 60,647 WIRE TRANSFERS Oln/A IN/A LEGAL WORK

5,000 WIRE TRANSFERS

O N/A

IN/A

		HUMAN RIGHTS LEGAL WORK	52,000	WIRE TRANSFERS	0 10	N/A	N/A
	SUB-SAHARAN	HUMAN RIGHTS	26,329	WIRE TRANSFERS	0 10	I/A	N/A

LEGAL WORK

LEGAL WORK

HUMAN RIGHTS

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

AFRICA

SOUTH AMERICA

DLN: 93493100010407

54-1660459

SCHEDULE G (Form 990 or 990-EZ)

ALLIANCE DEFENDING FREEDOM

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

OMB No 1545-0047

2015

Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ **Inspection** Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990 Name of the organization **Employer identification number** 

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations **▼** Solicitation of non-government grants ▼ Internet and email solicitations Solicitation of government grants ▼ Phone solicitations Special fundraising events Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising ✓Yes No services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (vi) Amount paid to (ii) Activity (iii) Did (iv) Gross receipts (v) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) organization or entity (fundraiser) fundraiser listed in custody or control of col (i) contributions? Yes No CONSULTINGON MASTERWORKS INC DIRECT MAIL 19265 POWDER HILL PROGRAM Νo 16,087,398 2,153,882 13,933,516 **PLACE NE** POULSBO, WA 98370 TELEMARKETING INFOCISION PO BOX 932441 62,361 152,519 90,158 Nο CLEVELAND, OH 44193 FUNDRAISING **DUNHAM COMPANY** CONSULTATION 6111 WEST PLANO Nο 0 210,113 PARKWAY SUITE 2700 PLANO, TX 75093 TELEMARKETING CAMPAIGNHO 109 WEST FRONT ST n 6.859 Nο Λ PO BOX 257 BROOKLYN, IA 52211

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from

AR, CA, CO, DC, FL, GA, HI, IL, KS, LA, ME, MD, MA, MI, MN, NH, NJ, NM, NC, ND, OH, OK, OR, PA, SC, TN, VA, WA, WI, AK, CT, MS, NY,

10

Total

16,239,917

13,995,877

2,461,012

Pa	rt II Fundraising Events.  Complete if the organization fundraising event contribution resources are then #5,000	ns and gross income	Form 990, Part IV, line on Form 990-EZ, line	18, or reported mo s 1 and 6b. List ever	re than \$15,000 of nts with gross
	receipts greater than \$5,000	. <b>(a)</b> Event #1	<b>(b)</b> Event #2	(c)O ther events	(d) Total events
		(event type)	(event type)	(total number)	(add col (a) through col (c))
Reverkie					
Seve	1 Gross receipts				
_	2 Less Contributions				
	Gross income (line 1 minus				
	4 Cash prizes				
	5 Noncash prizes				
Se	6 Rent/facility costs				
Expenses	<b>7</b> Food and beverages				
	8 Entertainment				
Direct	<b>9</b> Other direct expenses				
ā	10 Direct expense summary Add lines 4	through 9 in column (d	d)		
	11 Net income summary Subtract line 1	0 from line 3, column (	d)		
Pal	Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on	Form 990, Part IV, line	19, or reported mo	re than \$15,000 on
Revenue		(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c)O ther gaming	(d) Total gaming (add col (a) through col (c))
æ	1 Gross revenue				
ses	2 Cash prizes				
Expens	3 Noncash prizes				
	4 Rent/facility costs				
Direct	5 Other direct expenses				
	other unect expenses	<b>┌── Yes</b> %	├ Yes%		
	6 Volunteer labor	☐ No	│ No	☐ No	
	7 Direct expense summary Add lines 2	2 through 5 ın column (	d)		
	8 Net gaming income summary Subtra	ct line 7 from line 1, co	lumn (d)		
9	Enter the state(s) in which the organizat				Yes No
a b	Is the organization licensed to conduct  If "No," explain	-			165   110
10a	Were any of the organization's gaming li	censes revoked, suspe	nded or terminated during	the tax year?	Yes No
Ь	· · · —				

efile GRAPHIC print - DO NOT PROCESS As Filed Data Schedule I
(Form 990)

Grants and C
Governments
Complete if the organize
Department of the
Treasury
Internal Revenue Service

Name of the organization

ALLIANCE DEFENDING FREEDOM

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

OMB No 1545-0047

Employer identification number

54-1660459

<u> 2015</u>

DLN: 93493100010407

Open to Public Inspection

Part I General Information	n on Grants an	d Assistance					
Does the organization maintain rethe selection criteria used to awa Describe in Part IV the organization.	ard the grants or a	ssistance?				stance, and	<b>√</b> Yes <b>N</b> o
Part II Grants and Other Assistanthat received more than \$				plete if the organization	answered "Yes" on F	Form 990, Part IV, line 2:	l, 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							
2 Enter total number of section 50						_	17
For Paperwork Reduction Act Notice, see			<u> </u>	Cat No 50055P			20 le I (Form 990) 2015

 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered Tes Official 1990, Part 19, fine 22	
Part III can be duplicated if additional space is needed	
· · · · · · · · · · · · · · · · · · ·	

