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DLN: 93493017015597

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

			lendar year, or tax year, or ta		09-01-2015 , and ending 08-31	2016		-	D FI-		J 4 : 6	tion number
	ck if app dress ch		Stand for Children Inc						-	-		.ioii iiuiiibei
•	ime char	-							52-2	1466	573	
	tial retur		Doing business as									
FII			Number and street (e	r D O hov if ma	ıl ıs not delivered to street address) Roo	m/cuito			E Teleph	one n	umber	
`	terminat ended re		2121 SW BROADWAY		ii is not delivered to street address) Roo	iiii/ Suite			(503)	235	5-2305	
<u>'</u>	ended re olication		City or town, state or	province, count	ry, and ZIP or foreign postal code			-	()			
1 741	J. 100 C. 1011	penang	Portland, OR 97201						G Gross	receip	ots \$ 10,37	4,929
			F Name and addre	ss of principa	al officer		H(a)	Is this	a drour	reti	ırn for	
			JONAH EDELMAN					subordi			3111 101	☐ Yes 🗸
			2121 SW BROADW Portland, OR 9720					No				. , , , , ,
[Ta:	c-exemp	t status	501(c)(3) 3		insert no) 4947(a)(1) or 52			Are all: include		ınate	es	∏Yes ∏ No
		.		301(c) (+) - (1113e11110 / 4347(a)(1) 01 32	.,				n a lis	st (seeı	nstructions)
, W	edsite:	▶ ₩₩	/W STAND ORG				H(c)	Group	exempl	tion	number 🖡	<u> </u>
K Forr	n of orga	anızatıon	✓ Corporation Tru	ust Associati	on Other ►		L Yea	r of form	ation 19	999	M State of	of legal domicile De
-		<u> </u>										
Pa	rt I		mary	on's mission	or most significant activities							
	ТО	ENSU	RE THAT ALL CHIL	DREN REGAR	RDLESS OF THEIR BACKGROUN	D, GRA	DUA.	TE FRO	M HIG	H SC	CHOOL	PREPARED
au	<u>FO</u>	R, AND	WITH ACCESS TO	, COLLEGE C	OR CAREER TRAINING							
<u>်</u>												
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o ve	2 Cł	heck th	ııs box ▶ ┌ ıf the org	janızatıon dıs	continued its operations or dispo	sed of n	nore t	han 25	% of its	s net	assets	
5											1	
y A			_	_	g body (Part VI, line 1a)					3	-	7
Š			-	_	the governing body (Part VI, line	•			•	4		7
Activities & Governance					alendar year 2015 (Part V, line 2a				•	5		140
۹.			•		cessary)		•		•	6 7a		1,898
					t VIII, column (C), line 12 n Form 990-T, line 34				•	7a 7b		0
	D NC	- um cic	acca basiness taxabi	e meome non			•	Prior \	/ear	/ / /		ırrent Year
	8	Contri	butions and grants (Part VIII lin	e 1h)				3,040,	046		10,366,602
ġ.	9		,	•	e 2g)	F			3,010,	0		10,500,602
Ravenua	10	_	,	•	(A), lines 3, 4, and 7d)	F				5		1,113
å	11		•	•	`					0		7,214
	12		,	• • •	must equal Part VIII, column (A)	F			3,040,	051		10,374,929
		12)							3,040,	031		
	13				X, column (A), lines 1-3)				282,			2,200,177
	14		•	•	(, column (A), line 4)	F				0		
82	15	Saları		ion, employee	e benefits (Part IX, column (A), lir	nes			866,	538		1,977,129
Expenses	16a			es (Part IX,	column (A), line 11e)	[4,	334	52,400	
άx	ь	Total fu	ındraısıng expenses (Part	IX. column (D).	line 25) ▶113,605							
ш	17		- ' '		nes 11a-11d, 11f-24e)	t			1,228,	515		3,790,903
	18	Total	expenses Add lines	13-17 (mus	t equal Part IX, column (A), line 2	25)			2,382,	082		8,020,609
	19	Reven	ue less expenses S	ubtract line 1	8 from line 12				657,	969		2,354,320
કુ જ							Begini	ning of C	Current	Year	[nd of Year
Net Assets or Fund Balances	20	Tatal	accata (Dart V. June 1	<i>(</i>)		-			E 042	712		9 6 4 0 1 2 3
ASS d B	20 21		assets (Part X, line 1 liabilities (Part X, line	•		•			5,943, 221,			8,640,133 563,868
Z Z	22		•	•	ne 21 from line 20				5,721,			8,076,265
	t III		ature Block	.5 Subtract ii		•			J,/ Z I ,	7 13		0,0,0,200
Jnde	r penalt	ties of	perjury, I declare tha		mined this return, including accon							
			belief, it is true, corre nowledge	ect, and comp	olete Declaration of preparer (oth	er than	office	er) is ba	sed on	all II	nformatio	on of which
лери	TCT HG5	, any Ki										
		****							-01-14			
Sign		y Signa	ature of officer					Date				
Here	•		AH EDELMAN CHIEF EXEC	UTIVE OFFICER								
		<u>/ </u>	Print/Type preparer's nam	e	Preparer's signature	Date		T	_	PTI	N	
Paid	1		Sang Ahn	-	Sang Ahn	Date		Check self-en	lf nployed		540880	
	ı parer	, F	Firm's name MCDONA	ALD JACOBS PC				_	EIN ► 9	3-090	00579	
	Only	1 -	Firm's address > 520 SW	YAMHILL STE 50	0			Phone	no (503	3) 227	7-0581	
o se	OIIIS	y	PORTLAND, OR 97204									

May the IRS discuss this return with the preparer shown above? (see instructions)

. ✓Yes No

7.300.714

Total program service expenses ▶

	990 (2015)			Page 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 9	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III **	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔰	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	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	11 c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 3	11 d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12 a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14 a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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28a

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35b

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37

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Yes

Yes

Yes

Yes

Form 990 (2015)

	,
Part IV	Checklist of Required Schedules (continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

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

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

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

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

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

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

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

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

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

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

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI. lines 11b and 19?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

