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Form 990

OMB No 1545-0047

Return of Organization Exempt From Income Tax

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

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

Department of the Treasury
Internal Revenue Service

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 7/01, 2015, and ending 6/30, 2016

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C JOYFUL HEART FOUNDATION
32 WEST 22ND STREET 4TH F
NEW YORK, NY 10010

D Employer identification number 72-1519537

E Telephone number (212) 475-2026

G Gross receipts \$ 23,682,707.

F Name and address of principal officer MAILE M. ZAMBUTO
SAME AS C ABOVE

H(a) Is this a group return for subordinates? ☐ Yes ☒ No
H(b) Are all subordinates included? ☐ Yes ☒ No
 If 'No,' attach a list (see instructions)

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no) 4947(a)(1) or 527

J Website: WWW.JOYFULHEARTFOUNDATION.ORG

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 2001

M State of legal domicile CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities AT OUR 2016 JOYFUL REVOLUTION GALA WE LAUNCHED OUR NEW VISION, MISSION, AND LOGO AFTER A PROCESS OF RE-EXAMINATION, REFLECTION, AND REDEFINITION WITH OUR BOARD OF DIRECTORS, LED-PRO-BONO-BY AN INTERNATIONALLY RECOGNIZED BRAND STRATEGIST. OUR VISION FOR THE FUTURE-A WORLD FREE

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) 32

4 Number of independent voting members of the governing body (Part VI, line 1b) 32

5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 36

6 Total number of volunteers (estimate if necessary) 103

7a Total unrelated business revenue from Part VIII, column (C), line 12 0.

7b Net unrelated business taxable income from Form 990-B, line 21 0.

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	75,757,670.	23,261,655.
9 Program service revenue (Part VIII, line 2g)	236,197.	127,828.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	348.	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-332,067.	-300,866.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	75,662,148.	23,088,617.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14 Benefits paid to or for members (Part IX, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,997,538.	2,632,557.
16a Professional fundraising fees (Part IX, column (A), line 11e)	191,000.	198,354.
b Total fundraising expenses (Part IX, column (D), line 25) 1,215,742.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	73,530,012.	19,616,692.
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	75,718,550.	22,447,603.
19 Revenue less expenses Subtract line 18 from line 12	-56,402.	641,014.
20 Total assets (Part X, line 16)	Beginning of Current Year 1,666,062.	End of Year 2,552,505.
21 Total liabilities (Part X, line 26)	250,946.	496,375.
22 Net assets or fund balances Subtract line 21 from line 20	1,415,116.	2,056,130.

Part II Signature Block

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

Sign Here
 Signature of officer *Maile M. Zambuto* Date 12/30/16
 MOLLY SOLOMON CFAO
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name DEREK FLANAGAN Preparer's signature *Derek Flanagan* Date 12/30/16
 Firm's name LEDEKER, LEVINE & ASSOCIATES LLC
 Firm's address 1099 WALL ST WEST SUITE 280 LYNDHURST, NJ 07071
 Check ☐ if self-employed PTIN P00396383
 Firm's EIN 22-3778048
 Phone no 201-933-3780

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

BAA For Paperwork Reduction Act Notice, see the separate instructions. TEEA0113L 10/12/15 Form 990 (2015)

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Part III Statement of Program Service Accomplishments

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

☒

- 1**
- Briefly describe the organization's mission:

SEE SCHEDULE O

- 2**
- Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

- 3**
- Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

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

4a (Code) (Expenses \$ 18,795,256. including grants of \$) (Revenue \$ 127,828.)

SEE SCHEDULE O

4b (Code) (Expenses \$ 1,020,066. including grants of \$) (Revenue \$)

SEE SCHEDULE O

4c (Code) (Expenses \$ 693,827. including grants of \$) (Revenue \$)

SEE SCHEDULE O

4d Other program services (Describe in Schedule O) SEE SCHEDULE O

(Expenses \$ 91,931. including grants of \$) (Revenue \$)

4e Total program service expenses 20,601,080.

Part 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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
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		X
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	X	
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		X
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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
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		X
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		X
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	X	
b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII		X
c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	X	
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	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	X	
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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
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		X
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		X
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)	X	
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	X	
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		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>		X
20b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If 'Yes,' complete Schedule I, Parts I and II</i>		X
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? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		X
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? <i>If 'Yes,' complete Schedule J</i>	X	
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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
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? <i>If 'Yes,' complete Schedule L, Part I</i>		X
25b 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? <i>If 'Yes,' complete Schedule L, Part I</i>		X
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? <i>If 'Yes,' complete Schedule L, Part II</i>		X
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? <i>If 'Yes,' complete Schedule L, Part III</i>		X
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? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		X
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? <i>If 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

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Form 990 (2015)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	56	
1 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	36	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b If 'Yes,' enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year.	7 d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12.	10 a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10 b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders.	11 a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b	
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12 b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13 b	
c Enter the amount of reserves on hand.	13 c	
14 a Did the organization receive any payments for indoor tanning services during the tax year?		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	14 b	

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

☒**Section A. Governing Body and Management**

	Yes	No
1 a Enter the number of voting members of the governing body at the end of the tax year. 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.	32	
1 b Enter the number of voting members included in line 1a, above, who are independent.	32	
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? SEE SCHEDULE O	X	
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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
7 a 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?		X
7 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: SEE SCHEDULE O		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?		X
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		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed: NY CA HI

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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)

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. SEE SCHEDULE O

20 State the name, address, and telephone number of the person who possesses the organization's books and records: MOLLY SOLOMON 32 WEST 22ND STREET 4TH FL NEW YORK NY 10010 (212) 475-2026

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARISKA HARGITAY PRESIDENT	6 0	X		X				0.	0.	0.
(2) CHRISTINA NORMAN VICE CHAIR	4 0	X		X				0.	0.	0.
(3) SUKEY NOVOGRATZ SECRETARY	2 0	X		X				0.	0.	0.
(4) KAREN POLIVKA TREASURER	3 0	X		X				0.	0.	0.
(5) MARK ALEXANDER CHAIRMAN	3 0	X		X				0.	0.	0.
(6) JESSICA AMBROSE BOARD MEMBER	2 0	X						0.	0.	0.
(7) BETH ARMSTRONG BOARD MEMBER	1 0	X						0.	0.	0.
(8) DURK BARNHILL BOARD MEMBER	1 0	X						0.	0.	0.
(9) JENNY BELUSHI BOARD MEMBER	1 0	X						0.	0.	0.
(10) SHANNA BROOKS BOARD MEMBER	1 0	X						0.	0.	0.
(11) ANDREA BUCHANAN BOARD MEMEBER	1 0	X						0.	0.	0.
(12) MICHELE DOMINICK BOARD MEMBER	1 0	X						0.	0.	0.
(13) JILL EISENSTADT-CHAYET BOARD MEMBER	2 0	X						0.	0.	0.
(14) LINDA FAIRSTEIN BOARD MEMBER	1 0	X						0.	0.	0.