(a)Type of grant or assistanc	ce	<b>(b)</b> Number of recipients	(c)A mount of cash grant	<b>(d)</b> A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) CASH SCHOLARSHIP FOR LAW S	SCHOOL	132	831,600	0	N/A	N/A
-						
Part IV Supplemental In	nformati	ion. Provide the infor	mation required in Pa	art I, line 2, Part III,	column (b), and any other	additional information.
Return Reference	Explanatio	on				
PARTILINE 2	MHEN ALI	IANCE DEFENDING ED	EEDOM APPROVES A	CDANT THE FILINGS A	DE DETAINED BY ALLIANCE	DEFENDING FREEDOM AND SET

# Return ReferenceExplanationPART I, LINE 2WHEN ALLIANCE DEFENDING FREEDOM APPROVES A GRANT, THE FUNDS ARE RETAINED BY ALLIANCE DEFENDING FREEDOM AND SET ASIDE TO BE EXCLUSIVELY IN FURTHERANCE OF THE GRANT REQUEST DISTRIBUTIONS ARE MADE PURSUANT TO A WRITTEN INVOICE AND REPORT DEMONSTRATING EVIDENCE OF EXPENSES ACTUALLY INCURRED, TIME ACTUALLY INVESTED IN FURTHERANCE OF THE

GOALS SUPPORTED BY THE GRANT, AND A REPORT AS TO THE ACTIVITIES PERFORMED AND GOALS ACHIEVED

### **Additional Data**

organization

Software ID: Software Version:

ıf applicable

**EIN:** 54-1660459

Name: ALLIANCE DEFENDING FREEDOM

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) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of

or government			<b>J</b>	assistance	other)		
AHREND LAW FIRM PLLC 16 BASIN STREET SW EPHRATA,WA 98823	21-2277663	N/A	17,000	0	N/A	N/A	MARRIAGE PROJECT
ADF FOUNDATION 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260	86-1158500	501(C)(3)	1,464,041	0	N/A	N/A	RELIGIOUS LIBERTY
AMERICAN LIBERTIES INSTITUTE PO BOX 547503 ORLANDO,FL 32854	59-3309465	501(C)(3)	60,000	0	N/A		CHURCH AND LIFE PROJECTS

cash

(book, FMV, appraisal,

non-cash assistance

(h) Purpose of grant

or 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 (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) N/A BIOETHICS DEFENSE FUND 72-1528822 501(C)(3) 35,000 0 lN/A LIFE PROJECT - A7 6811 F VOLTAIRE AVE SCOTTSDALE, AZ 85254 N/A BRENA BELL & CLARKSON 92-0127640 N/A 41,625 0 N/A GENERAL LITIGATION AND 810 N STREET SUITE 100 LIFE PROJECT

PC
810 N STREET SUITE 100
ANCHORAGE, AK 99501

CENTER FOR RELIGIOUS
EXPRESSION
699 OAKLEAF OFFICE LANE

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

SUITE 107

MEMPHIS, TN 38117

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A CHAPLAIN ALLIANCE FOR 45-3911937 501(C)(3) 20,000 0 N/A CHURCH PROJECT RELIGIOUS LIBERTY PO BOX 151353 ALEXANDRIA, VA 22315 N/A CHARLOTTE LOZIER 26-4788700 501(C)(3) 30,000 0 N/A LIFE PROJECT

INSTITUTE 1200 NEW HAMPSHIRE AVE NW SUITE 750 750 WASHINGTON, DC 20036							
CIVIL RIGHTS RESEARCH CENTER	47-4348553	501(C)(3)	330,000	0	N/A	N/A	ALL AREAS

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

1875 I STREET NW SUITE

WASHINGTON, DC 20006

500

(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 grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A CLFOUNDATION 46-4577178 501(C)(3) 375,500 0 lN/A LIFE PROJECT 8655 EXPLORER DR COLORADO SPRINGS, CO 80920 N/A **CUTLER TRAINOR &** 14-1833304 N/A 7.500 0 N/A MARRIAGE PROJECT

CUTLER LLP 2 HEMPHILL PLACE SUITE 153 MALTA,NY 12020		,	.,				
FIDELIS CENTER FOR LAW	20-2787890	501(C)(3)	164.500	0	N/A	N/A	LIFE PROJECT

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

AND POLICY PO BOX 2709 CHICAGO, IL 60690

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) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A FREEDOM OF CONSCIENCE 30-0741605 501(C)(3) 290,332 0 N/A LIFE AND MARRIAGE DEFENSE FUND PROJECTS PO BOX 9520 RANCHO SANTA FE, CA 92067 HOME CCHOOL E2 12E426E E01/C1/21 27 E00 O NIZA N/A INTERNATIONAL СТ

FOUNDATION ONE PATRICK HENRY CIRCLE PURCELLVILLE,VA 20132	32-1334363	501(C)(3)	37,300	0	IN/A		PROJECT
HUMAN LIFE OF WASHINGTON	91-0904419	501(C)(3)	7,942	0	N/A	N/A	LIFE PROJECT