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

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

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		N/			
		Check if Schedule O contains a response of flote to any line in this	rait	<u>v</u>		Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	34		. 03	
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
		L ie organization comply with backup withholding rules for reportable payments to	vend	fors and reportable			
·		g (gambling) winnings to prize winners?		· · · · · ·	1c		
2a	Enter	the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered	22	140			
.	,	s return	2a		2b	Yes	
D		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file				103	
3a	Did th	e organization have unrelated business gross income of \$1,000 or more during	the y	year?	3a		No
ь	If "Ye	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanatic</i>	on in S	Schedule O	3b		
4a	Atany	y time during the calendar year, did the organization have an interest in, or a sig	gnatu	re or other authority			
		a financial account in a foreign country (such as a bank account, securities acc	count,	or other financial	4a		N.o.
		int)?					No
b		s," enter the name of the foreign country ▶	, and l	Financial Assounts			
	(FBAF		c and i	rinanciai Accounts			
5a	•	' he organization a party to a prohibited tax shelter transaction at any time durin	a the	tax vear?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited t		ŀ	5b		No
		s," to line 5a or 5b, did the organization file Form 8886-T?			20		
٠	11 16	s, to line 3a of 3b, and the organization mer of m 8000-17			5c		
6a		the organization have annual gross receipts that are normally greater than \$10			6 a	Yes	
	_	ization solicit any contributions that were not tax deductible as charitable cont		ŀ			
D		s," did the organization include with every solicitation an express statement th not tax deductible?	at su		6 b	Yes	
7	Organ	izations that may receive deductible contributions under section 170(c).					
а		e organization receive a payment in excess of \$75 made partly as a contribution		d partly for goods and	7a		
		es provided to the payor?					
		s," did the organization notify the donor of the value of the goods or services pi			7b		
C		le organization sell, exchange, or otherwise dispose of tangible personal proper orm 8282?		· · · · ·	7 c		
d	If"Ye	s," indicate the number of Forms 8282 filed during the year \ldots $oxedsymbol{igle}$	7d				
e	Did th	ie organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al henefit contract?			
_	514 (11	o organization receive any rando, aneces, or maneces, receipa, promising on a p	0.00	ar somene contract	7e		
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a perso	nal b	enefit contract?	7 f		
g	If the requir	organization received a contribution of qualified intellectual property, did the of	rganız	zation file Form 8899 as	7 g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	• • • did 1	the organization file a	, 9		
		1098-C?	•		7 h		
8	•	oring organizations maintaining donor advised funds.	cinaci	s holdings at any time			
		donor advised fund maintained by the sponsoring organization have excess bus i the year?	· ·	s nordings at any time	8		
Q2	Did th	e sponsoring organization make any taxable distributions under section 49667	,		9a		
		ie sponsoring organization make a distribution to a donor, donor advisor, or rela		ercon?	9b		
10		on 501(c)(7) organizations. Enter	а р				
		tion fees and capital contributions included on Part VIII, line 12	10a				
		receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
	facılıt						
		on 501(c)(12) organizations. Enter	1				
		Income from members or shareholders	11a				
b		Income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them)	11b				
122	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıc	u of Form 10/12	12a		
		s," enter the amount of tax-exempt interest received or accrued during the		a 511 01111 10 41'	a		
-	year	and an action of the state of t	12b				
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the	organization licensed to issue qualified health plans in more than one state? N o	ote. S	see the instructions for			
		onal information the organization must report on Schedule O			13a		
b		the amount of reserves the organization is required to maintain by the states	13b				
_		ch the organization is licensed to issue qualified health plans					
		the amount of reserves on hand	13c	<u> </u>	14a		No.
		ie organization receive any payments for indoor tanning services during the tax s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i> :	•	•	14a 14b		NO
U	11 16	5, has temed a rollin 720 to report these payments '11 No, provide di expididi	GOH III	Deficuate U	*40		

orm	990 (2015)					Page
Par	For each "Yes" response to lines 2 through 7b below, and for a "No describe the circumstances, processes, or changes in Schedule O. S.	See ii	nstructions.			,
	Check if Schedule O contains a response or note to any line in this Part VI			•		<u> </u>
36	ection A. Governing body and Management				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	7		163	140
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	7			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?		•	7 b		No
8	$\mbox{\rm Did}$ the organization contemporaneously document the meetings held or written active year by the following	ons u	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8 b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A,	who c	annot be reached at the			

0	year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
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?	10 b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12 a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12 c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	

Section C. Disclosure

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

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

CA , CT , FL , GA , IL , KY , MA , MD , MN , NH , NC , NJ , NY , OK , OR , PA , SC , TN , VA , WI

15b

16a

16b

Yes

Νo

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

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

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?

- 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
- O State the name, address, and telephone number of the person who possesses the organization's books and records
 ►MARCELLA MCGEE 2121 SW BROADWAY STE 111 PORTLAND, OR 97201 (503) 235-2305

Part VII

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not bo: h ar	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Highest compensated employee Key employee Officer		Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) ANNE MARIE BURGOYNE CHAIR	1 00	×		х				0	0	0
(2) PHILIP HANDY TREASURER	1 00	×		х				0	0	0
(3) DON WASHBURN SECRETARY	1 00	×		х				0	0	0
(4) EMMA BLOOMBERG DIRECTOR	1 00	x						0	0	0
(5) ELIZA LEIGHTON DIRECTOR	1 00	×						0	0	0
(6) DAVID NIERENBERG DIRECTOR	1 00	x						0	0	0
(7) LIZETTE NIEVES DIRECTOR	1 00	×						0	0	0
(8) JONAH EDELMAN CHIEF EXECUTIVE OFFICER	18 40			х				135,044	0	9,652
(9) PAMELA WELCH COO/CFO	3 50 0 10			x				26,907	0	1,418

art VII	Section A. Office	rs, Directors,	Trustees,	Key Employee	s, and Highest	Compensated	l Employees	(continued)
---------	-------------------	----------------	-----------	--------------	----------------	-------------	-------------	-------------

(A) Name and Title	(B) A verage hours per week (list any hours for related	and a	tion (han d on is l	one b both ector	an o	unless officer stee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated emptoviee	Former	2,200,0		related organizations
1b Sub-Total						▶				
c Total from continuation sheet	s to Part VII, S	ection A	١.			. ▶[
d Total (add lines 1b and 1c) .						▶		161,951	0	11,070

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 \triangleright 1

			Yes	No				
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	3		No				
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule 1 for such							
	ındıvıdual	4		No				
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	п		No				

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
MOORE INFORMATION	POLLING AND VOTER SURVEYS	235,200
2130 SW JEFFERSON ST STE 200 PORTLAND, OR 97201		

