

For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation HUNT ALTERNATIVES		A Employer identification number 04-3397500	
Number and street (or P O box number if mail is not delivered to street address) 625 MT AUBURN ST NO 205		Room/suite	B Telephone number (see instructions) (617) 995-1900
City or town, state or province, country, and ZIP or foreign postal code CAMBRIDGE, MA 02138		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 941,242	J Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	10,899,271			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	349	349	349	
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	146	0	146	
	12 Total. Add lines 1 through 11	10,899,766	349	495	
	13 Compensation of officers, directors, trustees, etc	190,508	0	0	197,071
	14 Other employee salaries and wages	2,965,119	0	0	2,945,971
	15 Pension plans, employee benefits	670,309	0	0	679,244
	16a Legal fees (attach schedule)	7,051	0	0	8,170
	b Accounting fees (attach schedule)	18,833	0	0	12,583
	c Other professional fees (attach schedule)	4,621,073	0	0	4,658,067
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion	70,363	0	0	
	20 Occupancy	604,081	0	0	610,196
	21 Travel, conferences, and meetings	572,240	0	0	624,111
	22 Printing and publications	6,849	0	0	2,290
	23 Other expenses (attach schedule)	127,283	0	0	124,722
	24 Total operating and administrative expenses. Add lines 13 through 23	9,853,709	0	0	9,862,425
	25 Contributions, gifts, grants paid	984,239			941,594
	26 Total expenses and disbursements. Add lines 24 and 25	10,837,948	0	0	10,804,019
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	61,818			
	b Net investment income (if negative, enter -0-)		349		
				495	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing	315,070	378,245	378,245
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶ <u>6,743</u>			
		Less allowance for doubtful accounts ▶ _____	112,013	6,743	6,743
	4	Pledges receivable ▶ _____			
		Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable	141,312	84,096	84,096
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____			
		Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	83,530	111,412	111,412
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____			
	Less accumulated depreciation (attach schedule) ▶ _____				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)				
14	Land, buildings, and equipment basis ▶ <u>858,305</u>				
	Less accumulated depreciation (attach schedule) ▶ <u>497,559</u>	431,109	360,746	360,746	
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,083,034	941,242	941,242	
Liabilities	17	Accounts payable and accrued expenses	1,001,202	847,207	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)	573,230	523,615	
	23	Total liabilities (add lines 17 through 22)	1,574,432	1,370,822	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☒ and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	-576,708	-429,580	
	25	Temporarily restricted	85,310	0	
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ☐ and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	-491,398	-429,580	
	31	Total liabilities and net assets/fund balances (see instructions) .	1,083,034	941,242	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	-491,398
2	Enter amount from Part I, line 27a	2	61,818
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	-429,580
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	-429,580

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	13,206,464	1,021,012	12 934680
2014	9,980,485	1,703,744	5 857972
2013	8,110,225	2,900,587	2 796063
2012	9,655,646	2,936,760	3 287857
2011	5,997,009	1,358,677	4 413859
2 Total of line 1, column (d)			2 29 290431
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 5 858086
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			4 964,516
5 Multiply line 4 by line 3			5 5,650,218
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 3
7 Add lines 5 and 6			7 5,650,221
8 Enter qualifying distributions from Part XII, line 4			8 10,804,019

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	3
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	3
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	3
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	3
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ MA, DC, CO, MD, VA, NY, FL, OR, UT, WA, PA, IL, CA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	No
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	Yes
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► HUNTALTERNATIVES.ORG	13	Yes	
14	The books are in care of ► HUNT ALTERNATIVES LLC Telephone no ► (617) 995-1975			