14400 BEL-RED RD SUITE

BELLEVUE, WA 98007

207

(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 grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A 1AMES MADISON CENTER 23-7442564 501(C)(3) 25,000 0 N/A LIFE PROJECT FOR FREE SPEECH INC. ONE SOUTH SIXTH STREET TERRE HAUTE, IN 47807 N/A KIRKPATRICK LAW OFFICES 26-0719168 N/A 10,000 0 N/A MARRIAGE PROJECT

PC 843 PENNIMAN AVE SUITE 201 PLYMOUTH,MI 48170			·				
LANGDON LAW LLC	01-0752200	N/A	5,000	0	N/A	N/A	ALLAREAS

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

8913 CINCINNATI-DAYTON ROAD

WEST CHESTER, OH 45069

(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 grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A LAW OFFICE OF JASON R 35-2724233 N/A 6,040 0 N/A UNIVERSITY CRADDOCK PROJECT 19 S LASALLE SUITE 604 CHICAGO,IL 60603 RAL NOITA

LAW OFFICE OF SCOTT D BERGTHOLD 2290 OGLETREE AVE SUITE 106 CHATTANOOGA,TN 37421		N/A	10,687	0	N/A	GENERAL LITIGATION
LAW OFFICES OF HERBERT GREY	76-0743764	N/A	9,500	0	N/A	UNIVERSITY PROJECT

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

4800 SW GRIFFITH DRIVE

BEAVERTON, OR 97005

320

(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 applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A LAW OFFICES OF 26-3065769 N/A 20,000 0 N/A CHURCH PROJECT JONATHAN R WHITEHEAD LLC 229 SE DOUGLAS STE 210 SCHOOL

N/A

CHURCH PROJECT

0 N/A

LEES SUMMIT, MO 64063						
LIFE LEGAL DEFENSE FOUNDATION PO BOX 2105 2129 BIG RANCH ROAD NAPA,CA 94558	68-0191488	501(C)(3)	20,000	0	N/A	PUBLIC SO PROJECT

74,089

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

N/A

36-4394768

MAUCK & BAKER LLC

CHICAGO, IL 60602

SUITE 600

ONE N LASALLE STREET

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (d) A mount of cash (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) N/A N/A 5.469 0 N/A MRDIAW 45-4324795 MARRIAGE PROJECT 3301 WEST CLYDE PLACE DENVER.CO 80211 N/A NATIONAL CHRISTIAN 58-1493949 501(C)(3) 83.575 0 N/A COMMUNICATIONS FOUNDATION PROJECT 11625 RAINWATER DR SUITE 500 ALPHARETTA, GA 30009

30.476

N/A

INTERNATIONAL PROJECT

0 N/A

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

501(C)(3)

26-0809074

ROADS OF SUCCESS

2896 HACIENDA DRIVE DUARTE, CA 91010

(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 cash (book, FMV, appraisal, non-cash assistance or assistance grant other) or government assistance RUTA SOULIOS & STRATIS 22-3630626 N/A 28,390 0 N/A IN/A MARRIAGE PROJECT LIP 10-04 RIVER ROAD FAIR LAWN, NJ 07410 AGE PROJECT

SCHAERR DUNCAN LLP 1717 K STREET NW SUITE 900 WASHINGTON, DC 20006	46-5018287	N/A	10,000	0	N/A	N/A	MARRIAGE PROJECT
SCHAERR DUNCAN LLP	47-4993863	N/A	15,000	0	N/A	N/A	MARRIAGE PROJECT

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

1717 K STREET NW SUITE 900

WASHINGTON, DC 20006

(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 cash (book, FMV, appraisal, non-cash assistance or assistance grant other) or aovernment assistance STEPHEN T FIEWEGER P C 47-2179103 N/A 74,500 0 N/A N/A UNIVERSITY 5157 UTICA RIDGE ROAD **IPROJECT** DAVENPORT, IA 52807 N/A STORY LAW FIRM LLC. 26-3980897 N/A 20,412 0 N/A GENERAL LITIGATION

5,887

N/A

PUBLIC SQUARE PROJECT

0 N/A

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

N/A

438 E MILSAP RD SUITE 103 FAYETTEVILLE,AR 72703		
STURGILL TURNER BARKER & MOLONEY PLLC 333 WEST VINE STREET	61-0576615	

**SUITE 1400** 

LEXINGTON, KY 40507

(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 grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A THE CLAREMONT 95-3443202 501(C)(3) 10,000 0 N/A MARRIAGE PROJECT INSTITUTE 1317 W FOOTHILL BLVD STE 120 ARRIAGE AND SOUARE CTS

IN/A

MARRIAGE PROJECT

0 N/A

UPLAND,CA 91786						
WADLEIGH STARR & PETERS PLLC 95 MARKET STREET MANCHESTER,NH 03101	02-0504984	N/A	93,237	0	N/A	LIFE, MA PUBLIC S PROJECT

16,726

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

N/A

WASHINGTONIEGAL

SNOHOMISH, WA 98291

SERVICES PLIC PO BOX 2400

27-0454847

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant **(b)** EIN (c) IRC section (a) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or aovernment assistance other) 49-0583297 N/A N/A 21.449 0 ln/A LIFE AND MARRIAGE PROJECTS.