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 ▶ 1

Form 99								Page 9
Part V	/++	Statement o	f Revenue					
		Check If Schedu	ule O contains a respor	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
v 8	1a	Federated camp	paigns 1a					
ant	ь	Membership du	es 1b	49,177				
tributions, Gifts, Grants Other Similar Amounts	c	Fundraising eve	ents 1c					
ifts. ar∆	d	Related organiz	ations 1d					
	e	Government grants	s (contributions) 1e					
ons r Si	f	All other contribution	ons, gifts, grants, and 1f	10,317,425				
buti the		similar amounts no	ot included above					
Contributions, Gifts, Grants and Other Similar Amounts	g	1a-1f \$	ons included in lines	10,120				
Cont	h	Total. Add lines	s 1a-1f	· · · ·	10,366,602			
Program Service Revenue	2a b			Business Code				
Ť	d							
፠	e							
gran	f	All other progra	ım service revenue					
Æ	g	Total. Add lines	s 2a-2f	•				
	3	Investment inc	ome (including dividen	ds, interest,	955			955
	4		ar amounts) tment of tax-exempt bond		555			753
	5	Royalties		▶				
			(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental incoi	me or (loss)					
			(ı) Securities	(п) O ther				
	7a	Gross amount from sales of assets other than inventory	158					
	ь	Less cost or other basis and	0					
		sales expenses	158					
	c d	Gain or (loss) Net gain or (los			158			158
Other Revenue		Gross income f events (not inc	rom fundraising luding reported on line 1c)					
er		,	а					
o ₽			penses b					
	9a		loss) from fundraising rom gaming activities e 19 a	events •				
	b c		penses b (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo						
	ь	Less cost of g	oods sold b					
	С	Net income or (loss) from sales of inv	entory ▶				
	_	Miscellaneous	Revenue	Business Code				
	11a							
	b							
	d	All other reven	ue .		7,214	7,214		
	e e	Total. Add lines		▶	·	,,,,,		
	12		See Instructions .		7,214			
				• • •	10,374,929	7,214		1,113

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations	must complete	all columns	All other or	ganizations must co	mplete column (4)

	 ▼				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,200,177	2,200,177		
2	Grants and other assistance to domestic individuals See Part IV, line 22	2,255,111	2,233,117		
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	172,277	20,194	151,833	250
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,509,583	1,302,098	163,351	44,134
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	49,625	42,354	5,872	1,399
9	Other employee benefits	112,251	90,308	18,662	3,281
LO	Payroll taxes				·
		133,393	109,981	19,710	3,702
L1	Fees for services (non-employees)				
а	Management				
b	Legal	18,911	7,525	9,958	1,428
С	Accounting	16,600		16,600	
d	Lobbying	287,608	281,308	6,300	
е	Professional fundraising services See Part IV, line 17	52,400			52,400
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)	1,988,310	1,987,941		369
L2	Advertising and promotion	822,445	820,910	75	1,460
L3	Office expenses	30,739	21,458	8,857	424
L4	Information technology	169,534	169,262		272
L5	Royalties				
L6	Occupancy	12,242	12,242		
L7	Travel	85,862	83,693	1,474	695
L8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
L9	Conferences, conventions, and meetings	61,048	57,083	3,269	696
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 24	Insurance	6,659		6,659	
	Schedule O)				
a	RESOURCE SHARING REIMB	273,318	80,922	192,396	
b	FEES AND LICENSES	11,950	7,585	1,274	3,091
C C	DUES AND SUBSCRIPTIONS DROSECCIONAL DEVELORMEN	4,429	4,429		
d	PROFESSIONAL DEVELOPMEN	1,248	1,244		4
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	8,020,609	7,300,714	606,290	113,605
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)				

Form	990 (2	2015)					Page 11
Par	t X	Balance Sheet					
		Check if Schedule O contains a response or note to any line in	this Pa	art X			· · · · <u>· · </u>
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			5,319,431	1	8,084,764
	2	Savings and temporary cash investments			449,821	2	486,896
	3	Pledges and grants receivable, net			162,500	3	15,000
	4	Accounts receivable, net				4	114
	5	Loans and other receivables from current and former officers trustees, key employees, and highest compensated employed II of Schedule L				5	
Assets	6	Loans and other receivables from other disqualified persons section 4958(f)(1)), persons described in section 4958(c)(2 contributing employers and sponsoring organizations of sect voluntary employees' beneficiary organizations (see instruct Part II of Schedule L		6			
As	7	Notes and loans receivable, net			7		
	8				8		
	9	Prepaid expenses and deferred charges			11,961	9	20,926
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a				
	ь	Less accumulated depreciation	10b			10 c	
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11 \cdot .		. [12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets		[14	
	15	Other assets See Part IV, line 11		[0	15	32,433
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			5,943,713	16	8,640,133
	17	Accounts payable and accrued expenses			125,486	17	268,284
	18	Grants payable		[18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of So	hedule	. D		21	

22

23

24

25

26

27

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31

32

33

34

295,584

563,868

5,676,890

2,399,375

8,076,265

8,640,133

Form 990 (2015)

96,282

221,768

5,629,216

5,721,945

5,943,713

92,729

Liabilities
Net Assets or Fund Balances
Net Ass

	8	Inventories for sale or use							
	9	Prepaid expenses and deferred charges							
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a						
	ь	Less accumulated depreciation	10b						
	11	Investments—publicly traded securities							
	12	Investments—other securities See Part IV, line 11							
	13	Investments—program-related See Part IV , line 11 $$. $$.							
	14	Intangible assets							
	15	Other assets See Part IV, line 11							
	16	Total assets.Add lines 1 through 15 (must equal line 34) .							
	17	Accounts payable and accrued expenses							
	18	Grants payable							
	19	Deferred revenue							
	20	Tax-exempt bond liabilities							
	21	Escrow or custodial account liability Complete Part IV of Sc	hedule D						
Liabilities	22	Loans and other payables to current and former officers, directors, trustees key employees, highest compensated employees, and disqualified							
ide		persons Complete Part II of Schedule L							
Ë	23	Secured mortgages and notes payable to unrelated third part	ies						
	24	Unsecured notes and loans payable to unrelated third parties							
	25	Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete Part X of Schedule D	lated third parties,						
	26	Total liabilities. Add lines 17 through 25							
e S		Organizations that follow SFAS 117 (ASC 958), check here ▶	√ and						
Balances	27	complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets							
ala	1								
ä	28	Temporarily restricted net assets							

29

30

31

32

33

34

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Permanently restricted net assets

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

complete lines 30 through 34.

	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	_		10	374	020

Donated services and use of facilities .

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

Investment expenses .