BAA

TEEA0107L 10/12/15

Form 990 (2015)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) PETER HERMANN BOARD MEMBER	2 0	X					0.	0.	0.
(16) DANIELLE HERZLICH BOARD MEMBER	1 0	X					0.	0.	0.
(17) MARK HERZLICH BOARD MEMBER	1 0	X					0.	0.	0.
(18) RACHEL HOWALD BOARD MEMBER	2 0	X					0.	0.	0.
(19) DR. VALLI KALEI KANUHA BOARD MEMBER	2 0	X					0.	0.	0.
(20) MICHAEL KING BOARD MEMBER	1 0	X					0.	0.	0.
(21) LYNN LALLY BOARD MEMBER	1 0	X					0.	0.	0.
(22) ANDREA MCTAMANEY BOARD MEMBER	1 0	X					0.	0.	0.
(23) REVEREND AL MILES BOARD MEMBER	1 0	X					0.	0.	0.
(24) DEBBIE MILLMAN BOARD MEMBER	2 0	X					0.	0.	0.
(25) HEATHER MNUCHIN BOARD MEMBER	1 0	X					0.	0.	0.
1 b Sub-total							0.	0.	0.
c Total from continuation sheets to Part VII, Section A							832,405.	0.	51,156.
d Total (add lines 1b and 1c)							832,405.	0.	51,156.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **8**

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

	Yes	No
3		X
4	X	
5		X

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

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

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) Name and business address	(B) Description of services	(C) Compensation
INNOVATIVE PHILANTHROPY 5 HANOVER SQUARE NEW YORK, NY 10004	PROF. FUNDRAISER	192,000.
SPRING STUDIO NEW YORK LLC 6 ST JOHNS LANE NEW YORK, NY 10013	THE VENUE FOR GALA	110,000.
BROMWICH GROUP 1776 K STREET NW WASHINGTON, DC 20006	MEDIA ADVOCACY CONS	107,500.
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 3		

Department of the Treasury
Internal Revenue Service

2015

Name of the Organization

Employer Identification number	
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JOYFUL HEART FOUNDATION

72-1519537

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees[illegible]

Form 990 Cont 2015

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c 2,055,461.				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 21,206,194.				
	g Noncash contributions included in lines 1a-1f	\$ 17,803,588.				
	h Total. Add lines 1a-1f		23,261,655.			
Program Service Revenue		Business Code				
	2 a RAPE KIT BACKLOG REVENUE	541800	127,828.	127,828.		
	b -----					
	c -----					
	d -----					
	e -----					
	f All other program service revenue					
g Total. Add lines 2a-2f		127,828.				
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)					
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		149,208.			149,208.
		(i) Real (ii) Personal				
	6 a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ 2,055,461. of contributions reported on line 1c) See Part IV, line 18	a 134,686.				
	b Less direct expenses	b 594,090.				
	c Net income or (loss) from fundraising events		-459,404.			-459,404.
	9 a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a OTHER	900099	9,330.			9,330.	
b -----						
c -----						
d All other revenue						
e Total. Add lines 11a-11d		9,330.				
12 Total revenue. See instructions		23,088,617.	127,828.	0.	-300,866.	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	499,258.	314,533.	74,890.	109,835.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	1,724,500.	1,071,127.	254,935.	398,438.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	10,016.	6,310.	1,502.	2,204.
9 Other employee benefits	226,411.	143,083.	33,808.	49,520.
10 Payroll taxes	172,372.	108,594.	25,856.	37,922.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	15,190.		15,190.	
d Lobbying				
e Professional fundraising services See Part IV, line 17	198,354.			198,354.
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	698,635.	570,501.	59,144.	68,990.
12 Advertising and promotion				
13 Office expenses	450,162.	289,074.	42,995.	118,093.
14 Information technology				
15 Royalties				
16 Occupancy	205,950.	130,862.	30,781.	44,307.
17 Travel	320,429.	177,079.	31,320.	112,030.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	70,449.	53,823.	6,740.	9,886.
23 Insurance	35,783.	11,850.	2,802.	21,131.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a <u>PSA EXPENSES</u>	17,689,081.	17,689,081.		
b <u>OTHER</u>	131,013.	35,163.	50,818.	45,032.
c -----				
d -----				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	22,447,603.	20,601,080.	630,781.	1,215,742.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash — non-interest-bearing	868,735.	1	733,502.
	2 Savings and temporary cash investments	6,161.	2	19,041.
	3 Pledges and grants receivable, net	481,848.	3	1,487,082.
	4 Accounts receivable, net	83,958.	4	77,241.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	48,990.	9	74,752.
	10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a 428,723.		
	b Less accumulated depreciation	10b 302,824.	10c 129,321.	125,899.
	11 Investments — publicly traded securities		11	
	12 Investments — other securities. See Part IV, line 11		12	
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	47,049.	15	34,988.
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,666,062.	16	2,552,505.	
Liabilities	17 Accounts payable and accrued expenses	241,380.	17	392,704.
	18 Grants payable		18	
	19 Deferred revenue		19	87,115.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	9,566.	25	16,556.
	26 Total liabilities. Add lines 17 through 25	250,946.	26	496,375.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,122,616.	27	1,017,375.
	28 Temporarily restricted net assets	292,500.	28	1,038,755.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,415,116.	33	2,056,130.
34 Total liabilities and net assets/fund balances	1,666,062.	34	2,552,505.	

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Form 990 (2015)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	23,088,617.
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,447,603.
3	Revenue less expenses Subtract line 2 from line 1	3	641,014.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,415,116.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,056,130.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
2b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	X	
2c 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b 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		

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Form 990 (2015)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

JOYFUL HEART FOUNDATION

Employer identification number

72-1519537

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 9 ☐ An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations:

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2015

Part II 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 (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	3,003,051.	4,241,380.	4,136,224.	75757670.	23261655.	110399980.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3	3,003,051.	4,241,380.	4,136,224.	75757670.	23261655.	110399980.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						70,050,267.
6 Public support. Subtract line 5 from line 4						40,349,713.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	3,003,051.	4,241,380.	4,136,224.	75757670.	23261655.	110399980.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	118,848.	138,331.	114,733.	119,078.	149,208.	640,198.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.) SEE PART VI			38,754.	62,624.	9,330.	110,708.
11 Total support. Add lines 7 through 10						111150886.
12 Gross receipts from related activities, etc. (see instructions)					12	0.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	36.30 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	37.85 %
16a 33-1/3% support test — 2015. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☒		
b 33-1/3% support test — 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐		
17a 10%-facts-and-circumstances test — 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ ☐		
b 10%-facts-and-circumstances test — 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐		

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Schedule A (Form 990 or 990-EZ) 2015

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
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.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, 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.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

- 19a 33-1/3% support tests – 2015.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶ ☐
- b 33-1/3% support tests – 2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶ ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ ☐

Part IV Supporting Organizations

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

Section 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 Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.		
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 Part VI when and how the organization made the determination.		
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 Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
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).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.		
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.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI		

Section 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 Part VI 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.		
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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section 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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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 Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
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 Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
- a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

- a** 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 **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

- 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 **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer (a) and (b) below.

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in **Part VI**.

- 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.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

BAA

Schedule A (Form 990 or 990-EZ) 2015

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

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 required – see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
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 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

BAA

Schedule A (Form 990 or 990-EZ) 2015

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	2015	2014	2013	2012	2011
	\$ 9,330.	\$ 62,624.	\$ 38,754.		
TOTAL	<u>\$ 9,330.</u>	<u>\$ 62,624.</u>	<u>\$ 38,754.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

- ▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

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

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

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

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

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

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

Name of organization

JOYFUL HEART FOUNDATION

Employer identification number

72-1519537

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures

▶ \$

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955

▶ \$

0.