WHITEHEAD LAW FIRM LLC 200 NE MISSOURI ROAD SUITE 200

LEES SUMMIT, MO 64086

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

**Compensation Information** 

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

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

2015

OMB No 1545-0047

DLN: 93493100010407

Schedule J (Form 990)

reas	rtment of the ury nal Revenue Service	▶ Information about Schedule J (Form		cn to Form 990. b) and its instructions is at <u>www.irs</u>	.gov/form990.	Open t Insp	o Pul ectio	
Νa	me of the organ IANCE DEFENDING	ızatıon			Employer identifica	ition nu	mber	
Do	Ouest	ions Dosarding Componention			54-1660459			
- 6	rt I Quest	ions Regarding Compensation					T	l
1a		propiate box(es) if the organization provide					Yes	No
	_ `	, Section A , line 1a Complete Part III to	prov	,				
		ss or charter travel	L	Housing allowance or residence fo	•		l I	 
	<u> </u>	r companions	<u> </u>	Payments for business use of pers			l I	 
	<u>.                                    </u>	nnification and gross-up payments	<u> </u>	Health or social club dues or initia		-	l I	 
	Discretion	nary spending account	ı	Personal services (e g , maid, cha	uffeur, chef)			
b		oxes in line 1a are checked, did the orgai t or provision of all of the expenses desc				1b	Yes	
2		zation require substantiation prior to rein tees, officers, including the CEO/Execut		· .	•	2	Yes	
3	organızatıon's	n, if any, of the following the filing organiza CEO/Executive Director Check all that ted organization to establish compensati	apply	y Do not check any boxes for metho	ods			
	✓ Compens	sation committee		Written employment contract			ļ	
	✓ Independ	dent compensation consultant	<b>▽</b>	Compensation survey or study				
	<b>✓</b> Form 990	of other organizations	<b>√</b>	Approval by the board or compens	ation committee			 
4	During the yea or a related or	ar, did any person listed on Form 990, Pa ganization	rt V I	I, Section A, line 1a with respect to	the filing organization	on		
а	Receive a sev	erance payment or change-of-control pay	ymen	t?		4a	Yes	
b	Participate in,	or receive payment from, a supplementa	ıl non	qualified retirement plan?		4b		No
c	Participate in,	or receive payment from, an equity-base	ed cor	mpensation arrangement?		4c		Νo
	If "Yes" to any	y of lines 4a-c, list the persons and provi	de th	e applicable amounts for each item	ın Part III			
		), 501(c)(4), and 501(c)(29) organization		·				
5	•	sted on Form 990, Part VII, Section A, II contingent on the revenues of	ne 1a	a, did the organization pay or accrue	any			
а	The organizati	on?				5a		Νo
b	Any related or	-				5b		Νo
	If "Yes," on lir	ne 5a or 5b, describe in Part III						
6	•	sted on Form 990, Part VII, Section A, li contingent on the net earnings of	ne 1a	a, did the organization pay or accrue	any			
а	The organizati	on?				<b>6</b> a		Νo
b	Any related or	ganızatıon?				6b		Νo
	If "Yes," on lir	ne 6a or 6b, describe in Part III						
7		sted on Form 990, Part VII, Section A, li described in lines 5 and 6? If "Yes," des			on-fixed	7		No
В		unts reported on Form 990, Part VII, pai initial contract exception described in Re				8		No
9	If "Yes" on lin	e 8, did the organization also follow the re	ebutt	able presumption procedure describ	ed in Regulations			

section 53 4958-6(c)?

Selledales (Form 550) 2015					r age 🕳
Part III Officers, Directors,	, Trustees, Key Employees, and Highest Compensate	<b>d Employees.</b> Use	duplicate copies if	additional space is	needed.
ınstructions, on row (II) Do not list ar	tion must be reported on Schedule J, report compensation from the ony individuals that are not listed on Form 990, Part VII for each listed individual must equal the total amount of Form 990, F	.,	-	·	
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in

### other deferred benefits (B)(ı)-(D) column(B) reported (ii) (iii) Base as deferred on prior Bonus & incentive Other reportable compensation (I) compensation compensation compensation Form 990

Schedule 1 (Form 990) 2015

See Additional Data Table

Page 2

Schedule J (Form 990) 2015	Page <b>3</b>
Part III Supplemental Infor	mation
Provide the information, explanation, o	r descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Return Reference	Explanation
PART I, LINE 1A	FIRST CLASS TRAVEL MAY BE PROVIDED TO EMPLOYEES FOR AIR TRAVEL OF EXTENDED LENGTH OR WHEN AVAILABILITY OF RESERVATIONS IS LIMITED TO FIRST CLASS TYPICALLY THESE ARE LOW OR NO EXPENSE DUE TO AIRLINE FREQUENT FLYER PROGRAMS WHICH ALLOW UPGRADES TO AIRLINE TRAVEL THIS IS FOR THE CONVENIENCE AND BUSINESS PURPOSE OF THE ORGANIZATION, NOT THE INDIVIDUAL AND IS NOT TREATED AS TAXABLE INCOME TRAVEL FOR COMPANIONS IS PROVIDED WHEN THE COMPANION'S ATTENDANCE AT MEETINGS, CONFERENCES, ETC HAS A BONA FIDE BUSINESS PURPOSE TO THE ORGANIZATION THIS IS NOT TREATED AS TAXABLE COMPENSATION THESE EXPENSE ITEMS ARE NOT LIMITED TO OFFICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED INDIVIDUALS, BUT