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

nn (A), line 12) Total expenses (must equal Part IX, column (A), line 25)

2 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4

1

5

6

7

8

9

Page **12**

10,374,929

8,020,609

2,354,320

5,721,945

8,076,265

▽

No

Νo

Nο

Form 990 (2015)

Prior period adjustments . Other changes in net assets or fund balances (explain in Schedule O) . 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

✓ Consolidated basis

Revenue less expenses Subtract line 2 from line 1

Net unrealized gains (losses) on investments

10

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

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

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

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

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

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

Both consolidated and separate basis

Cash ✓ Accrual Other

Both consolidated and separate basis

2b

2c

3a

3b

2a

Yes

Yes

Yes

Additional Data

Software ID: Software Version:

EIN: 52-2146673

Name: Stand for Children Inc

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

(Code) (Expenses \$ 2.115.680 including grants of \$ 1.098.078) (Revenue \$

STAND OPERATES PROGRAMS IN 8 ADDITIONAL STATES ARIZONA, COLORADO, ILLINOIS, INDIANA, LOUISIANA, MASSACHUSETTS, TEXAS, AND WASHINGTON

Cat No 50084S Schedule C (Form 990 or 990-EZ) 2015

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.

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

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

- 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 separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization Employer identification number Stand for Children Inc 52-2146673 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 1,804,805 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No Was a correction made? ☐ Yes ☐ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 330,128 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 1,474,677 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 1,804,805 Did the filing organization file Form 1120-POL for this year? √ Yes 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) A mount paid from (e) A mount of filing organization's political contributions funds If none, enter received and 0 promptly and directly delivered to a separate political organization If none, enter -0-See Additional Data Table 3

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-

g

ch	nedule C	(Fo	rm 990 or 990-E2) 2015			Page 2
P	art II-/	4	Complete if the organization is exempt under section 501(c)(3) and	file	ed Form 5768	(election
			under section 501(h)).			
١.	Check	•	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated expenses, and share of excess lobbying expenditures)	gro	up member's nam	e, address, EIN
3	Check	\blacktriangleright	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
1a	Total lo	obb	ring expenditures to influence public opinion (grass roots			
La	lobbyır	ıg)				
	Total lo	obb	ying expenditures to influence a legislative body (direct lobbying)			

Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) 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

Subtract line 1f from line 1c $\,$ If zero or less, enter -0-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?

	4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)							
	Lobbying Expe	nditures During	4-Year Avera	ging Period				
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c)2014	(d) 2015	(e) Total		
2a	Lobbying nontaxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
С	Total lobbying expenditures							
d	Grassroots nontaxable amount							
e	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2015				Рa	ige :
Part II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT				
or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
ctivity		No	Αn	ouni	t
During the year did the filing even mation attends to influence feveral mational etate as lead	Yes		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?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total Add lines 1c through 1i					
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	501 (c	(5), c	or sec	tior	1
		_		'es	No
1 Were substantially all (90% or more) dues received nondeductible by members?				es	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		N c
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		No
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members					
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year	2a	<u> </u>			
b Carryover from last year	2b				
c Total	2c				
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	4				
political expenditure next year?					
political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)	5				

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

Return Reference	Explanation
	MOST OF THE ORGANIZATION'S POLITICAL CAMPAIGN ACTIVITY TOOK THE FORM OF CONTRIBUTIONS MADE TO AFFILIATED POLITICAL COMMITTEES THAT DISTRIBUTED COMMUNICATIONS PROMOTING PRO-EDUCATION CANDIDATES ADDITIONAL POLITICAL CAMPAIGN COSTS INCLUDED POLLING SERVICES AND ADMINISTRATIVE SUPPORT TO

AFFILIATED POLITICAL COMMITTEES

Additional Data

Software ID: Software Version:

EIN: 52-2146673

Name: Stand for Children Inc

Form 990, Schedule C, Part 1-C, Line 5

(a) Name	(b) A ddress	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
BETTER SCHOOLS FOR A STRONGER COLORADO	2121 SW BROADWAY STE 111 PORTLAND, OR 97201	272960430	31370	
DNINE PAC INC	4425 CLEARVIEW PKWY STE C METAIRIE, LA 70006	475056727	2500	
RURAL VOICES FOR EDUCATION IEC	2318 CURTIS ST DENVER,CO 80205	812613483	66860	
STAND FOR CHILDREN AZ IEC	2121 SW BROADWAY STE 111 PORTLAND, OR 97201	460919920	134333	
STAND FOR CHILDREN IL IEC	850 W JACKSON BLVD SUITE 330 CHICAGO,IL 60607	471275683	15000	
STAND FOR CHILDREN ILLINOIS PAC	850 W JACKSON BLVD SUITE 330 CHICAGO,IL 60607	273080460	21600	
STAND FOR CHILDREN LOUISIANA IEC	2121 SW BROADWAY STE 111 PORTLAND, OR 97201	471797001	57908	
STAND FOR CHILDREN LOUISIANA PAC	2121 SW BROADWAY STE 111 PORTLAND, OR 97201	455618370	15000	
STAND FOR CHILDREN OREGON PAC	2121 SW BROADWAY STE 111 PORTLAND, OR 97201	800760053	250000	
STAND FOR CHILDREN SMALL DONOR COMMITTEE	2121 SW BROADWAY STE 111 PORTLAND, OR 97201	272961130	11554	
STAND FOR CHILDREN INC INDEPENDENT EXPENDITURE COMMITTEE	2121 SW BROADWAY STE 111 PORTLAND, OR 97201	455199489	868552	

DLN: 93493017015597

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the

Internal Revenue Service

Treasury

Supplemental Financial Statements

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

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

Open to Public Inspection

	me of the organization nd for Children Inc		Employer identifica	tion number
Sta	na for Children Inc		52-2146673	
Pa		r Advised Funds or Other Similar F ed "Yes" on Form 990, Part IV, line 6.		•
		(a) Donor advised funds	(b)Funds and othe	eraccounts
L	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
1	Aggregate value at end of year			
5	Did the organization inform all donors and donor funds are the organization's property, subject to		nor advised	┌ Yes
5	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?	benefit of the donor or donor advisor, or for a	ny other purpose	┌ Yes
Pa	rt III Conservation Easements. Comple	ete if the organization answered "Yes" o	on Form 990, Part I	V, line 7.
L	Purpose(s) of conservation easements held by the	ne organization (check all that apply)		
	Preservation of land for public use (e.g., recreducation)		an historically importar	at land area
	Protection of natural habitat	<u>-</u>	a certified historic struc	
	Preservation of open space	į Treservacion or a	a coremou motorie otrac	curc
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution in	the form of a conserva	tion
	, , ,		Held at the	End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easeme	ents	2b	
c	Number of conservation easements on a certified	i historic structure included in (a)	2c	
d	Number of conservation easements included in (historic structure listed in the National Register	c) acquired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, tra	nsferred, released, extinguished, or terminate	ed by the organization	during the
	tax year ▶			
1	Number of states where property subject to cons	ervation easement is located ▶		
5	Does the organization have a written policy regard violations, and enforcement of the conservation of		ndling of	es No
5	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforc	ing conservation ease	ments during the
7	A mount of expenses incurred in monitoring, inspi	ecting, nandling of violations, and enforcing c	conservation easement	s during the year
3	Does each conservation easement reported on Ii (B)(I) and section $170(h)(4)(B)(II)$?	ne 2(d) above satisfy the requirements of sec	ction 170(h)(4)	es No
9	In Part XIII, describe how the organization reporbalance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia	•	
ar		ctions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Other Similar	Assets.
La	If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	FAS 116 (ASC 958), not to report in its reve assets held for public exhibition, education,	or research in furthera	
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, education,		
(i) Revenue included on Form 990. Part VIII. line	1	▶ \$	