Located at ► 625 MT AUBURN ST STE 205 CAMBRIDGE MA ZIP+4 ► 02138

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here	☐		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☒ Yes ☐ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☒ Yes ☐ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☒ Yes ☐ No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes ☒ No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	☐ Yes ☒ No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b	No
	Organizations relying on a current notice regarding disaster assistance check here.	► ☐		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?		1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?	☐ Yes ☒ No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).		2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No		
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016).		3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?		4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	☒ Yes ☐ No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No			
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	☐	5b	Yes	
Organizations relying on a current notice regarding disaster assistance check here.	☐			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☒ Yes ☐ No			
If "Yes," attach the statement required by Regulations section 53.4945–5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	☐ Yes ☒ No	6b		No
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No			
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	☐ Yes ☒ No	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MIRSAD JACEVIC HA625 MT AUBURN ST STE 205 CAMBRIDGE, MA 02138	CHIEF TRAINING OFFIC 40 00	161,534	35,537	0
JACQUELINE O'NEILL HA625 MT AUBURN ST STE 205 CAMBRIDGE, MA 02138	LEAD ADVOCACY COORDI 40 00	161,534	35,537	0
NICOLE QUINLAN HA625 MT AUBURN ST STE 205 CAMBRIDGE, MA 02138	DIRECTOR, PARTNERSHIP 40 00	145,000	31,900	0
ZIBA CRANMER HA625 MT AUBURN ST STE 205 CAMBRIDGE, MA 02138	DIRECTOR, DEMAND ABO 40 00	142,192	31,282	0
SOKOL SHTYLLA HA625 MT AUBURN ST STE 205 CAMBRIDGE, MA 02138	DEP DIR MGMT & ADMIN 40 00	129,931	28,585	0
Total number of other employees paid over \$50,000.				23

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
HUNT ALTERNATIVES LLC 625 MT AUBURN ST STE 205 CAMBRIDGE, MA 02138	MANAGEMENT SERVICES	2,445,107
QUALTRICS LLC 2250 N UNIVERSITY PARKWAY 48-C PROVO, UT 84604	PROGRAM CONSULTING	94,398
ROOS CONSULTING AB BERGSGATEN 7 VASTERVIK VASTERVIK 59331 SW	PROGRAM CONSULTING	65,544
ANGELYN PRITCHARD BAYLESS 5415 E CALLE VENTURA PHOENIX, AZ 85018	PROGRAM CONSULTING	63,650
CAROL EDGAR PO BOX 575 FORESTVILLE, CA 95436	MEDIA CONSULTING	40,000
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 INCLUSIVE SECURITY IS TRANSFORMING DECISION MAKING ABOUT WAR AND PEACE BY EQUIPPING DECISION MAKERS WITH KNOWLEDGE TOOLS AND CONNECTIONS THAT STRENGTHEN THEIR ABILITY TO DEVELOP INCLUSIVE POLICIES. BRINGING ALL STAKEHOLDERS TOGETHER, ESPECIALLY WOMEN, IN PEACE PROCESSES IMPROVES THE LIKELIHOOD OF ITS SUCCESS. IN 2016, WE STRENGTHENED THE WILL AND CAPACITY OF THOSE WHO SHAPE PEACE AND SECURITY POLICY, PROVIDED RESEARCH ON WHY INCLUSION MATTERS AND GUIDANCE ON HOW IT CAN BE ACHIEVED, EQUIPPED WOMEN TO CONTRIBUTE EFFECTIVELY TO PEACE PROCESSES, AND SUPPORTED COALITIONS OF DIVERSE LEADERS WHO OFFER PRACTICAL SOLUTIONS TO INTRACTABLE CONFLICTS.	5,202,262
2 DEMAND ABOLITION SEEKS TO ERADICATE THE ILLEGAL COMMERCIAL SEX INDUSTRY IN THE UNITED STATES BY COMBATING DEMAND FOR PURCHASED SEX.	3,614,543
3 POLITICAL PARITY'S GOAL IS TO INCREASE THE NUMBER OF WOMEN IN HIGH-LEVEL POLITICAL OFFICES VIA NONPARTISAN ACTIVITIES WHICH EDUCATE ALL STAKEHOLDERS FOR THE NEED FOR MORE WOMEN IN HIGH ELECTED OFFICES IN THE U.S.	160,239
4 PRIME MOVERS SUPPORTS LEADERS WHO ENGAGE MASSES OF PEOPLE TO CREATE A MORE JUST SOCIETY. THE ORGANIZATION OFFERS THESE LEADERS INDIVIDUAL PROFESSIONAL DEVELOPMENT GRANTS AND ONGOING ENGAGEMENT IN A DISTINCTIVE "COMMUNITY OF PRACTICE."	774,214