ARE AVAILABLE TO ALL EMPLOYEES IN THE SITUATIONS DESCRIBED

PART I, LINE 4A MARK FEDDERN AND CHARLES BOLTE RECEIVED SEVERANCE FOLLOWING TERMINATION IN THE AMOUNTS OF \$46,354 AND \$74,652,

RESPECTIVELY

Schedule J (Form 990) 2015

# Software ID: Software Version:

**EIN:** 54-1660459

Name: ALLIANCE DEFENDING FREEDOM

Form 990, Schedule J,	rait	1	<u> </u>					(F) Compensation in
<b>(A)</b> Name and Title		(i) Base Compensation	f W-2 and/or 1099-MI:  (ii)  Bonus &  Incentive  compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1ALAN SEARS PRESIDENT & CEO	(1)	387,142	0	2,456	24,000	7,650	421,248	0
	(11)	0	0	0	0	0	0	0
1BENJAMIN BULL CHIEF COUNSEL, EVP OF ADF	(1)	292,034	0	3,625	24,000	7,650	327,309	0
PROGRAMS	(11)	0	0	0	0	-	- 0	0
2MARK FEDDERN LEFT 2016 CFO & SECURITY DIRECTOR	(1)	177,918	0	47,085	18,000	7,356	250,359	0
	(11)	0	0	0	0			0
3WAYNE SWINDLER EVP OPERATIONS, CFO	(1)	224,988	0	895	24,000	7,250	257,133	0
	(11)	0	0	0	0	-0	- 0	0
<b>4</b> GARY MCCALEB SR COUNSEL, VP OF	(1)	224,898	0	1,385	24,000	7,560	257,843	0
ADVOCACY & RESEARC	(11)	0	0	0	0	-	- 0	0
<b>5</b> JEFFERY VENTRELLA SR COUNSEL, SVP OF	(1)	201,790	0	780	10,351	6,650	219,571	0
TRAINING	(11)	0	0	0	0		-	0
6MARK CROZET SVP DEVELOPMENT	(1)	230,462	0	0	9,411	6,650	246,523	0
SVF DEVELOPMENT	(11)	0	0	0	0			0
<b>7</b> KRISTEN WAGGONER SR COUNSEL, SVP U S LEGAL	(1)	203,267	0	0	18,000	6,110	227,377	0
ADV	(11)	0	0	0	0			0
8GLEN LAVY CORPORATE COUNSEL	(1)	180,949	0	1,154	23,359	7,650	213,112	0
	(11)	0	0	0	0			0
9TIM CHANDLER SR CNSL SVP OF ALLIANCE	(1)	174,302	0	134	7,104	6,570	188,110	0
ADV	(11)	0	0	0	0	-		0
10 CHARLES BOLTE LEFT 2016	(1)	120,317	0	76,874	18,000	7,650	222,841	0
CCO	(11)	0	0	0	0	-	- 0	0
11DOUG NAPIER SVP OF ALLIANCE RELATIONS	(1)	207,650	0	433	14,890	6,650	229,623	0
	(11)	0	0	0	0	-	-	0
12JORDAN LORENCE SR COUNSEL	(1)	207,684	0	1,227	8,555	7,650	225,116	0
SK COUNSEL	(11)	0	0	0	0			0
13DAVID CORTMAN	(1)	196,507	0	400	8,019	6,650	211,576	0
SR COUNSEL, VP U S LITIGATION	(11)	0	0	0	0			0
14KEVIN THERIOT	(1)	193,435	n	389	15,656	5,110	214,590	0
SR COUNSEL, VP CENTER FOR LIFE	(11)	0						
				<u> </u>	٥	0	0	

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DLN: 93493100010407

OMB No 1545-0047

2015

(Form 990 or 990-EZ)