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

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

> \$ _

Par	t III	Organizations Maintaining (continued)	Collections of A	rt, His	toric	al T	reas	ures, or (Other	Similar A	ssets
3		the organization's acquisition, acception items (check all that apply)	ession, and other rec	ords, ch	neck ar	ny of	the fol	lowing that	are a s	gnıfıcant use	e of its
а		Public exhibition		d		Loar	n or ex	change pro	grams		
b	Γ.	Scholarly research		e	Г	Oth	er				
c		Preservation for future generations									
4	Provi Part)	de a description of the organization's KIII	s collections and exp	laın hov	w they	furth	er the	organızatıoı	n's exer	mpt purpose	ın
5		g the year, did the organization solic s to be sold to raise funds rather tha								ar Ves	s
Pa	rt IV		ngements.	-							'
1a		e organization an agent, trustee, cus ded on Form 990, Part X?	todian or other interr	mediary	for co	ntribi	utions	or other as:	sets no	t Ves	; No
b	If'	'Yes," explain the arrangement in Pa	art XIII and complete	e the fol	lowing	table	e	1		A mo	ount
C	Be	ginning balance						10	:		
d	Αd	ditions during the year						1d			
е	Dis	tributions during the year						1e			
f		ding balance						1f			
2 a	Did th	ne organization include an amount or	n Form 990, Part X, I	ıne 21,	for esc	row	orcust	odial accou	ınt lıabı	lity? Yes	i
b	If"Ye	es," explain the arrangement in Part	XIII Check here if t	he expl	anatior	n has	been	provided in	Part XI	II	
Pa	rt V	Endowment Funds. Complete									
		·	(a)Current year		or year			o years back		e years back	(e)Four years back
1 a	Begır	nning of year balance									
b	C ont	ributions · · · · · · ·									
c	Netı losse	nvestment earnings, gains, and es									
d	Gran	ts or scholarships				_					
е		r expenditures for facilities programs 									
f	A dmi	nistrative expenses									
g		of year balance									
2	Provi	de the estimated percentage of the o	current year end bala	nce (lır	ie 1g, d	olun	nn (a))	held as			
а	Board	l designated or quasi-endowment ▶									
b	Perm	anent endowment ▶									
c		orarily restricted endowment > ercentages on lines 2a, 2b, and 2c :	should equal 100%								
3a	A re tl	nere endowment funds not in the pos ization by	·	ızatıon	that ar	e hel	ld and	admınıstere	d for th	e	Yes No
		related organizations				٠. ٠		•		3a 3a	
b		es" on 3a(II), are the related organiza					? .			3	b
4	_	ribe in Part XIII the intended uses o		endowm	ent fur	ıds					
Pa	rt VI	Land, Buildings, and Equiporation a		orm 9	90. Pa	art IV	V. line	11a.See	Form 9	990. Part X	. line 10.
		Description of property		(a	Cost o		r basıs	(b) Cost or other I (other)		Accumulated (c)depreciation	(d)Book value
1a	Land							(/			
b	Buildin	gs									
		nold improvements		.							
		nent		.							
e	Other										
		lines 1a through 1e (Column (d) mus		X colu	mn (B)	line	10(c)	1	<u> </u>	•	

(a) Description of security or category (including name of security)		(b) Book value	(c)M Cost or e	lethod of valuation nd-of-year market valu
(1)Financial derivatives			0031010	na or year market vare
(2)Closely-held equity interests (3)Other				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII Investments—Program Related. Complete if the organization answered 'Ye	es' on Form 990	, Part IV, line 11c.s	See Form 990	Part X. line 13.
(a) Description of investment		(b) Book value	(c) M	lethod of valuation nd-of-year market valu
			0031010	nd of year market vale
Total (Column (h) must equal Form 990 Part V col (R) line 13.)	•			
Part IX Other Assets. Complete if the organization ar		Form 990, Part IV, line	e 11d See Form	
	nswered 'Yes' on	Form 990, Part IV, line	2 11d See Form	990, Part X, line 15 (b) Book value
Part IX Other Assets. Complete if the organization ar	nswered 'Yes' on	Form 990, Part IV, line	e 11d See Form	
Part IX Other Assets. Complete if the organization ar	nswered 'Yes' on	Form 990 , Part IV , line	2 11d See Form	
Part IX Other Assets. Complete if the organization ar	nswered 'Yes' on	Form 990, Part IV, line	e 11d See Form	
Part IX Other Assets. Complete if the organization ar	nswered 'Yes' on	Form 990, Part IV , line	e 11d See Form	
Part IX Other Assets. Complete if the organization ar	nswered 'Yes' on	Form 990, Part IV , line	e 11d See Form	
Part IX Other Assets. Complete if the organization ar	nswered 'Yes' on	Form 990, Part IV, line	e 11d See Form	
Part IX Other Assets. Complete if the organization ar	nswered 'Yes' on	Form 990, Part IV, line	e 11d See Form	
Part IX Other Assets. Complete if the organization ar	nswered 'Yes' on	Form 990, Part IV, line	e 11d See Form	
Part IX Other Assets. Complete if the organization and (a) Description (a) Description (b) Description (a) Description (b) Description (c) Des	nswered 'Yes' on	Form 990, Part IV, line	e 11d See Form	
Part IX Other Assets. Complete if the organization and (a) Description (a) Description (b) Description (a) Description (b) Description (b) Description (c) Description (c) Description (c) Description (d) Des	nswered 'Yes' on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and (a) Description (b) must equal Form 990, Part X, col (B) line 15) See Form 990, Part X, line 25.	nswered 'Yes' on on	· · · · · · · · · · · · · · · · · · ·		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and (a) Description (b) must equal Form 990, Part X, col (B) line 15) See Form 990, Part X, line 25.	nswered 'Yes' on	· · · · · · · · · · · · · · · · · · ·		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability	nswered 'Yes' on on	· · · · · · · · · · · · · · · · · · ·		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	nswered 'Yes' on on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	nswered 'Yes' on on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	nswered 'Yes' on on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	nswered 'Yes' on on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	nswered 'Yes' on on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	nswered 'Yes' on on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	nswered 'Yes' on on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	nswered 'Yes' on on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization and See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	nswered 'Yes' on on			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organiz See Form 990, Part X, line 25.	nswered 'Yes' on on			(b) Book value