2 Enter the amount of any excise tax incurred by organization managers under section 4955

▶ \$

0.

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

☐ Yes

☐ No

4a Was a correction made?

☐ Yes

☐ No

b If 'Yes,' describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities

▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

▶ \$

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

▶ \$

4 Did the filing organization file Form 1120-POL for this year?

☐ Yes

☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2015

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

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and 'limited control' provisions apply

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount Enter the amount from the following table in both columns			
If the amount on line 1e, column (a) or (b) is	The lobbying nontaxable amount is		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a If zero or less, enter -0-			
i Subtract line 1f from line 1c If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			

☐ Yes ☐ No

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

BAA

Schedule C (Form 990 or 990-EZ) 2015

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
SEE PART IV			
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		50.
e Publications, or published or broadcast statements?	X		
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		2,700.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i.			2,750.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B - DESCRIPTION OF LOBBYING ACTIVITY

JOYFUL HEART'S POLICY AND ADVOCACY DEPARTMENT CONDUCTED PHONE CALLS, EMAIL COMMUNICATIONS AND IN-PERSON MEETINGS WITH HIGH-RANKING FEDERAL OFFICIALS AND MEMBERS OF CONGRESS TO DISCUSS THE NEED FOR CONTINUED FUNDING OF A FEDERAL GRANT PROGRAM TO PROVIDE RESOURCES FOR STATES AND LOCAL JURISDICTIONS TO RESPOND MORE EFFECTIVELY TO SEXUAL ASSAULT.

BAA

Schedule C (Form 990 or 990-EZ) 2015

Part IV Supplemental Information (continued)**PART II-B - DESCRIPTION OF LOBBYING ACTIVITY (CONTINUED)**

THE DEPARTMENT ALSO SENT EMAIL BLASTS FOR A CALL TO ACTION TO THE GENERAL PUBLIC TO
SEND LETTERS TO MEMBERS OF CONGRESS URGING THEM PRIORITIZE THE RAPE KIT BACKLOG.

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**► Complete if the organization answered 'Yes' on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015**Open to Public
Inspection**

Name of the organization

Employer identification number

JOYFUL HEART FOUNDATION

72-1519537

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	☐ Yes	☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	☐ Yes	☐ No

Part II Conservation Easements.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of a historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2 c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2 d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

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

(i) Revenue included on Form 990, Part VIII, line 1	► \$ _____
(ii) Assets included in Form 990, Part X	► \$ _____

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

a Revenue included on Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1 a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1 c	
1 d	
1 e	
1 f	

2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ☐ %

b Permanent endowment ☐ %

c Temporarily restricted endowment ☐ %

The percentages on lines 2a, 2b, and 2c should equal 100%

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

	Yes	No
3a(i)		
3a(ii)		
3b		

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements		36,125.	27,349.	8,776.
d Equipment		93,606.	72,764.	20,842.
e Other		298,992.	202,711.	96,281.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				125,899.

BAA

Schedule D (Form 990) 2015

Part VII Investments – Other Securities.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total (Column (b) must equal Form 990, Part X, column (B) line 12)		

Part VIII Investments – Program Related.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total (Column (b) must equal Form 990, Part X, column (B) line 13)		

Part IX Other Assets.

N/A

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total (Column (b) must equal Form 990, Part X, column (B) line 15)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT	16,556.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total (Column (b) must equal Form 990, Part X, column (B) line 25)	16,556.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

SEE PART XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements		1	24,321,837.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
	a Net unrealized gains (losses) on investments	2a		
	b Donated services and use of facilities	2b	1,233,220.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII)	2d		
	e Add lines 2a through 2d		2e	1,233,220.
3	Subtract line 2e from line 1		3	23,088,617.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII)	4b		
	c Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	23,088,617.

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

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

1	Total expenses and losses per audited financial statements		1	23,680,823.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
	a Donated services and use of facilities	2a	1,233,220.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII)	2d		
	e Add lines 2a through 2d		2e	1,233,220.
3	Subtract line 2e from line 1		3	22,447,603.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII)	4b		
	c Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	22,447,603.

Part XIII 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; 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 X - FIN 48 FOOTNOTE

JHF'S ACCOUNTING POLICY IS TO PROVIDE LIABILITIES FOR UNCERTAIN TAX POSITIONS WHEN A LIABILITY IS PROBABLE AND ESTIMABLE. MANAGEMENT IS NOT AWARE OF ANY VIOLATION OF ITS TAX STATUS AS AN ORGANIZATION EXEMPT FROM INCOME TAXES, NOR OF ANY EXPOSURE TO UNRELATED BUSINESS INCOME TAX.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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 organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization

JOYFUL HEART FOUNDATION

Employer identification number

72-1519537

Part I

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.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations
b ☒ Internet and email solicitations
c ☒ Phone solicitations
d ☒ In-person solicitations
e ☒ Solicitation of non-government grants
f ☒ Solicitation of government grants
g ☒ Special fundraising events

2a 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 services?

☒ Yes ☐ No

b 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 individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 INNOVATIVE PHIL 5 HANOVER SQ NEW YORK NY 10004	EVENT CONSULTING		X	2,190,147.	198,354.	1,991,793.
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				2,190,147.	198,354.	1,991,793.

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

NY CA HI

Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GALA (event type)	(event type)	NONE (total number)	(add column (a) through column (c))
REVENUE	1 Gross receipts	2,190,147.			2,190,147.
	2 Less Contributions	2,055,461.			2,055,461.
	3 Gross income (line 1 minus line 2)	134,686.			134,686.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	219,714.			219,714.
	7 Food and beverages	113,400.			113,400.
	8 Entertainment				
	9 Other direct expenses	260,976.			260,976.
	10 Direct expense summary Add lines 4 through 9 in column (d)				594,090.
	11 Net income summary Subtract line 10 from line 3, column (d)				-459,404.

Part III Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
REVENUE				
1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes			
	3 Noncash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
	6 Volunteer labor	Yes _____ % No	Yes _____ % No	Yes _____ % No
	7 Direct expense summary Add lines 2 through 5 in column (d)			
	8 Net gaming income summary Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☐ No

b If 'No,' explain _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

b If 'Yes,' explain _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility

13a %

b An outside facility

13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records.

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If 'Yes,' enter name and address of the third party: _____

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer

☐ Employee

☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

PART I, LINE 2B - FUNDRAISER ADDITIONAL INFORMATION
INNOVATIVE PHILANTROPY

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information**

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

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2015**Open to Public Inspection**

Name of the organization

JOYFUL HEART FOUNDATION

Employer identification number

72-1519537

Part I Questions Regarding Compensation**1 a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.☐ First-class or charter travel☐ Housing allowance or residence for personal use☐ Travel for companions☐ Payments for business use of personal residence☐ Tax indemnification and gross-up payments☐ Health or social club dues or initiation fees☐ Discretionary spending account☐ Personal services (e.g., maid, chauffeur, chef)**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.☒ Compensation committee☐ Written employment contract☒ Independent compensation consultant☒ Compensation survey or study☒ Form 990 of other organizations☒ Approval by the board or compensation committee**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:**a** Receive a severance payment or change-of-control payment?**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?**c** Participate in, or receive payment from, an equity-based compensation arrangement?