**Transactions with Interested Persons** ▶ Complete if the organization answered

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

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

Department of Treasury Internal Reve		vice	▶I	nformation	about Sche	•	990 or 990-EZ <u>ov /f<i>orm990</i>.</u>	) and its instru	ıctions	is at		Ope Ir	en to Po Ispecti	ublic on	
Name of t	the org								Er	Employer identification number					
Part I	Exce	ss Benef	it Tr	ansaction	S (section	501(c)(3), so	ection 501(c)	(4), and 501(c		1-166 organi		only)			
								25a or 25b, or							
1 (a	ı) Name	e of disqual	(b) Relationship between disqualified person and (c) Descrip							n of	(d) Corrected				
						01	ganization		+	tran	saction		Yes	No	
									+						
-									+						
<b>2</b> Ente 4958						-		sons during the			section  section				
								 on							
						•	ne organizacie	,,,,	•		<b>-</b> Ψ				
Part II						Persons.	0-E7 Dart V	line 38a, or Fo	orm 00	0 Ba	et TV/ lu	20.76.0	or if the		
						00, Part X, lin		inic sou, or re	JIIII 33	0,1 0	1010, 111	10 20,0	or in the		
(-) N		/I-> D - I - b		(-)		<b>L</b> -	(-)0 ··· - · l	/6\D-I	(-)	T					
(a) Nam Interest		<b>(b)</b> Relation with	nsnip	(c) Purpose of	(d) Loan or from the		(e)Original principal	(f)Balance due		j) In <b>(h)</b> fault? Approved					
perso	n	organızat	ion	loan	organizatio	n?	amount				by board or committee?				
					To	From			Yes	No	Yes	No	Yes	No	
											-				
												+			
												+			
												-			
						1					-	+			
Total				<b>▶</b> \$											
Part III	Gra	nts or As	sist	<u> </u>	efiting In	terested F	Persons.								
	Con	plete if th	ne or	ganızatıon	answered	"Yes" on Fo	orm 990, Pa	rt IV, line 27							
<b>(a)</b> Nar	me of in persor	terested		) Relationsh erested pers		(c) A mount	ofassistance	e <b>(d)</b> Type	ofassı	stanc	e <b>(e</b> )	Purpos	se of ass	ıstance	
	persor	1	11100	organiza											
	_														
						1									

Return Reference

Page 2

(a) Name of interested person	(b) Relationship between interested person and the organization	between interested transaction person and the		(e) Sharing of organization revenues?	
				Yes	No
(1) JANET BITZKO	FAMILY MEMBER OF THE CEO	79,331	EMPLOYMENT COMPENSATION		No
(2) REBECCA SEARS	FAMILY MEMBER OF THE CEO	59,608	EMPLOYMENT COMPENSATION		No
(3) LUCAS SWINDLER	FAMILY MEMBER OF THE CFO	15,229	EMPLOYMENT COMPENSATION		No

**Explanation** 

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

DLN: 93493100010407

# **Noncash Contributions**

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047 2015

> Open to Public Inspection

Treasury

(Form 990)

► Attach to Form 990.

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

Department of the

Internal Revenue Service

Name of the organization **Employer identification number** ALLIANCE DEFENDING FREEDOM 54-1660459 Types of Property (b) (d) (a) (c) Number of contributions Method of determining Check Noncash contribution ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g Art—Works of art . . . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household . . . . . . 6 Cars and other vehicles 7 Boats and planes . . . Intellectual property . . 9 Securities-Publicly traded . Х 72 561,576 SALE PROCEEDS **10** Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests . . Securities—Miscellaneous . 13 Qualified conservation contribution—Historic structures . . . . 14 Oualified conservation contribution—Other . . . 15 Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . 18 Collectibles . . . . **19** Food inventory . . 20 Drugs and medical supplies . **21** Taxidermy . . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . **25** Other ▶ (\_\_ **26** Other ▶ ( \_\_\_\_\_) **27** Other▶(\_\_\_\_\_ 28 Other ► ( \_\_\_\_\_) Number of Forms 8283 received by the organization during the tax year for contributions 29 0 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a Νo **b** If "Yes," describe the arrangement in Part II

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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

contributions? . . . . . . . .

Cat No 51227J

Schedule M (Form 990) (2015)

31

32a

Yes

Νo

Schedule M (Form 990) (2015)

### Return Reference Explanation PART I, COLUMN (B) THE NUMBER IN COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTORS

erile GRAPHIC pr	IIIL - DO NOT PROCESS	AS FIIEU Dai
SCHEDULE O	Supplementa	I Information
(Form 990 or 990-EZ)	Complete to provi Form 990 or	de information f 990-EZ or to prov

Department of the

Internal Revenue

Name of the organization

ALLIANCE DEFENDING ERFEDOM

Treasurv

Service

Supplemental Information to Form 990 or 990-EZ

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

• Attach to Form 990 or 990-EZ.