Schedule D (Form 990) 2015

Part X, Line 2

7011		ization answered 'Yes' on Form 990, Part IV, line 12a.	bei K	Etuili
1		r support per audited financial statements	1	
2	Amounts included on line 1 bu	t not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses)	on investments 2a		
b	Donated services and use of fa	acilities 2b		
c	Recoveries of prior year grants	3 2c		
d	Other (Describe in Part XIII)			
e	Add lines 2a through 2d	 	2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5		4c. (This must equal Form 990, Part I, line 12)	5	
Part		kpenses per Audited Financial Statements With Expense lization answered 'Yes' on Form 990, Part IV, line 12a.	s per	Return.
1	Total expenses and losses per	raudited financial statements	1	
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25		
а	Donated services and use of fa	acilities		
b	Prior year adjustments	2b		
c	Otherlosses			
d	Other (Describe in Part XIII)			
e	Add lines 2a through 2d		2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	
4	A mounts included on Form 99	0, Part IX, line 25, but not on line 1:		
а	Investment expenses not inclu	uded 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 ar	nd 4c. (This must equal Form 990, Part I, line 18)	5	
Part	XIII Supplemental Info	ormation		
Part		Part II, lines $3,5$, and 9 , Part III, lines $1a$ and 4 , Part IV, lines $1b$ and 2 lines $2d$ and $4b$, $4b$, and Part XII, lines $2d$ and $4b$. Also complete this part to		de any additional
	Return Reference	Explanation		

THIS TOPIC

THE ORGANIZATION FOLLOWS THE PROVISION OF FASB ASC TOPIC ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT

Schedule D (Form 990) 2015		Page 5
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	

DLN: 93493017015597

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-F7, 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

Inspection

Name of the organization **Employer identification number** Stand for Children Inc

52-2146673 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.

- Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities Check all that apply ✓ Mail solicitations ▼ Solicitation of non-government grants ▼ Internet and email solicitations Solicitation of government grants
- Phone solicitations Special fundraising events
- Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising ✓Yes No services?
- If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	(iii) DId fundraiser have custody or control of contributions? Yes No		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
1 LORI HARDWICK PO BOX 25445 PORTLAND, OR 97298	DONOR PROSPECTING, TARGETING, AND SOLICITATION		Νo	50,800	30,000	20,800
2 AMELIORATE LLC 1919 W VIRGINIA AVE	BUILD DONOR BASE, ASSIST AND HELP PROCURE DONATIONS		No	47,000	2,400	44,600
3						
4						
5						
6						
7						
8						
9						
10						
Total	•		>	97,800	32,400	65,400

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

CA, CO, CT, GA, IL, MD, MA, NJ, NY, NC, OK, OR, PA, RI, SC, TN, VA, WA

Pa	rt II Fundraising Events. Complete if the organization fundraising event contribution receipts greater than \$5,000.	ns and gross income			
		(a) Event #1	(b) Event #2	(c)O ther events	(d) Total events
		(event type)	(event type)	(total number)	(add col (a) through col (c))
rkie					
Reverkie	1 Gross receipts				
ŭ	2 Less Contributions				
	Gross income (line 1 minus line 2)				
	4 Cash prizes				
	5 Noncash prizes				
Se	6 Rent/facility costs				
Expenses	7 Food and beverages				
찣	8 Entertainment				
Direct	9 Other direct expenses				
۵	10 Direct expense summary Add lines 4	through 9 in column (d)		
Do.	11 Net income summary Subtract line 1 till Gaming.	0 from line 3, column (d)	<u> ▶</u>	
<u> </u>	Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on	Form 990, Part IV, line	e 19, or reported mo	re than \$15,000 on
Revenue		(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1 Gross revenue				
nses	2 Cash prizes				
A P	3 Noncash prizes				
Direct E	4 Rent/facility costs				
	5 Other direct expenses				
		Yes %	├ Yes%	Yes %	
	6 Volunteerlabor	☐ No	☐ No	☐ No	
	7 Direct expense summary Add lines 2	through 5 in column (d)		
	8 Net gaming income summary Subtrac	ct line 7 from line 1, co	lumn (d)		
9 a	Enter the state(s) in which the organizat		•		Yes No
b	If "No," explain	-			
10a b	Were any of the organization's gaming li	censes revoked, suspe			Yes No
_					

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493017015597 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number Stand for Children Inc 52-2146673 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (d) A mount of cash (a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2015

SUPPORT, THE ORGANIZATION DID NOT MONITOR THE USE OF THE GRANT FUNDS.

Additional Data

OKLAHOMA CITY, OK

93-1176313

OREGON STUDENT

635 NE DEKUM ST PORTLAND, OR 97211

FOUNDATION

73101

Software ID: Software Version:

EIN: 52-2146673

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

501(C)(3)

Name: Stand for Children Inc

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant ıf applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 26-0596684 501(C)(4) 100,500 GENERAL OPERATING EDUCATION REFORM NOW ADVOCACY INC SUPPORT 325 GOLD STREET BROOKLYN, NY 11201 OKLAHOMA'S CHILDREN 47-5179130 501(C)(4) 550,000 GENERAL OPERATING OUR FUTURE INC SUPPORT PO BOX 2285

75,000

GENERAL OPERATING

SUPPORT



Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

2015 **Open to Public** Inspection

OMB No 1545-0047

DLN: 93493017015597

Treasurv Internal Revenue Service

990 Schedule O. Supplemental Information

RT OF THE ORGANIZATION'S PERMANENT RECORDS

Explanation

BY LAWS WERE ALSO AMENDED TO ADD THE POSITION OF CHIEF OPERATING OFFER AS ONE OF THE ORGANIZATION'S

Employer identification number

52-2146673

OFFICERS

THE ORGANIZATION DOES NOT HAVE COMMITTEES WITH AUTHORITY TO ACT ON BEHALE OF THE GOVERNING BODY IF THE BOARD OF DIRECTORS EVER CREATES ANY SUCH COMMITTEE. THE ORGANIZATION'S BY LAW S REQUIRE IT TO CONTEMPORANEOUSLY DOCUMENT COMMITTEE MEETINGS HELD AND TO MAINTAIN SUCH RE

CORDS. ALONG WITH ANY WRITTEN ACTIONS TAKEN BY SUCH COMMITTEES BY UNANIMOUS CONSENT. AS PA

Form 990. Part VI. Section A. line 8b

Department of the

Stand for Children Inc.