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 _____ _____ _____	
2 _____ _____ _____	
All other program-related investments. See instructions.	
3 _____ _____ _____	
Total. Add lines 1 through 3. ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	416,207
c	Fair market value of all other assets (see instructions).	1c	562,997
d	Total (add lines 1a, b, and c).	1d	979,204
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	979,204
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	14,688
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	964,516
6	Minimum investment return. Enter 5% of line 5.	6	48,226

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	10,804,019
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	10,804,019
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	3
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	10,804,016

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.				
e From 2015.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ _____				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2016 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				
c Excess from 2014.				
d Excess from 2015.				
e Excess from 2016.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. **1998-06-05**

b Check box to indicate whether the organization is a private operating foundation described in section ☒ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	495	13,096	1,155	5,426	20,172
b 85% of line 2a	421	11,132	982	4,612	17,146
c Qualifying distributions from Part XII, line 4 for each year listed	10,804,019	13,206,466	9,980,494	8,110,225	42,101,204
d Amounts included in line 2c not used directly for active conduct of exempt activities	941,594	985,182	1,271,316	90,200	3,288,292
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	9,862,425	12,221,284	8,709,178	8,020,025	38,812,912
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets	941,242	1,083,034	1,144,841	2,074,578	5,243,695
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	941,242	1,083,034	1,144,841	2,074,578	5,243,695
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					0
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
SWANEE HUNT

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				941,594
b <i>Approved for future payment</i> See Additional Data Table				
Total ▶ 3b				324,116

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) (See instructions)
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments			14	349	
4 Dividends and interest from securities. . . .					
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a CREDIT CARD PTS REDEEMED _____					146
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e). . .		0		349	146
13 Total. Add line 12, columns (b), (d), and (e).			13		495

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes[illegible]

Part XVII

- | | Yes | No |
|-------|-----|----|
| 1a(1) | | No |
| 1a(2) | | No |
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |
| 1c | | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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

Print/Type preparer's name DEBORAH A HOPKINS	Preparer's Signature	Date	Check if self-employed ► ☐	PTIN P00167843
Firm's name ► KAHN LITWIN RENZA & CO LTD				Firm's EIN ► 05-0409384
Firm's address ► 800 SOUTH ST SUITE 300 WALTHAM, MA 02453				Phone no (781) 547-8800

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
SWANEE HUNT	DIRECTOR, CHAIR, PRESIDENT 10 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
LILLIAN SHUFF	DIRECTOR, VICE PRESIDENT 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
MARVA HAMMONS	DIRECTOR, SECRETARY 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
LORETTA FEEHAN	DIRECTOR, TREASURER 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
KATHERINE ARCHULETTA	DIRECTOR (AS OF 4/16) 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
ALICE F EMERSON	DIRECTOR 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
DAVID FLINK	DIRECTOR 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
RAY HAMMOND	DIRECTOR 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
KERRY HEALEY	DIRECTOR (4/16-6/16) 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
JANE LUTE	DIRECTOR (4/16-6/16) 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
FERN PORTNOY	DIRECTOR 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
RODNEY SHUFF	DIRECTOR 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
WILLIAM SNYDER	DIRECTOR 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
ELIZABETH BENHAM	ASSISTANT SECRETARY 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				
KATHERINE SEARS	ASSISTANT TREASURER 2 00	0	0	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
EVELYN THORNTON	CHIEF EXECUTIVE OFFICER 40 00	161,534	35,537	0
C/O HUNT ALTERNATIVES 625 MT AUBURN ST CAMBRIDGE, MA 02138				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
ABEKAM FOUNDATION 279 POND STREET JAMAICA PLAIN, MA 02119	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	45,000
ALAMEDA COUNTY DISTRICT ATTORNEY'S OFFICE 1225 FALLON ST OAKLAND, CA 94612	NONE	GOVERNMENT ENTITY	DEMAND ABOLITION GRANT	37,500
APB CONSULTING LLC 14631 SOUTH THIRD AVE PHOENIX, AZ 85045	NONE	EXPENDITURE RESPONSI	DEMAND ABOLITION GRANT	40,950
BILATERAL SAFETY CORRIDOR COALITION 121 EAST 31ST ST NATIONAL CITY, CA 91950	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	60,000
BOSTON POLICE DEPARTMENT ONE CITY HALL SQUARE RM 38 BOSTON, MA 02201	NONE	GOVERNMENT ENTITY	DEMAND ABOLITION GRANT	15,000
Total ▶ 3a				941,594