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

2015
Open to Public Inspection

DLN: 93493100010407

Employer identification number

54-1660459 Return Explanation Reference FORM 990. UPON COMPLETION, THE ORGANIZATION'S FINANCE TEAM REVIEWS THE FORM 990 THROUGH THE FOLLOWING PROCESS PART VI. 1) THE CFO AND CONTROLLER COMPARE THE FORM 990 TO THE ANNUAL CORPORATE AUDIT AND INTERNAL FINANCIAL SECTION B. REPORTS THE CEO THEN READS THE FORM 990 FOR CONTENT AND CLARITY 2) THE CFO ASSIGNS THE CONTROLLER AND LINE 11 HIS TEAM TO REVIEW CONTENT, CHECK MATH TOTALS, AND CHECK SPELLING 3) FOLLOWING THE ABOVE REVIEW THE FORM 990 IS DISTRIBUTED TO A CHIEF OF STAFF B CEO C CHAIRMAN OF THE FINANCE AND AUDIT COMMITTEE (FAC) -WHICH IS RESPONSIBLE FOR OVERSIGHT OF FINANCE, AUDIT, AND TAX MATTERS D. THE CHAIR OF THE FAC ENSURES COMMITTEE MEMBERS REVIEW THE FORM 990 FOR MATERIAL EDITS AND COMPLIANCE E. UPON ACCEPTANCE, THE CHAIRMAN OF THE FAC INSTRUCTS THE CFO TO CIRCULATE THE FORM 990 TO THE FULL BOARD OF DIRECTORS 4) CHANGES AND CORRECTIONS FROM THE ABOVE ARE ADDRESSED AT EACH STEP 5) FOLLOWING THE ABOVE, THE CFO SIGNS AND INSTRUCTS THE FORM 990 TO BE FILED WITH THE IRS 6) UPON FILING WITH THE IRS, ADF'S FORM 990 IS A VAILABLE FOR PUBLIC INSPECTION AND DISTRIBUTION TO STATE GOVERNING BODIES, FOUNDATIONS, AND OTHER REQUESTING ENTITIES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY COVERS ANY DIRECTOR, PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST ANNUALLY, EACH COVERED PERSON IS REQUIRED TO ANNUALLY SIGN A STATEMENT AFFIRMING RECEIPT, UNDERSTANDING, COMPLIANCE AND REPORTING UNDER THE POLICY THE ORGANIZATION ALSO CONDUCTS PERIODIC REVIEWS TO ENSURE OPERATIONS ARE CONSISTENT WITH ITS CHARITABLE PURPOSES DIRECTORS SHALL REPORT POSSIBLE CONFLICTS OF INTEREST TO THE CHAIRMAN OF THE BOARD OF DIRECTORS PRIOR TO ANY ACTION ON THE TRANSACTION BY THE ORGANIZATION UPON REPORT OF A POSSIBLE CONFLICT, THE BOARD OF DIRECTORS SHALL CONDUCT AN INVESTIGATION AND DETERMINE WHETHER A CONFLICT OF INTEREST DOES EXIST AND WHETHER IT IS SUBSTANTIAL IF THE BOARD DETERMINES THAT A SUBSTANTIAL CONFLICT OF INTEREST EXISTS, THE INTERESTED INDIVIDUAL SHALL NOT VOTE ON THE TRANSACTION PRESENTING THE CONFLICT THE INTERESTED INDIVIDUAL MAY VOTE ONLY IF THE BOARD DETERMINES THAT NO CONFLICT EXISTS OR THE CONFLICT IS NOT SUBSTANTIAL NO INVESTIGATION OR DETERMINATION BY THE BOARD SHALL BE REQUIRED IF THE INTERESTED INDIVIDUAL VOLUNTARILY AGREES TO REFRAIN FROM VOTING ON THE TRANSACTION PRESENTING THE POTENTIAL CONFLICT OF INTEREST THE INTERESTED INDIVIDUAL MAY BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS THE MINUTES OF THE GOVERNING BOARD AND ALL COMMITTEES WITH BOARD DELEGATED POWERS SHALL CONTAIN A THE NAMES OF THE PERSONS WHO DISCLOSED OR OTHERWISE WERE FOUND TO HAVE A FINANCIAL INTEREST IN CONNECTION WITH AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST. THE NATURE OF THE FINANCIAL INTEREST, ANY ACTION TAKEN TO DETERMINE WHETHER A CONFLICT OF INTEREST. THE NATURE OF THE FINANCIAL INTEREST, ANY ACTION TAKEN TO DETERMINE WHETHER A CONFLICT OF INTEREST. IN FACT EXISTED B THE NAMES OF THE PERSONS WHO WERE PRESENT FOR DISCUSSIONS AND VOTES RELATING TO THE TRANSACTION OR ARRANGEMENT, AND A RECORD OF ANY VOTES TAKEN IN CONNE

Return Reference	Explanation
FORM 990,	ALLIANCE DEFENDING FREEDOM MAINTAINS A COMPENSATION SYSTEM CEO COMPENSATION IS SET BY THE
PART VI,	ORGANIZATION'S INDEPENDENT BOARD, AND THE CEO'S COMPENSATION IS IN ACCORDANCE WITH THE ADF
SECTION B,	COMPENSATION SYSTEM JOB DESCRIPTIONS ARE EVALUATED AGAINST INDEPENDENT MARKET SOURCES AND
LINE 15	COMPENSATION DATA AS PROVIDED BY AN INDEPENDENT COMPENSATION CONSULTANT. THE MANAGEMENT
	COMPENSATION COMMITTEE APPROVES POSITION GRADES AND PAY RANGES OF ALL OTHER POSITIONS. THE ADF BOARD $ lacksquare$
	OF DIRECTORS SETS THE COMPENSATION FOR THE CEO THE PLANNING AND EVALUATION COMMITTEE OF THE BOARD
	ANNUALLY REVIEWS THE CEO'S PERFORMANCE, CONSULTS WITH THE CHIEF OF STAFF/CFO ABOUT HOW THEIR
	EVALUATION TRANSLATES TO AN ADJUSTMENT OF PAY WITHIN THE STRUCTURE OF THE ORGANIZATION'S
	COMPENSATION SYSTEM, AND THEN PRESENTS TO THE FULL BOARD THE PERFORMANCE EVALUATION AND RESULTING
	PAY INCREASE, IF ANY, FOR APPROVAL THIS ACTION IS RECORDED IN THE MINUTES OF THE BOARD'S EXECUTIVE SESSION
	MEETING, AND DOCUMENTATION OF ANY INCREASE IS APPROVED BY THE CHAIRMAN AND PLACED IN THE CEO'S
	PERSONNEL FILE THE PROCESS WAS LAST UNDERTAKEN FOR ALL POSITIONS IN 2016