Return

Reference Form 990. Part

VI. Section A.

line 4

Name of the organization

THE ORGANIZATION'S BY LAWS WERE AMENDED TO FLIMINATE A REQUIREMENT TO PAY DUES IN ORDER TO QUALIFY FOR A MEMBERSHIP CLASS NOW THE ORGANIZATION HAS ONLY ONE MEMBERSHIP CLASS. WHICH CONSISTS OF INDIVIDUALS WHO AFFIRMATIVELY ACCEPT THE ORGANIZATION'S INVITATION TO BECOME MEMBERS. PLEDGE TO SUPPORT THE ORGANIZATION'S EFFORTS. AND AGREE TO RECEIVE COMMUNICATIONS FROM THE ORGANIZATION THE

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

Complete to provide information for responses to specific questions on

990 Schedule O, Supplemental Information

Return Reference Explanation

Form 990, Part VI.

Section B, line 11

BOARD OF DIRECTORS FOR REVIEW AND COMMENT THE BOARD'S AUDIT COMMITTEE MEETS TO FORMALLY REVIEW
THE RETURN ON BEHALF OF THE BOARD PRIOR TO FILING WITH THE IRS

ONCE COMPLETED BY STAFF AND EXTERNAL CPA FIRM. FORM 990 IS CIRCULATED ELECTRONICALLY TO THE ENTIRE

Form 990, Part VI,
Section B, line 12c

UPON ELECTION TO THE BOARD OF DIRECTORS, EACH NEW BOARD MEMBERS PROVIDES A SIGNED CONFLICT

OF INTEREST DISCLOSURE. THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS IS CHARGED WITH ENS

URING THAT THE CONFLICT OF INTEREST POLICY IS FOLLOWED AND QUESTIONS OFFICERS AND DIRECTOR

S AS A PPROPRIATE TO CONFIRM COMPLIANCE.

990 Schedule O, Supplemental Information Return

Reference Form 990, Part

line 15

line 18

Explanation

VI, Section B, BASED ON CURRENT MARKET RESEARCH AND ANALYSIS ALL OTHER OFFICERS AND KEY EMPLOYEES - COMPENSATION

IS DETERMINED THE SAME AS ALL OTHER EMPLOYEES. ALL POSITIONS HAVE A SALARY RANGE WHICH ARE REVIEWED. EVERY 2 YEARS BY HR DIRECTOR EMPLOYEE'S COMPENSATION IS BASED ON A NINUAL PERFORMANCE REVIEW AND WHERE EMPLOYEE FALLS WITHIN THEIR SALARY RANGE, ALL CHANGES TO COMPENSATION ARE REVIEWED AND

CHIEF EXECUTIVE OFFICER - COMPENSATION IS REVIEWED AND DETERMINED ANNUALLY BY BOARD OF DIRECTORS

A PPROVED BY BY THE CHIEF OPERATING OFFICER CHIEF OPERATING OFFICER'S COMPENSATION IS REVIEWED AND APPROVED BY CHIEF EXECUTIVE OFFICER. Form 990, Part FORM 1023 IS A VAILABLE UPON REQUEST FORM 990 IS ON THE WEBSITE VI. Section C.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section C, line 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC AS REQUIRED BY APPLICABLE LAW AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE.
Form 990, Part IX, line 11g	TEMPORARY STAFFING Program service expenses 871,404 Management and general expenses 0 F undraising expenses 0 Total expenses 871,404 MARKETING Program service expenses 363,401 Management and general expenses 0 Fundraising expenses 0 Total expenses 363,401 CAMPA IGN CONSULTANTS Program service expenses 291,232 Management and general expenses 0 Fundraising expenses 0 Total expenses 0 Total expenses 217,532 Management and general expenses 0 Fundraising expenses 0 Total expenses 217,532 POLLING Program service expenses 136,597 Management and general expenses 0 Fundraising expenses 0 Total expenses 136,597 FOCUS GROUPS Program service expenses 46,080 Management and general expenses 0 Fundraising expenses 0 Total expenses 35,824 Management and general expenses 0 Fundraising expenses 0 Total expenses 35,824 TRANSLATION SERVICES Program service expenses 19,517 Management and general expenses 0 Fundraising expenses 0 Total expenses 6,354 Management and general expenses 0 Fundraising expenses 6,72

Fundametics.

990 Schedule O, Supplemental Information

Return Reference Explanation

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

Related Organizations and Unrelated Partnerships

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

2015

DLN: 93493017015597 OMB No 1545-0047

Open to Public

Inspection

Employer identification number

52-2146673

Department of the Treasury Internal Revenue Service Name of the organization

Stand for Children Inc

(Form 990)

▶ Attach to Form 990.

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

Part I Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. (b) (c) (d) (f) (e) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year. (b) (c) (d) (e) (f) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No See Additional Data Table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2015

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging	(k) Percentage ownership
] 3117			Yes	No	1	Yes	No	
Part TV Identification of Polated Organizations Taxable a	<u> </u>			<u> </u>								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V. Transactions With Polated Owner institute Complete of the exceptions	anguaged IIVaall on Farm	. 000 Dowt IV line	24 25h oz 26		Ра	ge 3	
Part V Transactions With Related Organizations Complete if the organization	answered "Yes" on Form	990, Part IV, line	9 34, 35D, or 36.		Vaa	No	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No	
1 During the tax year, did the organization engage in any of the following transactions with one or	<u> </u>			<u> </u>		-	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No	
b Gift, grant, or capital contribution to related organization(s)				1b	Yes	—	
c Gift, grant, or capital contribution from related organization(s)				1 c		No	
d Loans or loan guarantees to or for related organization(s)				1d		No	
e Loans or loan guarantees by related organization(s)				1e		No	
f Dividends from related organization(s)				1f		No	
g Sale of assets to related organization(s)							
h Purchase of assets from related organization(s)							
i Exchange of assets with related organization(s)							
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No	
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No	
Performance of services or membership or fundraising solicitations for related organization(s)						No	
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No	
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .				1n	Yes		
o Sharing of paid employees with related organization(s)				10	Yes		
p Reimbursement paid to related organization(s) for expenses				1 p		No	
q Reimbursement paid by related organization(s) for expenses				1 q	Yes		
${f r}$ Other transfer of cash or property to related organization(s)				1r		No	
s Other transfer of cash or property from related organization(s)				1s		No	
2 If the answer to any of the above is "Yes," see the instructions for information on who must co	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	1	ds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount ı	nvolved		
ee Additional Data Table							