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTER FOR AMERICAN WOMEN & POLITICS RUTGERS UNIV 191 RYDERS LANE NEW BRUNSWICK, NJ 08901	NONE	PUBLIC CHARITY	POLITICAL PARITY GRANT	150,000
CENTER FOR MEDIA JUSTICE 436 14TH STREET OAKLAND, CA 94612	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	17,500
CHILDREN AT RISK 2900 LIVE OAK STREET DALLAS, TX 75204	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	48,500
CHILDREN AT RISK 2900 WESLAYAN STE 400 HOUSTON, TX 77027	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	48,500
COOK COUNTY SHERIFF'S OFFICE 69 W WASHINGTON ST CHICAGO, IL 60602	NONE	GOVERNMENT ENTITY	DEMAND ABOLITION GRANT	15,145
Total 				941,594
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DENVER DISTRICT ATTORNEY'S OFFICE 201 W COLFAX AVE DEPT 801 DENVER, CO 80202	NONE	GOVERNMENT ENTITY	DEMAND ABOLITION GRANT	1,000
DENVER VALE BOARD 201 W COLFAX AVE DENVER, CO 80202	NONE	GOVERNMENT ENTITY	DEMAND ABOLITION GRANT	60,000
FUND FOR THE CITY OF NEW YORK INC 121 AVENUE OF THE AMERICAS 6 NEW YORK, NY 10013	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	10,000
HAVENATL 395 PRYOR ST SW ATLANTA, GA 30312	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	1,000
HISPANAS ORGANIZED FOR POLITICAL EQUALITY 634 S SPRING ST LOS ANGELES, CA 90014	NONE	PUBLIC CHARITY	POLITICAL PARITY GRANT	20,000
Total ▶ 3a				941,594

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOLLABACK 30 THIRD AVENUE 800B BROOKLYN, NY 11217	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	15,000
KING COUNTY PROSECUTING ATTORNEY'S OFFICE 516 3RD AVE SEATTLE, WA 98104	NONE	GOVERNMENT ENTITY	DEMAND ABOLITION GRANT	48,000
MY LIFE MY CHOICE 989 COMMONWEALTH AVENUE BOSTON, MA 02215	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	3,500
NATIONAL HISPANIC LEADERSHIP AGENDA 815 16TH STREET NW WASHINGTON, DC 20006	NONE	PUBLIC CHARITY	POLITICAL PARITY GRANT	20,000
NEW ORLEANS WORKERS CENTER FOR RACIAL JUSTICE 217 N PRIEUR STREET NEW ORLEANS, LA 70112	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	15,000
Total ▶ 3a				941,594

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ORGANIZATION FOR PROSTITUTION SURVIVORS PO BOX 22635 SEATTLE, WA 98122	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	39,000
SEATTLE AGAINST SLAVERY PO BOX 95662 SEATTLE, WA 98145	NONE	PUBLIC CHARITY	DEMAIN ABOLITION GRANT	12,500
SOJOURNERS 3333 14TH STREET WASHINGTON, DC 20010	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	5,000
THE EPIK PROJECT PO BOX 545 VANCOUVER, WA 98666	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	47,500
THE NATIONAL GAY & LESBIAN TASK FORCE 1325 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20005	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	15,000
Total ▶ 3a				941,594

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THORN 200 PARK AVE NEW YORK, NY 10003	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	51,000
TRUSTEES OF BOSTON UNIVERSITY BOSTON UNIVERSITY 85 E NEWTON STREET BOSTON, MA 021182340	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	29,999
WORKING TODAY 408 JAY STREET BROOKLYN, NY 11201	NONE	PUBLIC CHARITY	PRIME MOVERS GRANT	22,500
YOUTHSPARK INC 395 PRYOR ST SW ATLANTA, GA 30312	NONE	PUBLIC CHARITY	DEMAND ABOLITION GRANT	47,500
Total ▶ 3a				941,594

TY 2016 Accounting Fees Schedule**Name:** HUNT ALTERNATIVES**EIN:** 04-3397500

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING/TAX SERVICES	18,833	0	0	12,583