Return Reference	Explanation
FORM 990, PART VI,	THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE ON ITS WEB SITE
SECTION C, LINE 19	GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST

Return Reference	Explanation
FORM 990, PART XI, LINE 9	NET EQUITY ADJUSTMENT TO 15100 SOLAR INVESTMENT -34,495

Name, address, and EIN (if applicable) of disregarded entity

**DLN: 93493100010407**OMB No 1545-0047

## **Related Organizations and Unrelated Partnerships**

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

Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33.

Primary activity

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

**SCHEDULE R** 

(Form 990)

Part I

► Attach to Form 990.

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

(d)

Total income

End-of-year assets

(c)

Legal domicile (state

or foreign country)

Name of the organization ALLIANCE DEFENDING FREEDOM

Employer identification number
54-1660459

(f)

Direct controlling

entity

(1) 15100 LLC 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260 54-1660459	OWN REAL PROPERTY	AZ	249,020	12,097,825	ALLIANCE DEFENDING FREEDOM	1	
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	<b>ations</b> Complete ıf the tax year.	ne organization an		Form 990, Pari	t IV, line 34 because it	had on	е
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity sta (if section 501(c)		Section (13) co	<b>g)</b> n 512(b) ontrolled tity?
						Yes	No
	PUBLIC BENEFIT CORPORATION	AZ	501(C)(3)	LINE 7	ALLIANCE DEFENDING FREEDOM	Yes	
SCOTTSDALE, AZ 85260 86-1158500						$\bot$	<u> </u>
						+	
  For Paperwork Reduction Act Notice, see the Instructions for Form 990.			_ <u>I</u>		Schedule R (Fori	m 990) 2	015

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

domicile (state or foreign country)	controlling entity		ed, total income	Share of	Share of	<b>(f)</b> Share of total income	Share of	<b>(g)</b> Share of end-of-year assets	Disprop alloca	ortionate ations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	x managin partner?		(k) Percentage ownership
		514)			Yes	No	-	Yes	No					
	country)	country)	country) tax under sections 512-514)	country)  tax under sections 512- 514)	country) tax under sections 512-514)	country) tax under sections 512- 514)  Yes	country) tax under sections 512- 514)  Yes No	country) tax under sections 512-514) (Form 1065)	country   tax under	tax under sections 512- 514)  Yes No  Yes No  I a la l				

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign	(d) Direct controlling entity	(C corp, S corp,	<b>(f)</b> Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Section (b)(: contro	n 512 13) olled
		country)		or trust)				entit	
								Yes	No
(1)ADF RABBI TRUST 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260	RETIREMENT FUNDING	AZ	ALLIANCE DEFENDING FREEDOM	Т		380,335	100 000 %	Yes	
(2)15100 SOLAR LLC 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260	OWN AND OPERATE SOLAR ENERGY PROJECT	AZ	ALLIANCE DEFENDING FREEDOM	С	104,888	1,378,858	100 000 %	Yes	

Part V	<b>Transactions With Re</b>	lated Organizations	Complete if the orga	inization answered "Yes	s" on Form 990, I	Part IV, line 34, 35b, or 3	6.

	(a) (b) (c) (d)			
<b>2</b> I	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	Other transfer of cash or property from related organization(s)	1s		No
r (	Other transfer of cash or property to related organization(s)	1r	Yes	
ч	Remibulsement pala by related organization(s) for expenses			
•	Reimbursement paid by related organization(s) for expenses	1q	Yes	
D	Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
О :	Sharing of paid employees with related organization(s)	10	Yes	
n S	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
, .	course of lacing configuration of control organization (5) in the configuration (5) in the confi	$\vdash$		
	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
	Exchange of assets with related organization(s)	1i		No
_	Purchase of assets from related organization(s)	1h		No
	Sale of assets to related organization(s)	1g		No
f !	Dividends from related organization(s)	1f		No
e l	Loans or loan guarantees by related organization(s)	1e		No
	Loans or loan guarantees to or for related organization(s)	1d		No
	Gıft, grant, or capıtal contribution from related organization(s)	<b>1</b> c	Yes	
	Gift, grant, or capital contribution to related organization(s)	1b	Yes	
a l	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)ADF FOUNDATION	В	1,464,041	CASH TRANSFERRED
(2)ADF FOUNDATION	С	119,501	CASH TRANSFERRED
(3)ADF FOUNDATION	0	204,446	COMPENSATION PAID
(4)15100 SOLAR LLC	Q	60,000	ADMIN FEE PAID

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

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

revenue) that was not a related organization See instructions																
<b>(a)</b> Name, address, and EIN of entity	( <b>b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	of Disproprtional allocations?		(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	/-UBI General or nt in managing 20 partner? edule 1		(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No				
												1 I				
													<u> </u>			