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

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

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



26-2956193

Software ID: Software Version:

EIN: 52-2146673

Name: Stand for Children Inc

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations (a) (b) (d) (e) (f) (g) (c) Direct controlling Name, address, and EIN of related organization Primary activity Legal domicile Exempt Code Public charity Section 512 (b)(13) (state status section entity or foreign (if section 501(c) controlled country) entity? (3)) Yes No STAND FOR POLITICAL ACTION 527 ΑZ Yes STAND FOR CHILDREN ARIZONA PAC COMMITTEE CHILDREN INC 2121 SW BROADWAY STE 111 PORTLAND, OR 97201 27-3208710 STAND FOR INDEPENDENT AZ527 Yes EXPENDITURE STAND FOR CHILDREN AZ IEC CHILDREN INC 2121 SW BROADWAY STE 111 COMMITTEE PORTLAND, OR 97201 46-0919920 POLITICAL ACTION CO 527 STAND FOR Yes STAND FOR CHILDREN IN DENVER PC CHILDREN INC COMMITTEE 2121 SW BROADWAY STE 111 PORTLAND, OR 97201 27-0595023 527 INDEPENDENT STAND FOR CO Yes STAND FOR CHILDREN SMALL DONOR COMMITTEE EXPENDITURE CHILDREN INC 2121 SW BROADWAY STE 111 COMMITTEE PORTLAND, OR 97201 27-2961130 INDEPENDENT CO 527 STAND FOR Yes BETTER SCHOOLS FOR A STRONGER COLORADO EXPENDITURE CHILDREN INC 2121 SW BROADWAY STE 111 СОММІТТЕЕ PORTLAND, OR 97201 27-2960430 STAND FOR INDEPENDENT CO 527 Yes RURAL VOICES FOR EDUCATION IEC EXPENDITURE CHILDREN INC 2318 CURTIS ST COMMITTEE DENVER, CO 80205 81-2613483 STAND FOR POLITICAL ACTION ΙL 527 Yes STAND FOR CHILDREN ILLINOIS PAC CHILDREN INC COMMITTEE 850 W JACKSON BLVD STE 330 CHICAGO, IL 60607 27-3080460 INDEPENDENT STAND FOR H 527 Yes STAND FOR CHILDREN IL IEC CHILDREN INC EXPENDITURE 850 W JACKSON BLVD STE 330 COMMITTEE CHICAGO, IL 60607 47-1275683 POLITICAL ACTION ΙN 527 STAND FOR Yes STAND FOR CHILDREN INDIANA PAC CHILDREN INC COMMITTEE 407 FULTON STREET STE 101 INDIANAPOLIS, IN 46202 45-5278807 POLITICAL ACTION LA 527 STAND FOR Yes STAND FOR CHILDREN LOUISIANA PAC CHILDREN INC 2121 SW BROADWAY STE 111 PORTLAND, OR 97201 45-5618370 INDEPENDENT LA 527 STAND FOR Yes STAND FOR CHILDREN LOUISIANA IEC EXPENDITURE CHILDREN INC 2121 SW BROADWAY STE 111 COMMITTEE PORTLAND, OR 97201 47-1797001 INDEPENDENT STAND FOR Yes 527 MΑ STAND FOR CHILDREN MASSACHUSETTS IEC ONLY PAC CHILDREN INC EXPENDITURE 2121 SW BROADWAY STE 111 COMMITTEE PORTLAND, OR 97201 80-0692068 POLITICAL ACTION ОК 527 STAND FOR Yes STAND FOR CHILDREN OKLAHOMA PAC CHILDREN INC COMMITTEE 2121 SW BROADWAY STE 111 PORTLAND, OR 97201 46-3700076 INDEPENDENT 527 STAND FOR OK Yes OKLAHOMANS FOR STRONG PUBLIC SCHOOLS CHILDREN INC EXPENDITURE 2121 SW BROADWAY STE 111 COMMITTEE PORTLAND, OR 97201 47-2031544 STAND FOR POLITICAL ACTION OR 527 Yes STAND FOR CHILDREN OREGON PAC COMMITTEE CHILDREN INC 2121 SW BROADWAY STE 111 PORTLAND, OR 97201 80-0760053 POLITICAL ACTION OR 527 STAND FOR Yes STAND FOR CHILDREN 527 COMMITTEE CHILDREN INC 2121 SW BROADWAY STE 111 PORTLAND, OR 97201 47-5594853 STAND FOR POLITICAL ACTION ΤN 527 Yes COMMITTEE STAND PAC OF TENNESSEE CHILDREN INC 2121 SW BROADWAY STE 111 PORTLAND, OR 97201 26-3405346 INDEPENDENT TN527 STAND FOR Yes STAND FOR CHILDREN INC TENNESSEE IEC EXPENDITURE CHILDREN INC 2121 SW BROADWAY STE 111 COMMITTEE PORTLAND, OR 97201 45-5199489 POLITICAL ACTION 527 STAND FOR ΤX Yes STAND FOR CHILDREN TEXAS PAC CHILDREN INC. COMMITTEE 2121 SW BROADWAY STE 111 PORTLAND, OR 97201 45-2380531 POLITICAL ACTION WA 527 STAND FOR Yes STAND FOR CHILDREN WASHINGTON PAC CHILDREN INC COMMITTEE 2121 SW BROADWAY STE 111 PORTLAND, OR 97201

Form	Form 990, Schedule R, Part V - Transactions With Related Organizations							
	(a) Name of related organization	(b) Transaction type(a-s)	(c) A mount Involved	(d) Method of determining amount involved				
(1)	RURAL VOICES FOR EDUCATION IEC	В	66,860					
(1)	STAND FOR CHILDREN AZ IEC	В	134,333					
(2)	STAND FOR CHILDREN ILLINOIS PAC	0	51,546					
(3)	STAND FOR CHILDREN LOUISIANA IEC	В	57,908					
(4)	STAND FOR CHILDREN OREGON PAC	В	250,000					
(5)	STAND FOR CHILDREN TENNESSEE IEC	В	868,552					
(6)	STAND FOR CHILDREN WASHINGTON PAC	0	170,223					