If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:**a** The organization?**b** Any related organization?

If 'Yes' to line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:**a** The organization?**b** Any related organization?

If 'Yes' on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III.**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.**9** If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1 b

2

4 a

4 b

4 c

5 a

5 b

6 a

6 b

7

8

9

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.**Schedule J (Form 990) 2015**

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

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

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

	(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	MAILE M. ZAMBURO CEO	324,825. 0.	0. 0.	0. 0.	0. 0.	7,977. 0.	332,802. 0.	0. 0.
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
BAA								

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

**SCHEDULE M
(Form 990)**Department of the Treasury
Internal Revenue Service**Noncash Contributions**

- ▶ **Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No 1545-0047

2015**Open To Public
Inspection**

Name of the organization

JOYFUL HEART FOUNDATION

Employer identification number

72-1519537

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art – Works of art				
2 Art – Historical treasures				
3 Art – Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities – Publicly traded				
10 Securities – Closely held stock				
11 Securities – Partnership, LLC, or trust interests				
12 Securities – Miscellaneous				
13 Qualified conservation contribution – Historic structures				
14 Qualified 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 ▶ SEE PART II)				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement				
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?				
b If 'Yes,' describe the arrangement in Part II				
31 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 contributions?				
b If 'Yes,' describe in Part II.				
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II				

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

Schedule M (Form 990) (2015)

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

**SCH M, PART I, LINES 25-28
OTHER NON-CASH CONTRIBUTIONS**

DESCRIPTION	APPL?	NUMBER OF CONTR.	REVENUE ON FORM 990, PART VIII	METHOD OF DETER. REV.
MEDIA PLACEMENTS	X	1	\$ 1,221,218.	FMV
MEDIA PLACEMENTS	X	1	914,546.	FMV
MEDIA PLACEMENTS	X	1	912,484.	FMV
MEDIA PLACEMENTS	X	1	2,866,933.	FMV
MEDIA PLACEMENTS	X	1	5,146,450.	FMV
MEDIA PLACEMENTS	X	1	2,654,475.	FMV
MEDIA PLACEMENTS	X	1	667,130.	FMV
MEDIA PLACEMENT		19	3,305,845.	FMV
SUPPLIES		2	114,507.	FMV

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

JOYFUL HEART FOUNDATION

Employer identification number

72-1519537

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

AT OUR 2016 JOYFUL REVOLUTION GALA WE LAUNCHED OUR NEW VISION, MISSION, AND LOGO AFTER A PROCESS OF RE-EXAMINATION, REFLECTION, AND REDEFINITION WITH OUR BOARD OF DIRECTORS, LED-PRO-BONO-BY AN INTERNATIONALLY RECOGNIZED BRAND STRATEGIST. OUR VISION FOR THE FUTURE-A WORLD FREE OF SEXUAL ASSAULT, DOMESTIC VIOLENCE, AND CHILD ABUSE-IS BOLDER THAN EVER. OUR MISSION IS TO TRANSFORM SOCIETY'S RESPONSE TO SEXUAL ASSAULT, DOMESTIC VIOLENCE, AND CHILD ABUSE, SUPPORT SURVIVORS' HEALING, AND END THIS VIOLENCE FOREVER. IT KEEPS BOTH JOY AND SURVIVORS' HEALING AT THE CORE OF OUR WORK. WE DELIVER OUR MISSION THROUGH A PROGRAM PORTFOLIO WITH THE THREE INTEGRATED AREAS OF HEALING, EDUCATION, AND ADVOCACY. OUR NEW VISUAL IDENTITY EXPRESSES THE UNITY OF THESE THREE AREAS, AS WELL AS THE COMPREHENSIVE, COLLABORATIVE NATURE OF OUR PROGRAMS AND SERVICES.

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

EDUCATION: THROUGH OUR EDUCATION WORK, WE SEEK TO ELEVATE THE NATIONAL CONVERSATION AROUND SEXUAL ASSAULT, DOMESTIC VIOLENCE, AND CHILD ABUSE, TO TRANSFORM SOCIETY'S RESPONSE TO SURVIVORS, AND TO BUILD A COMMUNITY THAT DOESN'T BLAME SURVIVORS, BUT INSTEAD, MEETS THEM WITH COMPASSION. WE DO THIS THROUGH LARGE-SCALE, HIGH-IMPACT PUBLIC AWARENESS AND EDUCATION CAMPAIGNS, COMMUNITY EVENTS, DIGITAL AND SOCIAL MEDIA OUTREACH, MEDIA ADVOCACY, OUR REUNION BLOG, WEB CONTENT, RESEARCH, AND THROUGH INFLUENCING STORYLINES ON TELEVISION AND IN FILM.

OUR ONLINE COMMUNITY IS AT THE CORE OF WHO WE ARE AND WHAT WE HOPE TO BUILD-A COMMUNITY FILLED WITH LIGHT, SUPPORT, HOPE, AND POSSIBILITY. JOYFUL HEART'S WEBSITE SERVES AS A CRITICAL RESOURCE AND CONNECTION FOR OUR COMMUNITY AND AN IMPORTANT VEHICLE FOR THE DELIVERY OF OUR EDUCATIONAL CONTENT. IN FY16, WE COMPLETED WORK ON JOYFULHEARTFOUNDATION.ORG TO MAKE OUR SITE MOBILE-RESPONSIVE. SINCE THE COMPLETION OF OUR MOBILE-OPTIMIZATION, WE HAVE INCREASED THE NUMBER OF PEOPLE SERVED THROUGH MOBILE

Name of the organization

JOYFUL HEART FOUNDATION

Employer identification number

72-1519537

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

TRAFFIC BY 37%—NEARLY 100,000 SESSIONS—COMPARED TO THE 29% (74,812 SESSIONS) IN THE SAME PERIOD OF THE PRIOR YEAR. MOBILE TRAFFIC TO OUR WEBSITE IS ALSO INCREASING OUR PERCENTAGE OF NEW COMMUNITY MEMBERS: THE NUMBER OF NEW USERS ON MOBILE IS UP BY 40%. THROUGH THE USE OF MEDIA, WE RAISE AWARENESS, PROMOTE PUBLIC CONVERSATION, AND CHALLENGE THE VICTIM BLAMING ATTITUDES AND BELIEFS THAT PERPETUATE RAPE CULTURE IN THE UNITED STATES. DURING FY16, JOYFUL HEART—OUR WORK, PROGRAMS, INITIATIVES, OR EVENTS—WAS MENTIONED IN 1,558 NEWS STORIES (INTERNET, PRINT AND BROADCAST), WITH A TOTAL REACH OF 2.2 BILLION AND AN ADVERTISING EQUIVALENCY OF \$4.1 MILLION.

JOYFUL HEART'S NO MORE PSA CAMPAIGN CONTINUES TO DEFY GRAVITY. IN FY16, WE SURPASSED AN AUDIENCE MARK OF 4 BILLION ON TELEVISION, ONLINE, IN PRINT, AND THROUGH OUTDOOR ASSETS. SINCE THE LAUNCH OF THE CAMPAIGN IN 2013, THE PSAS HAVE AIRED ON TELEVISION NEARLY 175,000 TIMES, IN ALL 210 MEDIA MARKETS—REACHING AN AUDIENCE OF MORE THAN 2.3 BILLION—WITH A TOTAL ADVERTISING VALUE OF \$91 MILLION.