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Depreciation Schedule

Name: HUNT ALTERNATIVES

EIN: 04-3397500

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
FURNITURE & FIXTURES	2002-05-31	100,254	100,254	200DB	7 0000000000000	0	0	0	
FURNITURE & FIXTURES	2007-05-30	46,950	46,950	200DB	7 0000000000000	0	0	0	
LEASEHOLD IMPROVEMENTS	2007-04-13	52,427	11,704	SL	39 0000000000000	1,344	0	0	
EQUIPMENT	2007-04-13	32,483	32,483	200DB	5 0000000000000	0	0	0	
FURNITURE & FIXTURES	2008-06-30	4,631	4,631	200DB	7 0000000000000	0	0	0	
FURNITURE & FIXTURES	2012-01-26	26,151	14,633	SL	7 0000000000000	3,736	0	0	
FURNITURE & FIXTURES	2012-08-14	95,730	46,727	SL	7 0000000000000	13,676	0	0	
FURNITURE & FIXTURES	2012-09-19	7,500	3,570	SL	7 0000000000000	1,072	0	0	
LEASEHOLD IMPROVEMENTS	2012-06-01	460,395	155,882	SL	10 5800000000000	43,502	0	0	
LEASEHOLD IMPROVEMENTS	2013-07-01	15,850	4,170	SL	9 5000000000000	1,669	0	0	
COMPUTER EQUIPMENT-PC LEASE BUY-OUT	2014-11-30	8,429	4,566	SL	2 0000000000000	3,863	0	0	
COMPUTER EQUIPMENT	2014-11-30	7,505	1,626	SL	5 0000000000000	1,501	0	0	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Expenditure Responsibility Statement

Name: HUNT ALTERNATIVES

EIN: 04-3397500

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
APB CONSULTING LLC	5415 E CALLE VENTURA PHOENIX, AZ 85018	2016-03-24	15,000	PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM	15,000		2/18/17		
APB CONSULTING LLC	5415 E CALLE VENTURA PHOENIX, AZ 85018	2016-05-13	7,500	PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM	7,500		2/18/17		
APB CONSULTING LLC	5415 E CALLE VENTURA PHOENIX, AZ 85018	2016-06-23	950	DEVELOPING AND TESTING DEMAND REDUCTION TACTICS IN PHOENIX METRO AREA - DEMAND ABOLITION PROGRAM	950		NO REPORT YET		
APB CONSULTING LLC	5415 E CALLE VENTURA PHOENIX, AZ 85018	2016-09-02	7,500	PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM	7,500		2/18/17		
APB CONSULTING LLC	5415 E CALLE VENTURA PHOENIX, AZ 85018	2016-11-21	7,500	PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM	7,500		2/18/17		
APB CONSULTING LLC	5415 E CALLE VENTURA PHOENIX, AZ 85018	2016-12-22	2,500	PHOENIX METRO COORDINATOR FUNDING - DEMAND ABOLITION PROGRAM	2,500		2/18/17		

TY 2016 Explanation of Non-Filing with Attorney General Statement

Name: HUNT ALTERNATIVES

EIN: 04-3397500

Statement:

THERE IS NO REQUIREMENT TO FILE THIS RETURN WITH THE ATTORNEY GENERAL OFFICES IN CO, DC AND WA.

TY 2016 Land, Etc. Schedule

Name: HUNT ALTERNATIVES

EIN: 04-3397500

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
FURNITURE & FIXTURES	100,254	100,254	0	
FURNITURE & FIXTURES	46,950	46,950	0	
LEASEHOLD IMPROVEMENTS	52,427	13,048	39,379	
EQUIPMENT	32,483	32,483	0	
FURNITURE & FIXTURES	4,631	4,631	0	
FURNITURE & FIXTURES	26,151	18,369	7,782	
FURNITURE & FIXTURES	95,730	60,403	35,327	
FURNITURE & FIXTURES	7,500	4,642	2,858	
LEASEHOLD IMPROVEMENTS	460,395	199,384	261,011	
LEASEHOLD IMPROVEMENTS	15,850	5,839	10,011	
COMPUTER EQUIPMENT-PC LEASE BUY-OUT	8,429	8,429	0	
COMPUTER EQUIPMENT	7,505	3,127	4,378	