IN FY16, WE PARTNERED WITH 11N6 AND VIACOM TO RELEASE THE NO MORE MALE SURVIVOR PSA SERIES, WHICH SPEAKS TO THE MYTHS AND EXCUSES MALE SURVIVORS OF CHILDHOOD SEXUAL ABUSE HEAR, RAISES MUCH-NEEDED AWARENESS, AND PROVIDES SURVIVORS WITH LINKS TO NECESSARY RESOURCES. THE LAUNCH GARNERED SIGNIFICANT MEDIA ATTENTION AND THE PSAS HAD AN IMMEDIATE IMPACT ON BOTH JOYFUL HEART AND 11N6'S WEB TRAFFIC. THE DAY AFTER THE SPOTS BEGAN AIRING, 11N6 HAD 1,520 VISITORS TO THEIR WEBSITE, UP FROM AN AVERAGE OF 1,000 DAILY VISITORS. THE PSAS RAN ON THE TODAY SHOW'S WEBSITE, HUFFINGTON POST, MIC, AND REFINERY 29. OUR WEB TRAFFIC ROSE 160%. ON SOCIAL MEDIA, WE REACHED AN AUDIENCE OF NEARLY 4.1 MILLION, GENERATING MORE THAN 4.9 MILLION IMPRESSIONS—WITH CONTENT FROM JOYFUL HEART, OUR PARTNERS, FOLLOWERS AND INFLUENCERS. USA NETWORK AIRED THE PSAS DURING A #NOMOREEXCUSES MARATHON OF [LAW & ORDER: SVU] TO MARK NO MORE WEEK. VIACOM'S BILLBOARDS IN TIMES SQUARE SHOWCASED THE PRINT CAMPAIGN, LEADING TO A TOTAL OF 96 MILLION MEDIA IMPRESSIONS.

Name of the organization

JOYFUL HEART FOUNDATION

Employer identification number

72-1519537

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

WE ALSO EXPANDED OUR WORK TO ENGAGE ATHLETES AND SPORTS CULTURE IN THE MOVEMENT TO END VIOLENCE AGAINST WOMEN BY PARTNERING WITH THE NEW YORK GIANTS TO CREATE AN IN-STADIUM GIANTS SAY NO MORE PSA FOR A DOMESTIC VIOLENCE AWARENESS MONTH GAME IN OCTOBER 2015. FOR THE SECOND YEAR IN A ROW, WE PROVIDED CREATIVE CONSULTATION FOR THE NFL'S NO MORE PSA THAT AIRED DURING THE 2016 SUPER BOWL.

IN FY16 WE PARTNERED WITH USA NETWORK ON FOUR #NOMORE EXCUSES [LAW & ORDER: SVU] MARATHONS, BRINGING THE TOTAL NUMBER OF MARATHONS TO NINE. THESE MARATHONS RAISE AWARENESS ABOUT THESE ISSUES AND EDUCATE VIEWERS ABOUT THE STATISTICS AND RECOGNIZING THE SIGNS OF ABUSE, HOW TO HELP SURVIVORS, AND RESOURCES. THE MARATHONS SIGNIFICANTLY INCREASE OUR WEBSITE TRAFFIC, AS WELL AS THOSE OF OUR PARTNER ORGANIZATIONS, AND START IMPORTANT CONVERSATIONS ON SOCIAL MEDIA ABOUT OUR ISSUES.

BUILDING UPON THE SUCCESS OF JOYFUL HEART'S NATIONAL NO MORE PSA CAMPAIGN, WE ALSO SERVE AS A LEAD PARTNER IN THE HAWAI'I SAYS NO MORE INITIATIVE, WHICH SEEKS TO CHALLENGE THE ATTITUDES AND BEHAVIORS THAT LEAD TO THIS VIOLENCE IN HAWAI'I WHILE PROMOTING LOCAL VALUES THAT REFLECT ALOHA, RESPECT, AND OUR CONNECTIONS THROUGH 'OHANA. LAST FALL, THE HAWAII SAYS NO MORE TEAM LAUNCHED THE ALLY INITIATIVE TO BUILD COMMUNITY INVOLVEMENT ACROSS THE STATE AND FOR ANYONE - ANYWHERE - TO SHOW THEIR SUPPORT. HAWAI'I SAYS NO MORE ALSO CELEBRATED ITS ONE - YEAR ANNIVERSARY DURING NO MORE WEEK IN MARCH 2016. IN CELEBRATION OF THE WEEK, THE HONOLULU MUNICIPAL BUILDING, HONOLULU HALE, AND THE LOCAL IBM BUILDING WERE LIT BLUE. IN FY16, WE COMPLETED FILMING FOR THE LOCAL HAWAI'I SAYS NO MORE PSA CAMPAIGN, WHICH WILL LAUNCH IN NOVEMBER 2016.

OUR TALK STORY AND TALK EDUCATION SERIES CONTINUED TO EXPAND IN FY16 WITH SESSIONS HELD ACROSS THE COUNTRY INCLUDING IN HAWAI'I, NEW YORK, SAN FRANCISCO, AND LOS ANGELES, BRINGING TOGETHER MEMBERS OF OUR COMMUNITIES FOR DIALOGUE AND DISCUSSION ABOUT THESE ISSUES. THESE GATHERINGS SERVE AS OPEN AND HONEST PLATFORMS TO BRING

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FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

SEXUAL ASSAULT, DOMESTIC VIOLENCE, AND CHILD ABUSE INTO THE LIGHT, NORMALIZE THE CONVERSATION, AND EXPLORE THE ROLE EACH ONE OF US HAS IN ENDING THIS VIOLENCE. TALK STORY AND TALK COVERED DIVERSE TOPICS INCLUDING CULTURAL TRAUMA AND GENDER VIOLENCE (A TWO-PART SERIES IN HAWAI'I); MEN, SPORTS CULTURE, AND GENDER VIOLENCE; THE BACKLOG OF UNTESTED RAPE KITS IN THE U.S. AND JOYFUL HEART'S ADVOCACY TO END THE BACKLOG; THE INITIAL FINDINGS IN OUR HOLISTIC HEALING ARTS RETREAT RESEARCH PROJECT; AND THE EXPERIENCE OF MEN, BOTH AS SURVIVORS OF VIOLENCE AND AS AGENTS OF CHANGE, IN THE MOVEMENT TO ADDRESS, PREVENT AND END VIOLENCE AND ABUSE.

WE SERVED AS A LEAD CONFERENCE PARTNER AND HOSTED A PLENARY SESSION AT A CALL TO MEN'S NATIONAL CONFERENCE: ADVANCING SPORTS CULTURE TO PREVENT DOMESTIC VIOLENCE AND SEXUAL ASSAULT. THE SESSION, A ROUNDTABLE DISCUSSION ABOUT USING PUBLIC SERVICE CAMPAIGNS TO PREVENT VIOLENCE AGAINST WOMEN AND GIRLS, FOCUSED ON THE COLLABORATION BETWEEN JOYFUL HEART, NO MORE, VIACOM, AND NFL PLAYERS TO CREATE OUR NFL PLAYERS SAY NO MORE PSA CAMPAIGN.

FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS**HEALING:**

OUR HEALING PROGRAMS PROVIDE SURVIVORS AND THOSE WHO CARE FOR THEM WITH IMPROVED ACCESS TO HEALING TECHNIQUES AND WELLNESS PRACTICES THAT ARE HOLISTIC - ADDRESSING THE PHYSICAL, EMOTIONAL, AND SPIRITUAL EFFECTS OF TRAUMA. THROUGH OUR PROGRAMS, WE SEEK TO INCREASE SOCIETY'S UNDERSTANDING OF THE EFFECTS OF TRAUMA AND EXPAND THE USE OF INTEGRATED, TRAUMA-INFORMED WELLNESS PRACTICES TO IMPROVE THE RESPONSE TO, AND CARE, FOR SURVIVORS.

SURVIVORS ARE REFERRED TO JOYFUL HEART ONLINE AND THROUGH SOCIAL MEDIA AND PARTNER ORGANIZATIONS. EVERY SURVIVOR WHO REACHES OUT TO US RECEIVES EITHER AN EMAIL OR PHONE RESPONSE AND IS CONNECTED TO OTHER ORGANIZATIONS FOR DIRECT SERVICES. THIS FISCAL YEAR, WE SUCCESSFULLY BRIDGED NEARLY TO 1,600 PEOPLE TO RESOURCES,

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REPRESENTING A 15% INCREASE OVER FY15.

SINCE 2013, WE HAVE WORKED CLOSELY WITH RENOWNED PROFESSOR OF PSYCHIATRY AND TRAUMA RECOVERY RESEARCHER DR. MARY ANN DUTTON OF GEORGETOWN UNIVERSITY TO EVALUATE OUR SURVIVOR RETREAT PROGRAM, WHICH INCORPORATES A SURVIVOR-CENTRIC, HOLISTIC APPROACH THAT CAN BE OFFERED ALONGSIDE EXISTING METHODS OF TREATMENT, SUCH AS COUNSELING AND THERAPY. THE GOAL OF THIS EVALUATION IS TO ASSESS THE EFFECTIVENESS OF THE RETREAT AND TO CREATE A REPLICABLE MODEL, WHICH CAN BE ADOPTED BY PARTNER ORGANIZATIONS AND OFFERED TO SURVIVORS, PROFESSIONALS WHO SERVE THEM, AND COMMUNITIES BEYOND OUR CURRENT CAPACITY AND SCOPE.

IN FY16, WE SUCCESSFULLY LED THE SECOND AND THIRD RETREATS AS PART OF THE RESEARCH EVALUATION, WITH THE THIRD (AND FINAL) CLINICAL TRIAL SCHEDULED FOR SEPTEMBER 2016. THE PRELIMINARY FINDINGS SUGGEST THAT OUR FOUR - DAY RETREAT MODEL IS EFFECTIVE AND BENEFICIAL TO PARTICIPANTS OVER A SUSTAINED PERIOD OF TIME.

THIS FISCAL YEAR, WE REACHED MORE THAN 2,000 SURVIVORS AND HEALING PROFESSIONALS THROUGH OUR RETREAT PROGRAMS AND WORKSHOPS. IN HAWAI'I, THROUGH A PROJECT FUNDED IN PART BY THE ATHERTON FAMILY FOUNDATION, 258 PEOPLE FROM LOCAL ORGANIZATIONS PARTICIPATED IN HEAL THE HEALERS WORKSHOPS. THIS PROJECT IS A TWO - YEAR EFFORT TO ASSIST LOCAL ORGANIZATIONS IN DEVELOPING AND IMPLEMENTING PRACTICES, POLICIES, AND PROCEDURES THAT ADDRESS VICARIOUS TRAUMA TO FACILITATE AND SUSTAIN AN ENVIRONMENT OF STAFF HEALTH AND WELL - BEING.

TO EVALUATE THE BENEFITS OF THE NAMELEHUAPONO WAHINE GROUP MODEL FOR HAWAIIAN SURVIVORS OF SEXUAL ASSAULT AND DOMESTIC VIOLENCE, WE INVITED ALL PARTICIPANTS OVER THE PAST SIX YEARS TO A FOCUS GROUP TO PROVIDE FEEDBACK ABOUT THEIR EXPERIENCES AND SHARE SUGGESTIONS FOR FUTURE DEVELOPMENT OF THE NAMELEHUAPONO MODEL. AN EVALUATOR FROM THE UNIVERSITY OF HAWAI'I LED THE SESSION AND WILL SUBMIT A REPORT OF THE RESULTS IN FY17.

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FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS

ADVOCACY: SINCE 2010, JOYFUL HEART HAS MADE THE ELIMINATION OF THE UNTESTED RAPE KIT BACKLOG OUR TOP PRIORITY. WE ADVOCATE FOR RAPE KIT REFORMS AT THE LOCAL, STATE, AND FEDERAL LEVELS AND WORK TO RAISE AWARENESS ABOUT THIS PRESSING ISSUE. WHILE WE CONTINUE TO KEEP THE BACKLOG WORK AS OUR PRIMARY FOCUS, IN THE LAST FISCAL YEAR, WE ALSO EXPANDED OUR POLICY REACH AND ENGAGED IN ADDITIONAL ISSUES THAT ARE RELATED TO OUR BROADER MISSION INCLUDING SURVIVOR-RIGHTS POLICIES AND CHILD SEXUAL ABUSE. AS THE MOVEMENT TO END THE UNTESTED RAPE KIT BACKLOG CONTINUED TO GAIN MOMENTUM IN FY16, WE WORKED TO KEEP THE NEEDS OF SURVIVORS AT THE FOREFRONT OF ALL LEGISLATION AND POLICIES.

WE RELEASED NAVIGATING NOTIFICATION: A GUIDE TO RE-ENGAGING SEXUAL ASSAULT SURVIVORS AFFECTED BY THE UNTESTED RAPE KIT BACKLOG, THE RESULT OF A TWO - YEAR RESEARCH STUDY CONDUCTED IN PARTNERSHIP WITH DR. COURTNEY AHRENS OF CALIFORNIA STATE UNIVERSITY AT LONG BEACH, TO HELP JURISDICTIONS CREATE SURVIVOR-CENTERED, TRAUMA - INFORMED POLICIES AND PROTOCOLS FOR NOTIFYING SURVIVORS ABOUT THEIR UNTESTED KITS. THROUGH A SOCIAL MEDIA OUTREACH CAMPAIGN, PRESS RELEASE, AND E-MAIL SERIES, MORE THAN 2,000 UNIQUE VISITORS VISITED OUR VICTIM NOTIFICATION PAGE. IN ADDITION, BY POSTING A COMBINED 58 TWEETS ON BOTH THE JOYFUL HEART AND END THE BACKLOG ACCOUNTS, WE WERE ABLE TO GARNER A TOTAL OF 105,511 IMPRESSIONS ON TWITTER. ARTICLES ABOUT OUR WORK APPEARED ON CLEVELAND.COM.