TY 2016 Legal Fees Schedule**Name:** HUNT ALTERNATIVES**EIN:** 04-3397500

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	7,051	0	0	8,170

TY 2016 Other Expenses Schedule**Name:** HUNT ALTERNATIVES**EIN:** 04-3397500**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL DEVELOPMENT	777	0	0	777
PAYROLL ADMINISTRATION FEES	4,014	0	0	4,014
AUDIO/VISUAL	3,923	0	0	5,013
BANK SERVICE CHARGES	1,657	0	0	1,372
INFORMATION TECHNOLOGY	24,558	0	0	16,610
INSURANCE	39,414	0	0	37,774
MISCELLANEOUS	23,481	0	0	25,280
OFFICE EXPENSES & SUPPLIES	39,282	0	0	42,025
POSTAGE & SHIPPING	1,305	0	0	1,870
REFERENCE MATERIALS	62,391	0	0	57,196

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEES	3,617	0	0	3,617
TELECOMMUNICATIONS	35,733	0	0	41,879
COST SHARING	-112,869	0	0	-112,705

TY 2016 Other Income Schedule

Name: HUNT ALTERNATIVES

EIN: 04-3397500

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
CREDIT CARD PTS REDEEMED	146		146

TY 2016 Other Liabilities Schedule**Name:** HUNT ALTERNATIVES**EIN:** 04-3397500

Description	Beginning of Year - Book Value	End of Year - Book Value
DEFERRED LIABILITY - RENT	573,230	523,615

TY 2016 Other Professional Fees Schedule**Name:** HUNT ALTERNATIVES**EIN:** 04-3397500

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER CONSULTANTS	802,437	0	0	952,889
MANAGEMENT SERVICES	3,776,914	0	0	3,670,456
TRANSLATION SERVICES	21,406	0	0	21,406
HONORARIA	20,316	0	0	13,316

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>	OMB No 1545-0047 2016
	Name of the organization HUNT ALTERNATIVES	Employer identification number 04-3397500

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization HUNT ALTERNATIVES	Employer identification number 04-3397500
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Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Employer identification number

04-3397500

Part II	Noncash Property
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(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization HUNT ALTERNATIVES	Employer identification number 04-3397500
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

Additional Data

Software ID:
Software Version:
EIN: 04-3397500
Name: HUNT ALTERNATIVES

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	SWANEE HUNT FAMILY FOUNDATION	\$ 10,500,000	Person ☒
	625 MT AUBURN STREET		Payroll ☐
	CAMBRIDGE, MA02138		Noncash ☐ (Complete Part II for noncash contribution)
<u>2</u>	DEPT OF STATE USSESSS	\$ 238,846	Person ☒
	1701 N FT MEYER DRIVE BERKELEY BLDG		Payroll ☐
	ARLINGTON, VA22209		Noncash ☐ (Complete Part II for noncash contribution)
<u>3</u>	DEPT OF STATE US EMBASSY OF ISLAMABAD	\$ 54,785	Person ☒
	PUBLIC AFFAIRS SECTION AMERICAN EMB		Payroll ☐
	ISLAMABAD, PK		Noncash ☐ (Complete Part II for noncash contribution)
<u>4</u>	ELAINE NONNEMAN	\$ 10,000	Person ☒
	226 21ST AVE EAST		Payroll ☐
	SEATTLE, WA98112		Noncash ☐ (Complete Part II for noncash contribution)
<u>5</u>	THEODORE ANSBACHER-HUNT	\$ 6,138	Person ☒
	1550 DETROIT STREET APT 304		Payroll ☐
	DENVER, CO80206		Noncash ☐ (Complete Part II for noncash contribution)
<u>6</u>	VISIONARY WOMEN	\$ 15,000	Person ☒
	9663 SANTA MONICA BLVD 851		Payroll ☐
	BEVERLY HILLS, CA90210		Noncash ☐ (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HILTON WORLDWIDE INC		Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
	MEMPHIS SHARES SERVICES 755 CROSSOV	\$ 10,000	
	MEMPHIS, TN38117		
8	GOOGLE INC		Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
	PO BOX 2050	\$ 42,500	
	MOUNTAIN VIEW, CA94042		