WE ALSO CONDUCTED THREE WEBINAR PRESENTATIONS ABOUT OUR VICTIM NOTIFICATION RESEARCH, WHICH PROVIDED A DETAILED DESCRIPTION OF THE METHODOLOGY AND FINDINGS FROM OUR REPORT, AND CONVEYED HOW BEST TO TRANSLATE THIS IMPORTANT RESEARCH INTO PRACTICE. OVER 200 PEOPLE FROM LAW ENFORCEMENT, SYSTEMS AND COMMUNITY-BASED ADVOCATES, PROSECUTORS, LAB PERSONNEL, RESEARCHERS, AND SURVIVORS PARTICIPATED IN THE PRESENTATIONS. THE WEBINAR CAN BE WATCHED ONLINE AT ENDTHEBACKLOG.ORG/VN. AT THE REQUEST OF THE OREGON ATTORNEY GENERAL'S OFFICE SEXUAL

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ASSAULT TASK FORCE AND OREGON COALITION AGAINST SEXUAL AND DOMESTIC VIOLENCE, WE HOSTED A WEBINAR FOR 90 ADVOCATES, LAW ENFORCEMENT, GOVERNMENT EMPLOYEES, AND SEXUAL ASSAULT NURSE EXAMINERS TO CONVEY THE IMPORTANCE OF VICTIM NOTIFICATION AND DISCUSS THE BEST WAYS TO TRANSLATE THIS RESEARCH INTO PRACTICE.

THE JOYFUL HEART POLICY TEAM HOSTED A BRIEFING ON CAPITOL HILL ABOUT VICTIM NOTIFICATION IN CASES AFFECTED BY THE UNTESTED RAPE KIT BACKLOG. MORE THAN 50 CONGRESSIONAL STAFFERS GATHERED TO LEARN WHAT TRENDS ARE BEING SEEN ACROSS THE COUNTRY, HOW REFORM IS TAKING SHAPE IN SPECIFIC CITIES, AND WHY FEDERAL INVESTMENTS, SUCH AS THE NEW DEPARTMENT OF JUSTICE BUREAU OF JUSTICE ASSISTANCE'S (BJA) SEXUAL ASSAULT KIT INITIATIVE, ARE ALREADY MAKING A DIFFERENCE.

WE SERVED AS PART OF A TEAM SELECTED TO PROVIDE TRAINING AND TECHNICAL ASSISTANCE (TTA) TO THE BJA AND DISTRICT ATTORNEY OF NEW YORK GRANTEEES ON THEIR BACKLOG REDUCTION PROJECTS. PROJECT PARTNERS ARE WORKING TO ENSURE DISSEMINATION OF PROMISING PRACTICES, SUCH AS TESTING ALL KITS. JOYFUL HEART'S ROLE IS TO ENSURE THE REFORM EFFORTS ARE SURVIVOR-CENTERED AND TRAUMA - INFORMED, AND TO SHARE OUR LEARNINGS FROM WORKING WITH LOCAL JURISDICTIONS TO IMPLEMENT REFORM. WE HAVE PARTICIPATED IN A NUMBER OF GRANTEE SITE VISITS INCLUDING ONES IN IOWA, DELAWARE, DULUTH, AND CLEVELAND TO WORK WITH LOCAL STAKEHOLDERS TO DISCUSS PROCESSES AND BEST PRACTICES AND ADVISE THEM AS REQUESTED. ADDITIONALLY, WE ADVISED THE KANSAS BUREAU OF INVESTIGATION (THE STATE LABORATORY) ON A DRAFT POLICY THAT WILL SERVE AS A MODEL FOR COMMUNITIES ACROSS THE STATE.

WE PARTICIPATED IN A WHITE HOUSE ROUNDTABLE ON DOMESTIC AND SEXUAL VIOLENCE AND THE CRIMINAL JUSTICE SYSTEM. THE SUMMIT FOCUSED ON IMPROVING FEDERAL, STATE, AND LOCAL GOVERNMENTAL EFFORTS TO ENHANCE THE LAW ENFORCEMENT RESPONSE TO DOMESTIC AND SEXUAL VIOLENCE. WE ALSO PARTICIPATED IN A SUMMIT HOSTED BY THE WHITE HOUSE ADVISOR ON VIOLENCE AGAINST WOMEN, COUNCIL ON WOMEN AND GIRLS, OFFICE OF SCIENCE AND TECHNOLOGY

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POLICY, AND DOMESTIC POLICY COUNCIL WITH MORE THAN 75 DOMESTIC VIOLENCE AND SEXUAL ASSAULT ADVOCATES, LAW ENFORCEMENT OFFICERS, LOCAL GOVERNMENT OFFICIALS, AND TECHNOLOGY AND PRIVACY EXPERTS.

OUR FOUNDER AND PRESIDENT, MARISKA HARGITAY, DELIVERED AN ADDRESS ABOUT THE RAPE KIT BACKLOG TO AN AUDIENCE OF AN ESTIMATED 5,000 ADVOCATES FROM AROUND THE COUNTRY AT THE WHITE HOUSE'S UNITED STATE OF WOMEN CONFERENCE.

OUR ADVOCACY TEAM WORKED TO ASSIST JURISDICTIONS ACROSS THE COUNTRY IN TRACKING AND ANALYZING LEGISLATION AND SUPPORTING BILLS THAT WILL HELP ELIMINATE THE BACKLOG OF UNTESTED KITS. WE PUBLISHED THE "DRAFTER'S CHECKLIST FOR RAPE KIT REFORM" ON OUR END THE BACKLOG WEBSITE, WHICH SERVES AS A GUIDE FOR STATE LEGISLATORS WORKING ON RAPE KIT REFORM BILLS. RAPE KIT REFORM LAWS WERE ENACTED IN 13 STATES DURING THE 2016 LEGISLATIVE SESSIONS INCLUDING FLORIDA, GEORGIA, HAWAI'I, IDAHO, KENTUCKY, NEW MEXICO, OREGON, SOUTH DAKOTA, VIRGINIA, AND WASHINGTON. WE PROVIDED ADVICE AND EXPERTISE TO THE SPONSORS AND LOCAL ADVOCATES IN FLORIDA, GEORGIA, HAWAI'I, AND OREGON AND ADVISED 15 STATES OVERALL.

IN HAWAI'I, WE WORKED CLOSELY WITH THE LEGISLATIVE STAFFERS TO ENSURE THE LAW WOULD ADDRESS THE MAJOR ISSUES AROUND RAPE KIT PROCESSING; TESTIFIED NINE TIMES; TWEETED AND REACHED MORE THAN 175,000 USERS ON SOCIAL MEDIA; COLLABORATED WITH LOCAL ADVOCATES AND SURVIVORS; ENGAGED THE MEDIA; AND SUPPORTED THE EFFORTS OF THE WOMEN'S CAUCUS. THE PASSAGE OF THIS LEGISLATION WAS A MAJOR VICTORY FOR SURVIVORS IN HAWAI'I.

WE ARE WORKING WITH THE TEXAS POLICE FOUNDATION AND THE NATIONAL CENTER FOR VICTIMS OF CRIME ON A RESEARCH PROJECT FUNDED BY THE THE TEXAS/DALLAS COMMUNITY FOUNDATION THAT IS EXAMINING THE MANDATORY RAPE KIT TESTING LAW IN FOUR JURISDICTIONS: FORT WORTH, AUSTIN, DALLAS, AND ARLINGTON. THE PROJECT'S OBJECTIVE IS TO DETERMINE WHETHER THE NEW LAWS ARE INCREASING THE RATES OF REPORTING OF SEXUAL ASSAULT CASES, AND

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WHETHER THE RATES OF ARRESTS, PROSECUTIONS, AND CONVICTIONS HAVE INCREASED.

THROUGH THE ACCOUNTABILITY PROJECT, WHICH SEEKS TO UNCOVER THE TRUE EXTENT OF THE BACKLOG IN CITIES AND STATES ACROSS THE COUNTRY, OUR PRO-BONO LAWYERS AT GOODWIN PROCTER LLP SENT OUT PUBLIC RECORD REQUESTS TO 25 NEW JURISDICTIONS ACROSS THE UNITED STATES THIS FISCAL YEAR. WE HAVE RECEIVED INITIAL RESPONSES FROM 21 CITIES, 11 OF WHICH HAVE GIVEN US CONCRETE NUMBERS AMOUNTING TO 4,675 UNTESTED KITS BEING NEWLY IDENTIFIED. SINCE THE LAUNCH OF THE ACCOUNTABILITY PROJECT, WE HAVE DISCOVERED MORE THAN 36,675 UNTESTED RAPE KITS ACROSS THE COUNTRY.

IN JULY 2015, USA TODAY RELEASED THE RESULTS OF ITS INVESTIGATION INTO THE RAPE KIT BACKLOG, REVEALING OVER 70,000 UNTESTED RAPE KITS ACROSS OVER 1,000 LAW ENFORCEMENT AGENCIES FOR WHICH WE PROVIDED EXTENSIVE BACKGROUND. IN THE WEEKS FOLLOWING USA TODAY'S RELEASE, JOYFUL HEART'S ADVOCACY TEAM COMMUNICATED WITH CONTACTS AT THOSE LAW ENFORCEMENT AGENCIES TO VERIFY THEIR NUMBERS OF UNTESTED RAPE KITS, AND IN ONE CASE, REVEALED AN EVEN LARGER BACKLOG THAN INITIALLY REPORTED TO USA TODAY.

ALBUQUERQUE, NEW MEXICO INITIALLY REPORTED ONLY 3 UNTESTED RAPE KITS IN THE USA TODAY INQUIRY, BUT OUR EFFORTS UNCOVERED 835 UNTESTED KITS.

TO DATE, THROUGH THE ACCOUNTABILITY PROJECT, THE EFFORTS OF THE MEDIA LIKE USA TODAY, AND STATEWIDE AUDITS, AS OF THIS FISCAL YEAR, NEARLY 175,000 UNSUBMITTED RAPE KITS WERE ACCOUNTED FOR NATIONWIDE.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

OTHER

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

MARISKA HARGITAY (PRESIDENT AND FOUNDER) IS MARRIED TO PETER HERMANN (DIRECTOR)

MARISKA HARGITAY AND MAILE M.ZAMBUTO (CEO) ARE EQUAL PARTNERS IN AN LLC (AS OF JUNE

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FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

2013)

FORM 990, PART VI, LINE 8 - EXPLANATION OF NO CONTEMPORANEOUSLY DOCUMENTATION OF MEETINGS

EMAIL DOCUMENTATION OF ACTIONS TAKEN UNANIMOUSLY ELECTRONICALLY, MEETING MINUTES FOR ALL TELEPHONIC OR IN PERSON MEETINGS.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE 990 WAS SENT VIA EMAIL TO ALL MEMBERS OF THE BOARD OF DIRECTORS ALONG WITH AUDITED FINANCIAL STATEMENTS; BOARD WAS ENCOURAGED TO REVIEW DOCUMENTS IN FULL AND PROVIDE COMMENTS, IF ANY, DIRECTLY TO THE CHIEF FINANCIAL AND ADMINISTRATIVE OFFICER, CHIEF EXECUTIVE OFFICER & CHAIR OF THE FINANCE & AUDIT COMMITTEE.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE ORGANIZATION REVIEWS THE POLICY ANNUALLY WITH ALL DIRECTORS AT THE ANNUAL BOARD MEETING, ADDITIONALLY THE POLICY IS REVIEWED WITH ALL NEW INCOMING BOARD MEMBERS AT THEIR INITIAL ORIENTATION. BUILT INTO OUR CONTRACTING PROCESS FOR ANY GOODS OR SERVICES IS A REVIEW FORM THAT REQUIRES DISCLOSURE OF ANY PRIOR OR CURRENT RELATIONSHIPS TO VENDORS, HOW THEY WERE REFERRED AND COMPETING BIDS. IF THE ORGANIZATION IS PROCEEDING WITH A CONTRACT THAT CONTAINS A CONFLICT, THIS CONFLICT MUST BE REVIEWED BY THE FINANCE AND AUDIT COMMITTEE AND APPROVED OR DENIED BY THAT COMMITTEE.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

FOR THE CHIEF EXECUTIVE OFFICER THE SALARY AND BONUS WERE DETERMINED BY THE MEMBERS OF THE COMPENSATION COMMITTEE AND APPROVED BY THE BOARD CHAIR, BASED ON THE CULMINATION OF A RANGE OF CONFERENCE CALLS AND MEETINGS (NO FEWER THAN 3) AND GROUP EMAIL SHARING OF MATERIALS AND INFORMATION -- FOR ALL OF WHICH COMPARABILITY DATA WAS SHARED AND DISCUSSED.

THE COMMITTEE LOOKED AT POSITION, TITLE, ROLE AND SPECIFICALLY EXECUTIVE PERFORMANCE

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FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES ((

ALONG WITH SUPPLEMENTAL PROGRAMS, INTRA-INDUSTRY POSITIONING, NEW AND EXPANDED ORGANIZATION GROWTH AND POSITIONING WITHIN THE FIELD, BOARD GROWTH AND DEVELOPMENT, INFRASTRUCTURE AND TECHNOLOGY DEVELOPMENT, FISCAL DIVERSITY AND PARTNERSHIP GROWTH AS WELL AS A FULL RANGE OF EXECUTIVE FUNCTIONS AND PERFORMANCE FACTORS SET BY THE COMMITTEE IN 2010 AND UPDATED IN 2015. THE COMMITTEE ALSO APPROVED AND AWARDED ADDITIONAL COMPENSATION IN THE FORM OF A 457F PLAN FOR THE CEO. A PERCENTAGE OF THE FIRST YEAR AWARD WAS PAID OUT IN JANUARY 2016 ACCORDING TO THE PLAN AND CONTRACT EFFECTED THAT SAME TIME.

ALL CURRENT EXECUTIVE POSITIONS AND NEW POSITIONS HAVE BEEN BENCHED AND REVIEWED BY OUTSIDE CONSULTANCY AND VETTED AS WELL AS APPROVED BY OUR COMPENSATION COMMITTEE. PAY FOR PERFORMANCE INCREASES FOR STAFF IS DETERMINED TO BE STANDARD, IN CONSULTATION WITH OUR INDEPENDENT CONSULTANT. PAY FOR PERFORMANCE STANDARDS AND RATINGS WERE APPROVED BY THE BOARD CHAIR AND COMPENSATION COMMITTEES.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

ALL ARE AVAILABLE VIA EMAIL, FAX OR MAIL IMMEDIATELY UPON REQUEST, FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON OUR WEBSITE AND FROM WATCHDOG AGENCY WEBSITES.